



# **CITY OF STAMFORD CONSOLIDATED PLAN 2005 - 2010**

**DANNEL P. MALLOY, MAYOR**

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Housing, Community Development and Social Services Committee**

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**Timothy R. Beeble, Director, Community Development Office**

**Submitted to the  
U.S. Department of Housing and Urban Development  
Hartford, CT**

**AUGUST, 2005**



MAYOR  
DANNEL P. MALLOY



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August 5, 2005

Ms. Mary Ellen Morgan  
CPD Director  
US Dept. of Housing and Urban Development  
One Corporate Center  
Hartford, CT 06103-3220

RE: Consolidated Plan 2005-2010 and Annual Action Plan 2005

Dear Mary Ellen:

Enclosed are an original and two copies of Stamford's Consolidated Plan for 2005-2010 and its Annual Action Plan for Year 31 for the utilization of \$1,235,403 in Community Development Block Grant funding and \$685,600 in HOME Investment Partnerships Program funding.

We have used the new HUD software to guide us through the development of the Consolidated Plan. This Plan was developed by the Community Development staff in collaboration with representatives of non-profit and for-profit housing developers, homeless providers, social service providers, faith-based organizations, neighborhood and business organizations, the Housing Authority, and its tenants, elected officials, the Health Department, the Land Use Bureau, as well as adjacent jurisdictions.

As always, we appreciate the technical assistance and guidance of HUD's staff support in Stamford's efforts in Community Development.

Sincerely,

Timothy R. Beeble  
Community Development Director

# Stamford, CT

## Consolidated Plan 2005 - 2010

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\*These sections, and successive program year budgets, are not reproduced here. They can be obtained from the Stamford Community Development Office.

**City of Stamford**

Connecticut

# Consolidated Plan

Strategic Plan for Years

2005

to

2010

And Annual Action Plan

2005 - 2006

Presented to the U.S. Department of Housing and Urban Development

Hartford

Field Office of Community Planning and Development

Strategic Plan Submission Date

8/3/2005

## Amendments:

		▼		MM/DD/YY	Name:
		▼		MM/DD/YY	Name:
		▼		MM/DD/YY	Name:
		▼		MM/DD/YY	Name:
		▼		MM/DD/YY	Name:

\* If Necessary



# 3-5 Year Strategic Plan

This document includes Narrative Responses to specific questions that grantees of the Community Development Block Grant, HOME Investment Partnership, Housing Opportunities for People with AIDS and Emergency Shelter Grants Programs must respond to in order to be compliant with the Consolidated Planning Regulations.

## GENERAL

### Mission:

*The Stamford Consolidated Plan's mission is to provide a broad vision for Stamford, consistent with the three basic goals established by HUD: provide decent housing, provide a suitable living environment, and expand economic opportunities. This vision integrates the work done by several community wide analyses: Continuum of Care Strategy 2005, State of Stamford Social Services Report 2005, the Affordable Housing Strategy for Stamford, Connecticut, as well as the Comprehensive Plan of the Housing Authority of the City of Stamford.*

## General Questions

1. Describe the geographic areas of the jurisdiction (including areas of low income families and/or racial/minority concentration) in which assistance will be directed.
2. Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA) (91.215(a) (1)) and the basis for assigning the priority (including the relative priority, where required) given to each category of priority needs (91.215(a) (2)).
3. Identify any obstacles to meeting underserved needs (91.215(a) (3)).

### 3-5 Year Strategic Plan General Questions response:

1. General Overview of the City: Stamford, with a population of more than 120,000 and a land area of 36.5 square miles, is located in southwestern Fairfield County, approximately 45 minutes from New York City. While other major cities in Connecticut have experienced a loss of residents, Stamford's population has continued to grow at an accelerated rate through the 90's and beyond to 2005. This resulted in Stamford replacing Waterbury as the fourth largest city in Connecticut.

Its rapid rail and highway access to New York City and other parts of the Northeast have combined with the national shift to a service economy to solidify Stamford's transformation from a suburban industrial town to a major corporate center. The city hosts many corporate offices, including: General Electric Company, International Paper, Perdue Pharma, Xerox Corporation, MeadWestvaco, Asbury Park Group, Pitney Bowes, Inc., UBS, Citizens Communications, Silgan Holdings and Crane Company. The city also hosts regional campuses of the University of Connecticut, the University of Bridgeport, and Sacred Heart University. The

Ferguson Library, one of the largest libraries in the state, is located in the Central City with branches of the library in the South End and elsewhere throughout the city.

The nonprofit sector includes more than 120 organizations focusing on affordable housing development, human services, religion, the arts, philanthropy, education, and economic growth. There are more than 100 churches, mosques, temples and synagogues, representing many different religions and denominations. The Interfaith Council, formerly known as the Council of Churches and Synagogues, provides a forum for faith-based groups to collaborate on community projects and programs.

Stamford has built a large cadre of human service providers, which offer a wide range and variety of programs for people in need. Programs include those that meet basic needs for food, clothing and housing for the city's impoverished residents; provide quality, affordable childcare and after school enrichment programs for children; offer English as a Second Language programs to Stamford's many new immigrants; provide teen services and senior services; provide strong health education and treatment programs; provide specialized services for people with developmental disabilities throughout the lifespan; develop affordable and supportive housing; and increase the employability and self-sufficiency of the city residents struggling with incomes below a living wage.

Revitalization initiatives and business growth have marked Stamford's recovery from the severe recession of the late 1980s and early 1990s and, since that time, the city's downtown has become a model of urban vitality. Stamford has acquired and dedicated land to open space; enabled new and diverse cultural growth; and watched its real estate market rebound. National quality-of-life surveys rank Stamford among the most desirable communities in which to live. It provides a multicultural environment for people of all income levels, recreational opportunities at beaches and parks, and cultural opportunities in a thriving downtown. In addition, Stamford was identified by the Federal Bureau of Investigation as the safest city in America in 2004.

Stamford's Population: According to the 2000 Census, Stamford experienced population growth of 8.4% in the 1990's. White non-Hispanic people comprise 69.8% of the population. The Black non-Hispanic people represent 15.4% of Stamford's population, which represents a decrease of 6.6% in the 1990s. Hispanic people nearly doubled to 16.8% of the City population. Thereby, Hispanics have become the largest minority population in Stamford. The Asian population more than doubled, now reflecting 5% of the population.

From 1990 to 2000, the proportion of foreign born people increased from 18.6% to 29.6% of the population. The proportion of people living in homes where a language other than English is spoken increased from 22.9% to 34.9%.

The City's Median household income increased during the 1990's by 21.6% to \$60,566. However, while incomes were increasing, the number and proportion of families living in poverty increased from 3.9% to 5.4% of total families. Individuals living in poverty increased from 6.3% to 7.9% of the total population.

Stamford Housing Stock: The City's housing stock increased in the 1990's by 6.9% to 47,317 units. Approximately 43% of the housing stock is renter occupied and 57% of the City's housing is occupied by owners.

Overcrowding as a housing problem has nearly doubled in incidence. In 2000, 3,225 households lived in apartments having more than one person per room; up from 1,800 households in 1990.

Among renter households, nearly 39%, or 7,645 households, pay more than 30% of their income for rent. There is an unquantified overlap in the count of households paying excessive rent and those living in overcrowded conditions.

Stamford is recognized as one of the nation's most expensive housing markets. Both rent levels and property values have continued to escalate over the past ten years. According to Stamford's Tax Assessor, in 2001-02 the median sale price of a single family home was \$437,500, and the median sale price of a condominium was \$185,000. Today, it is nearly impossible to find any homes or condominiums available at these prices.

**Minority Homeownership:** The City of Stamford has been focusing its efforts on assisting low income people to become homeowners, thereby assuring that they will have an affordable place to live in Stamford into the future. Homeownership also extends a powerful means of building wealth in Stamford's strong real estate market. The City has been dedicating a substantial portion of its federal HOME Investment Partnership Program funds for downpayment loans for low income home buyers. This has also contributed to the closing of the racial/ethnic homeownership gap.

The City of Stamford and the Stamford Community Development Program have been closely monitoring the gap in homeownership among minority households. The gap has been closing at a substantial pace. The 1980 Census found that the rate of homeownership among White households was 68%, the rate among Black households was 10.2% and the rate among Hispanic households was 13.8%. The 1990 Census reported that the homeownership rate was 23% for Black households and 26% for Hispanic households. This represented more than a doubling of the ownership rate. The 2000 Census showed the ownership rate to have increased to 31.9% for Black households and 28% for Hispanic households. Although the increase in proportion of Hispanic homeowners does not appear to increase much in the 2000 Census, note that this is likely dampened by the tremendous increase in the Hispanic population due to immigration. In this case the raw numbers tell the real story. In 1990 there were 656 Hispanic homeowners in 2000 more than doubled to 1,485 Hispanic homeowners. Among Black households, over the 20 year period from 1980 to 2000, the rate of homeownership more than tripled from approximately 10% to one-third of all Black households.

**Target Neighborhoods:** For more than 20 years the City of Stamford has targeted its CDBG and HOME investments to Stamford's low income neighborhoods. These include the South End comprised of Census Tract 222, Waterside comprised of Tract 223, Westside comprised of Tracts 214 and 215, the central city comprised of Tract 201 and the Eastside comprised of Tract 217 and portions of Tracts 218, 220 and 221. See Map 1 for the census tract delineation.

These five neighborhoods, covering nine census tracts, show concentrations of low moderate income residents in excess of 51% of the population of the Census Tract or Block Group. The following description of each neighborhood, and tracts within that neighborhood, reviews the changes that have occurred in data when 2000 census enumerations are compared to the 1990 census information.

The Westside neighborhood (Tracts 214 & 215) has 13,275 residents and 68% are low income people. Compared to the 1990 Census, this represents an increase in population in the neighborhood of 1,901 people. Forty percent of the population is Black. The Hispanic population had a two and a half fold increase to 37% of the neighborhood population. There are 4,553 housing units in the Westside; this is an increase of 364 net new units through the 1990's. Approximately 75% of the housing in the Westside is renter-occupied.

The South End (Tract 222) has a population of 3,075 which represents a 4.1% decrease in the 1990's. 76.5% of its residents are low income. The Hispanic population is 1,486, or 47.6% of the neighborhood. This represents a 17.7% increase during the 1990's. During the 1990's, the South End lost nearly a third of its Black population which as of 2000 was 968. The South End housing stock remained unchanged at 994 units of which 85% are renter occupied.

The Waterside Neighborhood (Tract 223) has a population of 4,836 which is an 8.2% decrease. Much of this loss of population can be attributed to preparations for the demolition of Southfield Village as part of the redevelopment of the area as Southwood Square under the HOPE 6 Program. 54.5% of Waterside's population is low income. There are 1,335 Hispanic residents, or 27.6% of the population. This represents a 75.6% increase in the number of Hispanic people during the 1990's. There are 1,836 Black residents of the neighborhood, or 38% of the population. This represents a loss of 38.5% of the neighborhoods Black population during the 1990's. There are 1,722 housing units in Waterside of which 54% are renter occupied.

The Eastside Neighborhood (See Map 1) has a population of 14,170 of which 8,772 or 62% are low income people. The Eastside population increased by 20% in the 1990's. There are 3,849 Black residents of the neighborhood, representing 27% of the population. There are 4,105 Hispanic residents in the Eastside, representing 29% of the population. This is an 80% increase in the Hispanic population of the Eastside during the 1990's. There are 6,055 housing units in the Eastside, which is a net increase of 814 new housing units constructed during the 1990's. Rental housing comprises 69% of the neighborhood's housing stock.

The Downtown Neighborhood (Tract 201) has a population of 3,890 of which 65% are low income people. The neighborhood population increased by 37% due to construction of new housing. There are 1,043 Black residents in the Downtown, representing 27% of the neighborhood. There are 978 Hispanic residents, which is 25% of the population and represents a doubling of their proportion in the Downtown. The housing stock in the Downtown is 1,967 units, a 23% increase. Rental units are 91% of the neighborhood's housing.

These low income neighborhoods are situated surrounding the Stamford downtown and areas south of Interstate 95. These are the oldest developed areas of Stamford, holding the oldest housing stock and exhibiting the greatest degree of mixed land uses. The South End, for example, is an historic district, in which abandoned factory buildings and a private trash transfer facility exist 'cheek by jowl' with residential areas and community neighborhood facilities. These are also the areas most impacted by the wave of immigrants locating in Stamford. In the 2000 Census enumeration, six of the nine low income census tracts comprising the Target Neighborhoods had foreign born population in excess of 40%.

The target area has been the area of greatest minority population concentration. The minority population is itself in flux. Most of the census tracts show a decrease in Black and Asian minorities, but significant increase in the Hispanic population.

2. Through a public request for proposal process, annual HUD CDBG allocations of funds are made available to all prospective City and non-profit agencies for projects and programs that benefit Stamford's low income people. This process solicits applications consistent with the adopted strategies and priorities of the Consolidated Plan. The City of Stamford's Board of Representatives' Housing and Community Development/Social Services Committee and the Mayor with the assistance of the Community Development staff review each proposal. The Committee conducts a public hearing process which includes a presentation by each applicant. The Committee then reviews the projects for factors that include: consistency with CDBG guidelines for fund use, consistency with strategies and priorities of the Consolidated Plan, and the track record of the applying agency. The Committee meets with the Mayor's office to review recommendations with staff, and make final budget decisions.

Each project/program is reviewed relative to the extent it will further the high priorities of the Consolidated Plan and the extent to which the project addresses the critical need for affordable housing, community development, economic development and the service needs of the low income residents, primarily living in the Target Neighborhoods. A second public hearing is held annually to receive comments on the Annual Action Plan and proposed budget for the use of HUD funds.

Similarly, HOME funds for housing rehabilitation and construction in Stamford are allocated through a public competitive Request for Proposal (RFP) process. Projects are ranked on an objective basis considering leveraging of HOME funds, construction investment, low income benefit, Consolidated Plan consistency and relocation impact. The highest ranking proposals prepared to proceed are funded until all advertised funds are allocated. The Community Development staff will work with property owners through out the year to assist them in planning their housing projects and preparing for the next advertised RFP competition.

HOME funds for downpayment loans for the purchase of homes, condominiums and cooperative units in Stamford are made available to low income buyers throughout the year. The public will be reminded of the availability of these funds through a legal advertisement as part of the annual RFP for HOME funds, as well as newspaper press releases, presentations by Community Development staff at neighborhood meetings and outreach by the approved housing counseling agencies. Home buyers are required to participate in pre-purchase homebuyer counseling provided by a non-profit organization approved by the City. Current approved housing counseling agencies include the Housing Development Fund, Inc., the Urban League of Southwestern, CT, Inc, and the Mutual Housing Association of Southwestern, CT, Inc.

Ten (10%) percent of the HOME entitlement grant plus program income is allocated annually for administration by the Community Development Office.

Fifteen (15%) percent of the HOME Entitlement Grant is set aside for use by Community Housing Development Organizations (CHDO) for housing development. Recognized CHDO's in Stamford are Neighborhood Housing Services of Stamford, Inc. and Mutual Housing Association of Southwestern, CT, Inc. The City will consider proposals for CHDO capacity building grants from CHDO's who need training or

consulting services that will focus on identified capacity deficiencies. No more than 3% of the annual HOME allocation may be used for this purpose.

3. Critical underserved need identified in the strategic plan is for affordable housing for very low and low income people, as well as adequate services and employment opportunities. The obstacle to meeting these needs are the nature of the housing market in Stamford, and the inability for service providers to keep pace with the need for service in a swelling immigrant population.

The Consolidated Plan's housing needs chart indicates the greatest need (as defined by number of population experiencing housing problems) is experienced by renters earning less than 30% MFI. For this group, the elderly, small related and other household categories show more than 1000 people each experiencing some housing problem. That is, either excessive housing costs and/or overcrowding of the apartment by its occupants. The need for affordable, adequate housing extends from very low to moderate incomes, as a result of the extreme pressure on the housing market. Land and housing values have risen precipitously in Stamford, while income levels for the population in the target area have not kept pace. The housing market analysis chart for this Plan indicates very few units for sale or rent, and a significant gap between a rent affordable to a Very Low Income family and the fair market rents set by the Department of Housing and Urban Development. For a 0-1 bedroom unit, the difference is \$173 per month, and for a 2 bedroom unit, it is \$182 per month. Those who would rent a three bedroom unit face a gap of \$442 per month.

### **Managing the Process (91.200 (b))**

1. Lead Agency. Identify the lead agency or entity for overseeing the development of the plan and the major public and private agencies responsible for administering programs covered by the consolidated plan.
2. Identify the significant aspects of the process by which the plan was developed, and the agencies, groups, organizations, and others who participated in the process.
3. Describe the jurisdiction's consultations with housing, social service agencies, and other entities, including those focusing on services to children, elderly persons, persons with disabilities, persons with HIV/AIDS and their families, and homeless persons.

\*Note: HOPWA grantees must consult broadly to develop a metropolitan-wide strategy and other jurisdictions must assist in the preparation of the HOPWA submission.

3-5 Year Strategic Plan Managing the Process response:

The Stamford Community Development (SCD) Office serves as the Lead Agency for the Consolidated Plan and for the administration of funding from the U.S. Department of Housing and Urban Development (HUD) including entitlement funding under the Community Development Block Grant and the HOME Investment Partnerships Program. The SCD Office is located on the 10th Floor of the Government Center, 888 Washington Boulevard, Stamford, CT 06901. The SCD Office may be reached by phone at 203-977-4155 or by email at

tbeeble@ci.stamford.ct.us. The Mayor and the Housing, Community Development and Social Services Committee of the Board of Representatives, with the staff support of the SCD Office and input from the residents and representatives of non-profit agencies, set priorities and make the annual funding decisions directing the investment of the HUD funds that are made available to the City of Stamford.

The Consolidated Plan embraces four local collaborative and extensive efforts that studied the needs of Stamford's low income populations and suggested strategies for addressing those needs. Each of the following studies focused on a particular functional area of Stamford life. Staff members of the Stamford Community Development Office served on each of the collaborative planning groups, except for the Housing Authority's Comprehensive Plan.

Toward an Affordable Housing Strategy for Stamford, CT:

To study the housing needs of Stamford and propose a strategy for addressing its housing needs, Mayor Dannel Malloy appointed an Affordable Housing Task Force comprised of Stamford architects, engineers, private housing developers, non-profit housing developers, lenders, city elected officials, City Planning staff, Community Development Staff, Social Service Staff, homeless shelter/service providers, Housing Authority Representatives and concerned citizens. A list of members of the Affordable Housing Task Force is attached as Exhibit 1.

With facilitation by nationally known housing planners, John Shapiro of Abeles Phillips Preiss and Shapiro who collaborated with Alan Mallach, the Task Force worked for ten months to study the magnitude and nature of the affordable housing problem. As stated in the Affordable Housing Strategy, "The breadth of technical expertise, development experience, and local knowledge brought to the process by the Task Force members was crucial to the formulation of the strategy document."

After the Task Force and consultants reached an initial agreement on the draft strategy report, the City of Stamford hosted an Affordable Housing Summit attended by 150 people to provide feedback on the draft strategy. The Summit included a presentation of the housing needs and the proposed Strategy, break-out sessions on focused topics, followed by a Plenary Session for the Break-out groups to report back to the participants on their conclusions. Thereafter, the report was revised and finalized.

The Task Force identified a need for 8,000 housing units for households who are overcrowded and/or paying excessive housing costs, as well as those new households expected to move to Stamford to accept new jobs being created. The Regional Plan Association projects that 7,700 new jobs will be created in Stamford between 2000 and 2010.

The Affordable Housing Strategy for Stamford focuses on creating affordable housing through mixed income development and preserving the City's existing assisted housing stock. The Strategy includes the adoption of Inclusionary Zoning, a Linkage Ordinance and a One-For-One Assisted Housing Replacement Ordinance. The Strategy recommends working with non-profit developers to construct new housing on assembled sites, as well as acquire existing multi-family buildings and rehabilitate them for affordable housing. The Strategy recommends that developments be designed as low rise buildings to provide both rental and ownership opportunities. Downpayment assistance is recommended to be targeted to primarily Low Income households, and to the extent feasible, Very low Income Tenants. Rehabilitation

loans for private owners of multi-family properties was recommended with restrictions on affordability into the future.

The City has begun implementing the Affordable Housing Strategy by adopting inclusionary zoning that requires housing developers to dedicate 10-12% of their housing for low income families with incomes from 60% to below 25% of median income. In addition, the City's Board of Representatives has passed a Linkage Ordinance that will generate affordable housing funds from commercial building permit fees. Furthermore the Board of Representatives passed a one-for-one Assisted Housing Replacement Ordinance to preserve our affordable housing stock.

The Consolidated Plan incorporates the Affordable Housing Strategy and will support the Strategy by investing its CDBG funds for housing rehabilitation to preserving existing affordable housing and to rehabilitate existing substandard housing for occupancy by low income households. In addition to supporting rehabilitation, HOME funds will be used for new construction of affordable housing and downpayment financing for low income homebuyers. The goal will be to make housing accessible, affordable and sustainable for low income households and individuals.

The State of Human Services – Stamford, CT:

The Human Services Planning Council was established by Mayor Dannel Malloy and the United Way of Stamford to assess the services needs of Stamford residents, particularly low income people. In addition to the Mayor and United Way staff, the members of the Council include staff of State social services, non-profit foundations, police, city health department staff, city social service staff, non-profit child care providers, elderly housing providers, senior service providers, homeless service providers, Urban League staff, Board of Education staff, Community Development staff, Red Cross staff, and substance abuse rehab staff. Exhibit 2 contains a list of members of the Planning Council.

This report, which was presented to the community at a public forum on May 26, 2005, is the result of regular assessments by the Human Services Planning Council since 2001 to update information and conditions effecting human services in Stamford. The primary purpose of the report is to guide community leaders, funders and service providers in meeting the ongoing and emerging human service needs. This report focuses on demographics, economics, housing/shelter, education, public health and public safety.

Key Findings of the report are as follows:

Stamford is racially and ethnically diverse, however, only the Hispanic population has exhibited substantial growth, nearly doubling in the 1990's to become the largest segment of the minority population of the City.

Our population is mobile and multicultural. According to the 2000 Census, 21% of Stamford residents did not live in Fairfield County in 1995, 30% were foreign born and a third of this segment spoke a language other than English at home.

While having had strong population growth in the 90's and the past five years, there has been a decrease in proportion of residents in the 25-49 year old cohort.

Stamford's unemployment rate is lower than that of the State, 3.1% versus 4.2% as of November 2004.

As reported in the 2000 Census, Stamford's median income is higher than that of the U.S. and the state, \$60,556 versus \$41,999 and \$53,939 respectively. However the city's high housing costs eliminates any income advantage. Also 12% of Stamford's households have incomes of less than \$15,000. In 1999 5.4% of families and 7.9% of adults met the definition for living in poverty.

There is a disparity in median and per capita income among racial and ethnic groups with White and Asian households having higher incomes than Hispanic and Black households.

Overcrowding as a housing problem has nearly doubled in incidence. In 2000, 3,225 households lived in an apartment having more than one person per room; up from 1,800 households in 1990.

Among renter households, nearly 39%, or 7,645 households, pay more than 30% of their income for rent. There is an unquantified overlap in the count of households paying excessive rent and those living in overcrowded conditions.

Stamford's 2005 Point in Time Census of homeless counted homeless persons and homeless persons in families with children. The census found 194 in emergency shelters, and 209 in transitional facilities, and 23 unsheltered homeless. For the year ending September 30, 2004, St. Lukes LifeWorks sheltered 59 women for a total of 6,894 nights and 67 adults and 99 children for a total of 13,445 nights. During that same period, the Shelter for the Homeless sheltered 558 men for a total of 34,219 nights.

The number of children with working mothers exceeds the number of licensed child care spaces by 1,000. There are 700 children on the waiting list for 160 affordable day care slots. Although licensed, 2/3 of the day care slots are accredited.

Key health issues include uninsured low income people, overweight children and adults, substance abuse, and mental illness.

Crime has decreased by 20% between 2000 and 2003.

The Human Services Planning Council formulated the following recommendations for Social Service providers and their funders. "Opportunities exist for improved service delivery. With a broad array of service providers and an increasing number of people with multiple and complex needs, clients can be faced with a fragmented, duplicative system. Better coordination of service provision among public agencies and non-profit providers could help more residents more quickly; reduce gaps and overlaps in services; and increase communication among service providers. The Council recommends a centralized intake and referral system for social service delivery in Stamford. Furthermore, the Council recommends programs to enable low income people to increase their earning power so that they may become self sufficient."

Continuum of Care – Stamford, CT:

The Continuum of Care is a collaborative of representatives of 22 entities consisting of the Stamford Community Development Office, CT Department of Social

Services, CT Department of Mental Health, Stamford Department of Health and Social Services, United Way of Stamford, CTE, Family Centers, Laurel House, Pathways, Person-to-Person, Shelter for the Homeless, St. Lukes Community Services, Mental Health Association of CT, the Stamford Housing Authority, New Neighborhoods, Neighborhood Housing Services, Mutual Housing Association, Melville Foundation, Stamford Health Systems, VA Hospital and Line Associates (consultant). Exhibit 3 contains a list of the representative members of the Continuum of Care Collaborative.

The Continuum meets throughout the year to update the homeless needs for Stamford and coordinate services and facilities. The Continuum makes recommendations for homeless funding priorities and coordinates the application for HUD competitive funding for Shelter Plus Care, transitional housing and supportive housing. The Continuum of Care Plan focuses on Prevention of Homelessness, Outreach to homeless who are living on the street, and Support Services for homeless people.

The Plan is a blueprint for ending homelessness by 2012. The goal of the Plan is to create more permanent housing thereby freeing up transitional housing and shelter beds that are now occupied by chronically homeless people who should be living in permanent supportive housing. The short term goal is to create 20 new permanent housing units.

Through the Continuum of Care Collaborative, Stamford has a well-coordinated process in place to insure the absence of overlapping or duplicate programming efforts. In addition to the monthly meetings of the Collaborative as well as the meetings of the eight sub-committees, most members also attend at least one of the many community meetings to assure that the needs of the homeless are considered by other groups in the Stamford area.

The Continuum of Care determined that Stamford has a sufficient number of emergency shelter beds and transitional housing for the homeless.

On January 26, 2005 a Homeless Census was conducted. This Census identified 93 chronically homeless persons, 11 of whom were unsheltered. While this Census count is up from 88 in 2004, the Continuum of Care attributes the increased number to a more accurate count rather than an actual increase in the homeless population. The goal of the Continuum of Care is to have 25% or new admissions to permanent housing be chronically homeless disabled persons.

The goal for the Continuum of Care is to develop 20 units of permanent supportive housing over the next two years. A second goal is to use the SSA HOPE Grant of \$450,000 to accelerate the processing of homeless applications for food stamps, Medicaid, SSI, and TANF. The third goal of the Continuum is to build the capacity of vocational programs for the homeless.

#### Comprehensive Five Year Plan:

The Housing Authority of the City of Stamford prepared a five year comprehensive plan for 2005-2009 for the maintenance and operation of their 1,660 housing units and their 966 Section 8 Housing Choice Vouchers. This plan was prepared in consultation with tenants of public housing. The goals of the Housing Authority include completing the HOPE VI project for Fairfield Court, initiating the Vidal Court predevelopment process, developing a supportive housing development

with a non-profit, acquire a housing development site, consider expiring use properties for acquisition, consider a second supportive housing project, improve property security, with community policing, and provide homebuyer counselling and downpayment loans to 86 Housing Authority tenants. The Housing Authority's Comprehensive Plan identifies improvement needs of its properties. The City will consider the recommendations of this Plan in considering requests from the Housing Authority for CDBG funds for public housing improvements.

### **Citizen Participation (91.200 (b))**

1. Provide a summary of the citizen participation process.
2. Provide a summary of citizen comments or views on the plan.
3. Provide a summary of efforts made to broaden public participation in the development of the consolidated plan, including outreach to minorities and non-English speaking persons, as well as persons with disabilities.
4. Provide a written explanation of comments not accepted and the reasons why these comments were not accepted.

\*Please note that Citizen Comments and Responses may be included as additional files within the CPMP Tool.

3-5 Year Strategic Plan Citizen Participation response:

The City of Stamford's Citizen Participation Plan is attached as Exhibit 4.

Stamford's Consolidated Plan process included the inclusive and collaborative processes of the Mayor's Affordable Housing Task Force, the Stamford Human Services Planning Council, the Stamford Continuum of Care and the Housing Authority's Comprehensive Plan. The extensive involvement of local non-profit developers and service providers, elected officials, staff of City Departments, lenders, private developers/planners/architects, property owners and residents is discussed in the previous Section of this Plan entitled "Managing the Process."

The Stamford Community Development Office consulted with the Town of Greenwich Community Development Office with regard to each other's Consolidated Plan.

A Public Hearing to receive comments on the Citizen Participation Plan, the Year 29 Comprehensive Annual Performance and Evaluation Report, the local needs for housing and community development and proposals from public and non-profit organizations for meeting local needs was held on January 25, 2005 in the Stamford Government Center, an accessible building, at 5:30 PM. The hearing was conducted by the Housing, Community Development and Social Services (HCD/SS) Committee of the Board of Representatives. The HCD/SS Committee is comprised of nine elected district representatives, most of whom represent the low income neighborhoods of Stamford.

Following two months of deliberation by the Mayor and the HCD/SS Committee, the proposed Annual Action Plan was advertised for a 30 day public comment period. A public hearing on the proposed Annual Action Plan for the use of HUD funding was held by the HCD/SS Committee on April 19, 2005 at 6:30 pm in the Stamford Government Center.

On May 12, 2005 the Stamford Board of Finance, comprised of six elected members, reviewed and approved the Annual Action Plan.

On May 17, 2005 the HCD/SS Committee voted unanimously to recommend that the proposed Annual Action Plan be approved by the entire Board of Representatives.

On June 6, 2005 the Board of Representatives approved the Annual Action Plan.

On July 2, 2005, the Consolidated Plan was advertised for a 30 day public comment period. CDBG recipients for Year 31 were notified by mail of the availability of the draft Consolidated Plan for comment. The Plan was made available at the SCD Office, the Town Clerk's Office and the library. The plan was electronically distributed to advocates for housing, the homeless and public services.

A public hearing on the Consolidated Plan was held on July 26, 2005 at 6:00 pm. The Housing, Community Development and Social Services Committee recommended approval of the Plan.

On August 1, 2005 the Board of Representatives acted on the recommendation of the Housing, Community Development and Social Services Committee and approved the Consolidated Plan.

### **Institutional Structure (91.215 (i))**

1. Explain the institutional structure through which the jurisdiction will carry out its consolidated plan, including private industry, non-profit organizations, and public institutions.
2. Assess the strengths and gaps in the delivery system.
3. Assess the strengths and gaps in the delivery system for public housing, including a description of the organizational relationship between the jurisdiction and the public housing agency, including the appointing authority for the commissioners or board of housing agency, relationship regarding hiring, contracting and procurement; provision of services funded by the jurisdiction; review by the jurisdiction of proposed capital improvements as well as proposed development, demolition or disposition of public housing developments.

#### **3-5 Year Strategic Plan Institutional Structure response:**

The City will undertake and promote the following initiatives to improve the institutional capacity to deliver affordable housing and community development projects in the public, non-profit, and private sectors.

##### **Public Institutions**

The following organizations have similar missions. The Stamford Community Development Office (SCD) will promote collaboration and coordination among these public agencies.

##### **Stamford Community Development Office (SCD)**

SCD is the principal agency that administers housing programs funded by the Community Development Block Grant (CDBG) program and the HOME program.

In 1993, the City of Stamford was one of the first participating jurisdictions in Connecticut and nationally to commit HOME program funds to rehabilitate affordable housing. SCD assists non-profit developers with site assembly, building specific Capital funded bridge loans, and CDBG/HOME loans for repair. CDBG/HOME and Lead Hazard Control funds have been made available to both private and non-profit developers for creation of quality affordable housing units. SCD also manages a HOME downpayment loan program with HOME funds.

#### Urban Redevelopment Commission

The Urban Redevelopment Commission (URC) has the power to acquire vacant structures and sell them for a nominal amount to developers who are willing to rehabilitate such structures in downtown urban renewal areas. The URC has power of eminent domain and the authority to consolidate properties for development projects. The URC also provides relocation services for tenants who must move from buildings that have been condemned or found uninhabitable.

#### Social Services Commission

The Social Services Commission provides services relating to fair rent and human rights on behalf of the City, providing advocacy and assistance on fair housing and housing access issues.

#### Stamford Housing Authority

The Stamford Housing Authority owns and manages 1,660 low income rental housing units in 12 family and 9 elderly developments. In addition the housing Authority administers nearly 1,000 Section 8 Housing Choice Vouchers.

#### Non-profit Organizations

Stamford has a variety of non-profit organizations that know the people and neighborhoods of Stamford and that are committed to serve extremely low income people. These organizations will participate fully in delivering housing units and services in Stamford during the next five years.

Non-profit development organizations have access to State, local, and Federal housing financing programs that offer below-market interests rates, grants, and funds set aside for housing for low income households. These organizations have knowledge of the community and a commitment to their constituencies of low and moderate income households. The projects that these organizations develop promote neighborhood stability.

Non-profit property managers have knowledge of their community and a commitment to maintaining quality housing. These organizations have the potential to be cost-effective by virtue of their sensitivity to residents' needs and problems.

The Women's Business Development Center and the Stamford Partnership provide technical assistance to micro-enterprises and small businesses. CTE, Inc. provides recruitment assistance to businesses that create jobs by referring qualified residents of the Enterprise Zone to fill the new jobs. The Urban League of Southwestern Connecticut, Inc. provides computer training and employability skills in their programs for workforce development. The Community Economic Development Fund uses CDBG funds to guarantee business loans for micro-enterprises.

Three neighborhood organizations serving the Westside, South End and Eastside neighborhoods are considering becoming Community Business Development Organizations (CBDO). The SCD Office will assist the Eastside Partnership to become a CBDO in Year 31.

Stamford has two CHDOs that are planning to develop HOME-funded projects. The certified CHDOs are:

- \* Neighborhood Housing Services of Stamford, Inc.
- \* Mutual Housing Association of Southwestern Connecticut, Inc.

Stamford also has non-profit organizations that are not CHDO's but develop affordable housing. These groups could potentially become CHDO's.

- St. Luke's Community Services, Inc.
- \* New Neighborhoods, Inc.
- \* Stamford Affordable Homes, Inc.

Social service providers have access to public and private grants that address problems of homelessness, substance abuse, and other social problems of low income families and individuals. These agencies have knowledge of the community and a commitment to low income and special needs populations. In the past few years, social service agencies in Stamford have demonstrated flexibility in adjusting to changing social service needs.

#### Non-profit Intermediaries

Housing Development Fund (HDF), Stamford's non-profit community development lender, represents a public-private partnership that has proven to be an effective source of funds for developers of affordable housing. HDF has created a bridge between the private sector (lending institutions and businesses) and the non-profit sector (developers, social service providers, and property managers). It has access to a pooled loan fund that uses funds from local banks and the Connecticut Department of Economic and Community Development. HDF has a long-term dedication and commitment to finance low income housing, with a specialized mission to financing low income and special needs housing for projects in distressed neighborhoods. HDF provides technical assistance to all its applicants, and administers a predevelopment loan pool for affordable housing/mixed use projects.

Adopt-A-House, Inc., an affiliate agency of HDF, provides one-to-one homeownership counseling to low and moderate income households, lends downpayment and closing costs through soft second mortgages, and facilitates placement of HOME funds for downpayment loans.

Neighborhood Housing Services Inc. has a heritage of assisting residential and commercial property owners in the CDBG target areas. This organization has provided below-market interest rate rehabilitation loans and technical assistance to property owners.

#### Private Industry

Several private development firms have invested in a number of small-scale rehabilitation projects in distressed neighborhoods. Some of these developers have a long-term interest in Stamford and are committed to producing affordable housing and stabilizing neighborhoods. Some of these developers have created partnerships with social service agencies that provide case management for tenants.

Stamford had been a financial center with several local banks that provided home mortgage loans for decades. These banks were knowledgeable and involved in the local real estate market. Most of the local banks have been recently acquired by out-of-state banks, which often lack the local orientation and allegiance to Stamford and its neighborhoods.

First County Bank and People's Bank are members of the Federal Home Loan Bank of Boston. This organization provides interest subsidies and other financing programs for affordable housing that are available to developers in Stamford. JP Morgan Chase Bank, Patriot Bank and Citibank have expressed strong interest in continuing to finance housing and community development efforts.

Small contractors are familiar with the neighborhoods in Stamford and are knowledgeable about the local development approval process. The SCD Office does not typically require performance bonds so that small contractors and minority or women owned contractors may more readily bid on HUD funded construction. The City of Stamford will actively conduct minority outreach as it announces availability of funds for programs and as it procures services.

The City seeks to continue to engage qualified minority and women owned firms for goods and services. The City has performed outreach and sponsored training of local individuals in lead hazard control work. The classes conducted were sufficient to enable certification for those who completed the classes and followed up with application to the State of Connecticut. This has generated a minority lead hazard control firm that often succeeds in winning bids for grant related lead hazard control activities. The City also funds the Women's Business Development Center, which assists entrepreneurs establish micro businesses. The City will continue its commitment to increase the number of qualifying minority and women owned firms through this type of outreach.

The City has a strict policy regarding bidding or request for proposal process when services are sought from outside of City government. All requested services/bids are advertised in the local newspaper. In addition, notices of opportunities will be provided to target agencies known to access significant minority/ethnic groups. These agencies include: Yerwood Center, the Hispanic Advisory Council of Greater Stamford, the Haitian Center, and the Urban League of Southwestern Connecticut, Inc., and the Urban League's Young Professionals Network site posting. Notices, advertisements/web postings will include requests for professional qualifications/request for proposals (real estate firms, appraisal firms, underwriters, accountants, legal services, title search services, etc.) as well as construction work. In the past, when a respondent to a notice for services responded and language difficulty was experienced, the City staff have met individually with the respondent and his/her interpreter.

## 2. Strengths and Gaps in Delivery System

a. Stamford Community Development - A small dedicated staff of five focus on CDBG/HOME administration and program delivery. Due to the lapse of the Lead Hazard Control (LHC) Grant, the SCD Office will lose its Housing Program Specialist. The pending HUD application for additional LHC funds, if approved by HUD, would restore this position. However, due to timing of the grant award, the current staff person will be lost. The loss of the Housing Program Specialist will present a serious challenge for the SCD Office to keep up with the revitalization needs of Stamford neighborhoods, including the abatement of housing code enforcement violations for lead based paint hazards.

There is also a need for on-going training regarding new financing techniques and evolving HUD regulations including those regarding Performance Measures.

Beyond staff issues, additional resources are needed to create affordable housing units. A previous Lead Hazard Control award was invaluable as it provided the necessary 'missing' element that made many affordable housing rehabilitation jobs a 'go'.

b. Code Enforcement and Relocation Dilemmas

As the City's target areas fill with additional immigrant populations of limited means, the City is receiving frequent complaints of overcrowded apartments, as well as illegal basement or attic apartments. Overcrowding and illegal apartments leads to life-threatening situations and diminishes neighborhood quality of life. The City's Health Department and Fire Marshal's Office enforce fire/health/housing codes to assure that landlords provide safe and decent housing for their tenants. However, this often results in significant displacement of renters. Currently, when a unit is condemned, the City is responsible for relocating the tenants, and the owners are responsible for any relocation costs. The City has a use agreement with Saint Lukes Community Services that owns and operates a Lead Safe House with three apartments. This house is used as a relocation resource by the City. Otherwise tenants must be placed in motel rooms that may be distant from their jobs, schools and friends. Such relocation costs must first be paid from the City's General Fund, and then reimbursed by the property owner - often resulting in a property lien which does not generate a quick reimbursement.

The City has established a Housing Safety and Zoning Code Enforcement Initiative to be proactive in identifying illegal and unsafe apartments for code enforcement, rather than responding to complaints from residents. This Initiative is coordinated by a Task Force comprised of representatives of the Zoning Office, Fire Marshal's Office, and Health Department.

c. Housing Authority Responsiveness

The Housing Authority must expand upon the successful cooperative owner-tenant model used in HOPE VI, bringing it to bear in other existing complexes. Issues of security must be addressed. Also, lead hazards discovered in Authority units must be quickly and thoroughly addressed, with necessary tenant relocations handled without delay.

d. Non Profit Capacity

The housing non-profits working in Stamford possess a full range of development capabilities - but no one group 'has it all'. The City encourages these non profits to create the partnerships necessary to make a project work. Board structure and institutional history make negotiating these partnerships most time consuming. It is hoped that as projects are completed using this model, that all players will be less threatened by such cooperation.

The City will make HOME funds available for capacity building for CHDO non-profit developers.

e. Private Industry

Small firms that have undertaken projects in Stamford lack access to adequate financing to start more units. SCD will continue to urge private builder/owners to form partnerships with non-profit developers. Each partner can bring specialized expertise, resources, and experience to a project.

Some of the local banks have been acquired by out-of-state banks. These new banks often lack a local orientation to Stamford neighborhoods. SCD will work with banks to fulfill their obligations under the Community Reinvestment Act to fund development of affordable housing in distressed neighborhoods. Urge banks to offer loans for projects with 5 to 8 units.

Construction companies, especially minority-owned businesses, need access to financing and the capacity to handle multiple projects. SCD will try to assist small minority-owned construction companies to gain access to business loans and technical training. Urge them to pursue licensing for lead paint abatement work.

#### The Delivery System for Public Housing

Although the State statutes enables the Stamford Housing Authority (SHA) to operate as an autonomous local authority, it maintains close links to the City and the Stamford Community Development Office (SCD). The SHA hires staff, undertakes procurement of services, and enters into contracts independently. However, the Mayor appoints the Board of Commissioners. The City land use boards and commissions review and approve housing and community development projects that the SHA plans to develop. The SHA's Agency Plan is consistent with the Stamford Consolidated Plan. The SHA and SCD work together with nonprofit housing providers and social service providers to solve local housing problems and initiate programs. The SHA and SCD agencies jointly administered the Section 8 Moderate Rehabilitation Program since the 1970s and the Rental Rehab Program in the 1980s and 1990s. SCD and SHA along with non-profits collaborate annually on the SuperNOFA proposals and implementation. SCD annually provides CDBG funds for improvement of SHA developments and facilities.

### **Monitoring (91.230)**

1. Describe the standards and procedures the jurisdiction will use to monitor its housing and community development projects and ensure long-term compliance with program requirements and comprehensive planning requirements.

#### 3-5 Year Strategic Plan Monitoring response:

CDBG funded programs will be selected for a site visit based upon review of the required quarterly reports, timeliness of program effort, the time elapsed since a previous monitoring, 'risk' indicators of client complaint or staff turnover, and the amount of funds received. The site visit will include interviews with staff and review of service files to assure compliance with low-moderate income benefit requirements and contracting/accounting procedures.

Housing projects will be monitored as appropriate to the funding source. CDBG assisted projects will file with this agency a list of tenants and a self certification form regarding income. HOME recipients must file proof of income and a self certification to receive the HOME benefit. Many HOME projects require continued monitoring.

The City of Stamford has procedures in place to assure that on-going occupancy and affordability requirements of the HOME program are met.

All assistance for homebuyers, owner occupants/developers of new construction or rehabilitated housing is provided in the form of a loan from the City. The maximum loan beginning in 2002 is \$20,000 per unit. Previously, the maximum amount was \$15,000 per unit.

For each loan, requirements relevant to the use of the HOME funds are contained in an agreement, note and mortgage with the user. Affordability requirements are reiterated in the mortgage note/deed. These include, for example, the required income of renters and rental amounts for the appropriate HOME affordability period, and afterwards, the requirement that the units be rented to those meeting Section 8 income limits, and at no more than HUD approved fair market rents. The HOME agreements have previously been submitted to HUD and received approval.

The homebuyer, owner occupant and rental units created as a result of injection of HOME funds, are monitored to assure compliance with affordability and to assure the units remain in good condition (up to code).

#### Homebuyer

**Income and property eligibility:** Income and property eligibility is reviewed immediately prior to the purchase. The Health Department inspects the unit for code violations and the buyers are required to address any deficiencies. SCD staff follows up to inspect any correction work.

**Occupancy:** Mailings are sent to randomly selected units from the homebuyer assistance database. If unit is no longer occupied, follow up under the terms of the mortgage note and deed occurs.

#### Owner Occupant Rehabilitation

**Occupancy:** Mailings are sent to randomly selected units from the homebuyer assistance database. If unit is no longer occupied, SCD staff follows up under the terms of the mortgage note and deed occurs.

#### Rental Housing (Rehabilitation & New Construction)

The following is performed annually.

1. A comprehensive, updated listing is kept of all HOME investment properties brought on line. This list is used to sort those with rental units as per the HOME 'Project Rule'.
2. All HOME property files have an 'abstract sheet' within them that indicates to the monitor the salient part of the deal: period of affordability, the number of high HOME and low HOME rental units, and the term of the mortgage & note. The list from step 1 above is cross referenced with these abstract sheets.
3. Monitoring files are then established and/or updated for each rental development/address still within the affordability period prescribed by HOME.

**Occupancy and Rent Limits:** All mortgages for HOME funds require that HOME landlords provide reports to Stamford Community Development by January 31 for

the preceding calendar year. The monitor sends reminder letters to all landlords. For those who have not complied by January 31st, follow up occurs. As required by HUD guidelines, owners must provide, for each continuing tenant, a self certification of income and family size. New tenants must provide proof of income. Self certifications indicate rentals charged/utilities paid. If the units monitored report incomes/rentals to other agencies (e.g. Section 8 or DECD) a summary of tenancy and rental amounts is accepted.

Property Condition: As required by HUD, SCD staff periodically inspects HOME rental properties that were rehabilitated or constructed. These inspections generate a findings sheet, which is sent under cover letter from the Community Development Office to the property owner. A deadline for bringing the property into compliance is provided. Reinspection of the properties occurs upon notification by the owner that work has been completed. The monitoring/inspection portion of the file remains open until the unit is inspected and a compliance letter mailed to the owner.

### **Priority Needs Analysis and Strategies (91.215 (a))**

1. Describe the basis for assigning the priority given to each category of priority needs.
2. Identify any obstacles to meeting underserved needs.

3-5 Year Strategic Plan Priority Needs Analysis and Strategies response:

1. Evaluation of factors that yield priority needs are evident in the Needs Analysis Workbook that HUD requires from CDBG and HOME recipients. The Needs Analysis helps the locality to estimate 'gap' in various types of housing - by special needs, by income, by family size. Thus, when a priority is given, the scale of the work to be done is known. The priorities to be assigned are defined by HUD as follows:

High Priority: Activities that are expected to be funded during the five-year Consolidated Plan period.

Medium Priority: These activities are expected to be addressed on an 'as funds are available' basis.

Low Priority: Activities are not expected to be funded during the five-year period. The City may support applications for public assistance by other agencies if those activities conform to the Consolidated Plan.

2. The greatest need for the City of Stamford is the creation of affordable housing. As noted above, the population groups which number the most given 'housing need' as iterated in the 2000 Census are also those whose incomes defined by HUD as Very Low Income, falling below 50% of Area Median Income. It should be noted too, that HUD's normal definition of Low Income is 80% of area median income. However, because Stamford is a high income area, HUD caps the definition Low Income, currently at 62% of the area median income. As permitted by HUD, the City of Stamford has determined that it will extend eligibility for the HOME Program to those currently earning up to 67% of the median income. This limit is considered annually for adjustment by the City of Stamford. In short, there is a great mismatch between the ability of the Low and Very Low Income households and individuals to pay for housing, and market rents commanded in Stamford. Assisting these groups

requires deep subsidies, but the federal funds available to meet housing and community development needs are limited.

The City and its set of non-profit and for-profit housing providers are further constrained by site issues. There is very little property in Stamford's target area that is vacant and available for housing. Often, one intensive land use must be ceded to another for housing to be created. This adds demolition costs to already high per acre acquisition costs.

There are also obstacles to providing supportive services and in meeting special needs of the non-homeless. Stamford has a rich tradition of civic concern for those who must meet life with limited abilities or are hindered by addictions. The State of Stamford Social Services Report 2005 reviews the supportive services and gaps in these services for a wide range of special needs impacting individuals and families. In review of mental health needs, the Report notes: "Barriers to care judged as the most serious included language barriers, lack of insurance coverage for needed services, long waiting lists, and insufficient space in mental health facilities (based on 11 respondent agencies)". With the increase of immigrant population, the barriers of language and insurance impacts upon many service providers. The providers need to assure that they have bi-lingual staff to make their public service programs accessible to Stamford's changing low income population.

### **Lead-based Paint (91.215 (g))**

1. Estimate the number of housing units that contain lead-based paint hazards, as defined in section 1004 of the Residential Lead-Based Paint Hazard Reduction Act of 1992, and are occupied by extremely low-income, low-income, and moderate-income families.
2. Outline actions proposed or being taken to evaluate and reduce lead-based paint hazards and describe how lead based paint hazards will be integrated into housing policies and programs.

#### 3-5 Year Strategic Plan Lead-based Paint response:

1. Variables of income, and immigrant status, when combined with age of housing stock in the target areas, show tremendous need for a program to address lead hazards. The extent of lead hazard in Stamford is indicated by data on age of housing stock: 79% (36,036 units) of the housing stock was built before 1980. Much of this housing stock is multi family rental, is concentrated in the target area, and is regularly part of the City's enforcement program aimed at eliminating severe overcrowding. New immigrants are a significant portion of the population living in the target areas. For example, in tract 214 alone, the U.S. census data shows an increase of foreign born from 17.5% in 1990 to 43.4% of the total population in 2000. Other tracts of significant immigrant population increase, 1990 to 2000, and their figures are: Tract 201 – 29.3% to 42.8%, tract 215 - 23.9% to 49.2%, tract 217 – 24.9% to 42.8%, tract 215 – 23.9% to 49.2%, tract 220 – 15% to 36.5%, tract 221 – 37.8% to 58.6%, and tract 223 – 16.3% to 30.5%. Low-moderate income population is also concentrated in these areas: 74% of Stamford families with incomes at or below 50% of AMI (Very Low Income as defined by HUD for

Stamford) and 53.5% of Stamford families with incomes at or below 62% of AMI (Low Income as defined by HUD for Stamford) live in the target area. Note that between 51% and 76% of the families in the target census tracts are Low Income, while Stamford as a whole has 35.5% of its families are Low Income.

2. The City of Stamford has received and completed two HUD Lead Hazard Control grants, making more than 200 units lead safe. The City is actively pursuing additional Lead Hazard Control grant funds. It is also cooperating with the LAMPP Program (Lead Action for Medicaid Primary Prevention), a statewide Lead Hazard Control fund source. Any work involving HOME, or CDBG funds receive lead hazard evaluations, and must comply with Section 1012 and 1013 regulations. Any unit inspected which has an EBLL child must comply with Section 1012-1013 and the Stamford local lead ordinance in remediation.

## **Housing**

### **Housing Needs (91.205)**

\*Please also refer to the Housing Needs Table in the Needs.xls workbook

1. Describe the estimated housing needs projected for the next five year period for the following categories of persons: extremely low-income, low-income, moderate-income, and middle-income families, renters and owners, elderly persons, persons with disabilities, including persons with HIV/AIDS and their families, single persons, large families, public housing residents, families on the public housing and section 8 tenant-based waiting list, and discuss specific housing problems, including: cost-burden, severe cost-burden, substandard housing, and overcrowding (especially large families).
2. To the extent that any racial or ethnic group has a disproportionately greater need for any income category in comparison to the needs of that category as a whole, the jurisdiction must complete an assessment of that specific need. For this purpose, disproportionately greater need exists when the percentage of persons in a category of need who are members of a particular racial or ethnic group is at least ten percentage points higher than the percentage of persons in the category as a whole.

3-5 Year Strategic Plan Housing Needs response:

1. As noted above, housing affordability is a critical issue for all categories of low-income. As can be seen on the HUD prescribed Housing Needs table, in the group earning 0% - 30% of area Median income (Extremely Low Income - HUD definition) there are 1033 elderly renters, 1,124 small family renter households and 421 Large Family Renter Households who are experiencing some housing problems. That is, they pay more than 30% of their income for housing costs and/or they live in overcrowded apartments. Nearly all of the Extremely Low Income Elderly and Small Family renter households with identified housing problems pay excessive housing costs. At least 100 Large Families with Extremely Low Income are overcrowded in their otherwise affordable apartments. Choosing to live in an apartment that is too small for their family is an alternative to paying excessive costs. However, the problem as it relates to the housing stock, is not the availability of large apartments with 3 or more bedrooms but that the limited incomes of these families makes affording a suitably sized apartment prohibitive.

Nearly all elderly homeowners (89% totaling 1,846) who are Extremely Low Income, have excessive housing costs. While many may have purchased their homes decades ago and they may be mortgage-free, the cost of maintenance, taxes, utilities and insurance consume more than 30% of their income. These homeowners may avail themselves of reverse mortgage programs to enable them to afford to remain in their homes. Similarly 89% of Small Family Homeowners with Extremely Low Income (488) are cost burdened.

Among Very Low Income Renter Households, there are 271 Elderly and 883 Small Families with excessive housing costs. There are 467 Very Low Income Large Families with rental housing problems; less than half are cost burdened while most

are over-crowded. Again, overcrowding is an alternative to paying excessive rental costs. However, the issue is the ability to afford a suitably sized unit. Approximately half of the Very Low Income Elderly Homeowners, or 594, and 78% of Small Family Homeowners (718) with Very Low Income are cost burdened, including 500 households who pay more than 50% of their income for housing.

Among Low Income Households, earning 50-62% of the Area Median Income, the greatest need is among Small Family households; 38% of renters (239) pay excessive housing costs, and 33% of Homeowners (148) pay more than 50% of their income for housing.

To meet these needs, the City's goal is to invest available grant funds strategically, by (1) assuring continued usefulness of existing assisted housing stock through rehabilitation, and (2) leveraging as many dollars as possible to create new units to serve these stressed populations. The identified needs of Small Family Very Low Income and Low Income Renters and Owners will be addressed through rehabilitation, construction and downpayment programs. The needs of Extremely Low Income Elderly and Families will be addressed by housing rehabilitation of assisted housing operated by the Housing Authority and non-profit entities.

Housing need remains critical for populations with special needs for supportive housing/transitional units, even though the agencies associated with the City's Continuum of Care are seeking to create 20 more of these units. Often, the agency developing such housing can secure a site and financing, but has difficulty locating a continued flow of monies required for provision of supportive services. A complex of 12 supportive units is now being developed by Mutual Housing of Southwestern Connecticut (MHA) on Fairfield Avenue. This complex will absorb some residents of public housing being scheduled for demolition as part of a HOPE VI project. However, the cooperating support agency continues to seek funds to provide required support services upon completion of construction. Nonetheless, it remains a priority of our Continuum of Care to develop 20 permanent supportive housing units for these more vulnerable populations. The City cooperates in this development with HOME funds and in some cases, acquisition funds from its capital budget.

2 The minorities/ethnicity groups experiencing housing problems disproportionate to their proportion of the population are: Black Non-Hispanic (49.5% experience housing problems, but they compose only 15.4% of the population), Hispanic (65.1% experience housing problems, but they compose 16.8% of the Stamford population), and Asian Non-Hispanic (40.9% experience housing problems, but they are only 5% of the Stamford population). Maps # 3 & 4 reveal that the African American and Hispanic people reside concentrated in the area targeted for CDBG and HOME funds. Map 5 shows the combined minority population of Stamford's target neighborhoods. The South End and eastern half of the Westside have a total minority population in excess of 77%. Two-thirds to three quarters of the population of Waterside neighborhood and the balance of the Westside is comprised of minorities. Approximately 50% of the Eastside population is minority. The City targeting strategy will utilize available HUD funds to benefit minority families and their housing problems.

The HUD Housing Needs Table provides the information summarized above for all populations in extremely low, very low and low income categories. When comparing this table's data to HUD data on housing need by racial/ethnic category, it can be seen that several groups experience housing problems disproportionate to their

population within the income category, that is, there is over a 10% difference between the representation of the race/ethnicity in an income group and household size and the overall percentage of those with housing problems in that same group. For example, in the very low income group, 81% of Hispanic family renters experience housing problems, while for all ethnicity/races, the percentage experiencing housing problems is 66.9%. In the low income group, 100% of the elderly home owners who are black/non Hispanic experience housing problems, while overall, 21.7% of elderly owners in this income group experience housing problems. Statistically, this information for Asian populations in all income groups cannot be provided by family size. Yet the figures for Asians by group indicate overall a disproportionate experience of housing problems. For example, 94.9% of renters who are Asian and very low income experience housing problems. This type of disproportionate effect is noted with a comment on the HUD Housing Needs Table, and is detailed in the table located in Exhibit IV, Charts and Maps.

### **Priority Housing Needs (91.215 (b))**

1. Identify the priority housing needs in accordance with the categories specified in the Housing Needs Table (formerly Table 2A). These categories correspond with special tabulations of U.S. census data provided by HUD for the preparation of the Consolidated Plan.
2. Provide an analysis of how the characteristics of the housing market and the severity of housing problems and needs of each category of residents provided the basis for determining the relative priority of each priority housing need category.

Note: Family and income types may be grouped in the case of closely related categories of residents where the analysis would apply to more than one family or income type.

3. Describe the basis for assigning the priority given to each category of priority needs.
4. Identify any obstacles to meeting underserved needs.

3-5 Year Strategic Plan Priority Housing Needs response:

1. HUD definition of High Priority High priority are activities that the City anticipates funding, Medium Priority are activities that the City may approve subject to availability of funds, and Low Priority are activities that the City does not anticipate funding but would support other agencies in their grant applications to other funding sources.

The HUD Housing Needs Table portrays the housing needs for elderly, small families, large families and individuals by income category, based upon housing problems defined as excessive housing costs and/or overcrowding. A significant need is shown for assistance for more than 1,000 Extremely Low Income elderly households. For the Extremely Low Income and Very Low Income categories of small families, approximately 1000 households in each income group is experience housing problems, predominantly excessive housing cost. Similarly, in both of the lowest income groupings, a significant proportion (89%) of large families, experience housing problems. Finally, Extremely Low Income and Very Low Income individuals show significant numbers having housing problems. The greatest housing needs, then, are shown by Extremely Low Income elderly, Extremely Low and Very Low

Income families and individuals. The Consolidated Plan assigns a High Priority for projects and programs that address the housing needs of these populations.

CDBG will assist approximately 200 housing units annually. This assistance will be provided to non-profit owners of assisted housing for rehabilitation as part of the annual Request for Proposals that are considered during the annual public hearing and budgeting process for the Annual Action Plan. These units typically house the "poorest of the poor," the Extremely Low Income and Very Low Income tenants. Such property owners include the Housing Authority and other non-profit entities. Much of this assistance will be for single purpose renovations such as elevator replacement, window replacement, re-roofing and kitchen/bath renovation. The CDBG assistance will be provided in the form of a zero percent forbearance loan that is forgiven at the end of the loan term. CDBG rehabilitation assistance to the Housing Authority will not be subject to a loan. In some cases, the CDBG funds will be supplemented with Housing Authority modernization funds, replacement reserve funds or private loans. In addition, CDBG funds, including program income to the Revolving Loan Program, will be allocated to the Stamford Community Development Office to substantially rehabilitate up to 10 units per year. CDBG funds will be used for program delivery costs of CDBG, HOME and other rehabilitation programs.

The HOME Program grant is expected to provide assistance for the rehabilitation, construction or acquisition of up to 30 affordable housing units for low income households. Utilizing HOME Program Income, the City will assist approximately five additional units annually. Since Program Income is generated by the early repayment of Downpayment Loans due to sale or refinance of condominiums, the receipt of Program Income cannot be scheduled.

All HOME assistance will be provided in the form of a zero percent deferred payment loan. Developers who are participating in the Low Income Housing Tax Credit Program, may request that their HOME financing accrue interest at the applicable federal rate; in that case, the City will cooperate in such request. Due to the need to structure rents that can support the costs of a structure's rehabilitation and operation, approximately 20% of all HOME rehabilitation/construction assistance will be targeted to create units serving Very Low Income households. The balance will benefit Low Income households.

Approximately 15 low income households will be assisted annually with downpayment loans for the purchase of condominiums. Some very low income households may receive additional downpayment assistance from the Housing Authority through the HOPE 6 Program or through the Housing Development Fund, Inc. through their Smart Move Program. Other Very Low Income households may be assisted with HOME downpayment loans to purchase condominiums that are developed by non-profit corporations and sold at below-market prices.

The HOME Program will continue to utilize its HOME Loan recapture mechanism, rather than a resale price restriction. However, buyers of certain condominiums constructed by non-profit developers may be subject to resale price restrictions that are not triggered by the HOME Program.

Due to the HOME restriction on the maximum after-rehab value of owner-occupied homes (currently \$312,000), the City anticipates that very few homeowners will meet the HUD eligibility requirements for using HOME funds for owner-occupied rehabilitation.

2. As noted earlier, the priority assigned in the HUD needs analysis chart is based upon likelihood of funding and the availability of funding. The degree of funding (that is, number of units) for each sub group in the income level analysis is the product of matching fund sources to level of subsidy. CDBG funds can best address the rehabilitation of assisted housing that is rented to Extremely Low Income and Very Low Income tenants. These units are most likely receiving other subsidies, but require the CDBG funds to achieve major building improvement projects for which replacement reserves are insufficient.

The balance of funds will be distributed to projects with less access to other operating subsidies, whereby rents must cover the cost of operating expenses, maintenance and improvements. Units are reserved for Very Low Income Tenants and Low Income tenants.

Due to the issue of the high property values in Stamford exceeding the HUD maximum value for participation in the City's HOME rehabilitation program as an owner occupant, little emphasis will be given to homeowner rehabilitation under the HOME Program. With high property values and low interest rates, homeowners can refinance their homes to access funds for rehabilitation. However, the HOME Downpayment Loan Program will annually assist approximately 15 Very Low Income and Low Income households.

As part of the assistance to fifteen homebuyers, lump sum repayments of existing downpayment loans generally produces enough revenue for 5 of the downpayment loans. These downpayment loans are addressed by the High Priority goal (partial new funds, partial projected receipts) of 15 units for small related owners in the Low Income category.

3. As noted above, the basis for assigning the priority to each activity/category of need is the likelihood of it receiving funding from the CDBG or HOME funds. If we are sure funds from these projects will be used, high priority is assigned. If limited HOME or CDBG funds are combined with projected, but not yet present sources of funds (program income) medium priority is assigned. Low priority indicates no program funds designated for that category, but the City will support projects in these categories as they seek outside/other funding.

As discussed above, the priority assigned to the following categories is based on the number of people in that category experiencing housing problems, and the proportional severity of the problem experienced by the group. The priorities are:

- Extremely Low Income elderly renters,
- Extremely Low and Very Low Income families
- Extremely low and Very low Income individuals

4. The greatest need experienced here is the lack of affordable housing. This is a function of supply and demand. With prices for housing and land being 'bid up' it is very hard to impact the supply side of this equation. Even when a site is found, and new construction of affordable housing occurs, deep subsidies are usually required to enable low income households to afford the units. Of equal priority is to use HUD funds to assure continued availability of code compliant affordable units by assisting in rehabilitating existing for the preservation of affordable units.

The greatest obstacle to meeting the above categories of underserved needs is the cost of providing necessary subsidy - especially great for those in the less than 30% AMI category. Even if units can be created or rehabilitated, deep development subsidies or rental/operating subsidies must be in place to assure affordability and financial feasibility.

## **Housing Market Analysis (91.210)**

\*Please also refer to the Housing Market Analysis Table in the Needs.xls workbook

1. Based on information available to the jurisdiction, describe the significant characteristics of the housing market in terms of supply, demand, condition, and the cost of housing; the housing stock available to serve persons with disabilities; and to serve persons with HIV/AIDS and their families.
2. Describe the number and targeting (income level and type of household served) of units currently assisted by local, state, or federally funded programs, and an assessment of whether any such units are expected to be lost from the assisted housing inventory for any reason, (i.e. expiration of Section 8 contracts).
3. Indicate how the characteristics of the housing market will influence the use of funds made available for rental assistance, production of new units, rehabilitation of old units, or acquisition of existing units. Please note, the goal of affordable housing is not met by beds in nursing homes.

### 3-5 Year Strategic Plan Housing Market Analysis responses:

The housing stock of the City of Stamford has continued to increase through the 1990's. The number of housing units increased by 6.9% to 47,317, a net increase of more than 3,000 dwellings. Fifty-seven percent of the housing is owner-occupied and 43% is renter-occupied. Vacancy rates for both owner and renter housing were sharply reduced in the 1990's. Comparing 1990 to 2000, the rental vacancy rate dropped from 6.5% to 3%. The homeowner vacancy rate dropped from 1.9% to 0.6%. This helps explain how Stamford's population grew by 8.4% while the housing stock grew by only 6.9%. The low vacancy rate reflects a very tight housing market that is fueling a market response of rising rent levels and home prices.

Since 1997 the City of Stamford has been focusing its efforts on assisting low income people to become homeowners, thereby assuring that they will have an affordable place to live in Stamford into the future. Homeownership is a powerful means of building wealth in Stamford's strong real estate market. The City has been dedicating a substantial portion of its federal HOME Investment Partnership Program funds for downpayment loans for low income home buyers. This has also contributed to the closing of the racial/ethnic homeownership gap.

The City of Stamford and the Stamford Community Development Program has been closely monitoring the gap in homeownership among minority households. The gap has been closing at a substantial pace. The 1980 Census found that the rate of homeownership among White households was 68%, the rate among Black households was 10.2% and the rate among Hispanic households was 13.8%.

The 1990 Census reported that the homeownership rate among White households remained at 68%. However the rate had increased to 23% for Black households and

26% for Hispanic households. This represented more than a doubling of the ownership rate for minorities.

The 2000 Census showed the ownership rate had not changed for White households, but it had increased to 31.9% for Black households and 28% for Hispanic households. Although the increase in proportion of Hispanic homeowners does not appear to increase much in the 2000 Census, note that this is likely dampened by the tremendous increase in the Hispanic population due to immigration. In this case the raw numbers tell the real story. In 1990 there were 656 Hispanic homeowners. In 2000 this more than doubled to 1,485 Hispanic homeowners. Among Black households, over the 20 year period from 1980 to 2000, the rate of homeownership more than tripled from approximately 10% to one-third of all Black households.

In the last Consolidated Plan for Stamford (2000) the market analysis section read: "The impact of the latest wave of prosperity on housing in Stamford is swollen property values and an acute housing shortage. Sales data indicates median home sale value in 1986 was \$180,500. In 1998, it is \$236,750. In 1999, median sales price of a house in Stamford was \$337,500." At the end of 2004, the median sales price of a Stamford home was \$489,000 ("Home, Sweet Home" Advocate, 12/29/04). A Spring quarterly real estate review ("House Prices Continue to Climb" Advocate, 5/20/05) pegged the average sale price of a single-family home in the first quarter of 2005 at \$754,088, and for a condominium, \$315,585. For a home of \$489,000, a family income of \$127,781 is needed, assuming a 5% downpayment and 30-year 6% mortgage. The median income for the Stamford Metropolitan Area is \$111,600. This means that more than half of the households in Stamford do not have sufficient income to afford to buy a home here. Those fortunate to have purchased homes before the spike in home prices have secured an affordable place to live in Stamford for the future. Those who cannot afford to buy a home in Stamford must remain renters, and they are paying well over 30% of income for housing. Further, given the trend since 2000, it does not appear that the market will offer any relief.

The 2000 Census shows that the median rent had risen 27% during the 1990's. The current Section 8 Fair Market Rent for a two-bedroom unit is \$1,437. To afford this market rent, a household would need to earn \$57,480 annually. This represents 52% of the area median income. The 2000 Census reports that 31.2% of Stamford households are paying more than 35% of their income for rent and 18.4% are paying more than 50% of their income for rent.

The housing in the target areas is the oldest in the City. But even the cost of these units outstrip family income. This is especially true when cost of maintenance is factored in. Hence, the Community Development Office sees small multi-family buildings being purchased by investor owners. If cash is available to these owners for repairing the properties, the units are often rented at well above HUD fair market value.

Units available for those with special needs are limited. Approximately 1700 units are available for elderly, with only 360 units for frail elderly. Approximately 630 units exist to house those with special needs/disabilities. This number includes all homeless facilities, transitional facilities and supportive housing for those not homeless. The Stamford Health Department, through the Stamford Cares program, assures counseling and case management to those with AIDS. This includes application to an outside source for one time assistance with funds for housing.

## 2. Assisted Rental Units

Approximately 4,650 rental units operated by the Housing Authority as well as for-profit and non-profit owners are subject to limits on rent charges imposed by a variety of programs and policies. In general, rent is limited to 30% or less of the income of eligible tenant households in these units. These 4,650 "assisted" rental units are located throughout the city in Housing Authority and not-for-profit developments, or in private developments that have benefited from a variety of government programs, including tax-credits, tax-exempt bond financing, below-market loans, and inclusionary-zoning-driven density bonuses. Residency at approximately 1,700 of these assisted housing units is restricted to elderly. Of the 4,600 units, Stamford has approximately 2,700 assisted housing units in over 130 different sites for extremely low and low income households.

Over the last thirty years, non-profit and for-profit developers of the projects have used a variety of private, State, local, and Federal housing programs to make the projects affordable to these income groups. Current programs include the locally-administered HOME and CDBG programs that have targeted funds for projects in several distressed neighborhoods. Over the years, assisted housing developments in Stamford have received Federal funds from the Section 221(d) (3), Section 236, Section 8, Rental Rehabilitation, Section 312, Lead Based Paint Hazard Control and Section 202. Developers have also used State programs administered by the Connecticut Department of Economic and Community Development (formerly the Department of Housing) and the Connecticut Housing Finance Authority. In recent years, developers have also used the Low Income Housing Tax Credit program for rental projects in Stamford. Local banks have participated as lenders in some of these projects. Of the assisted units in Stamford, 59 percent are targeted for family households and 26 percent for elderly households. Also, 15 percent are congregate/handicapped or special units receiving supportive services. All assisted housing developments have low vacancy rates that reflect normal turnover of units. Many developments have long waiting lists, while other developments had no vacancies and do not bother to maintain waiting lists since they did not expect turnover of tenants.

3. The housing market dictates that any CDBG or HOME funds be used to leverage other private or public funds. Cost of development is very high. A limited number of new construction projects can be done with HOME funds, but only if sites are obtained at a low cost or a 'written down' cost. CDBG funds will be concentrated on less rehabilitation of older multifamily structures in the target area.

## **Specific Housing Objectives (91.215 (b))**

1. Describe the priorities and specific objectives the jurisdiction hopes to achieve over a specified time period.
2. Describe how Federal, State, and local public and private sector resources that are reasonably expected to be available will be used to address identified needs for the period covered by the strategic plan.

3-5 Year Strategic Plan Specific Housing Objectives response:  
Housing - 5 Year Objectives

1. Assist 691 units of existing elderly rental housing to remain safe, sound and affordable with CDBG assistance.
2. Assist 145 units of existing family rental housing to remain safe, sound and affordable with CDBG assistance.
3. Rehabilitate or construct 125 family rental units with CDBG/HOME assistance.
4. Rehabilitate or construct 225 individual rental units with CDBG/HOME/HUD funds.
5. Produce 30 supportive housing units in cooperation with the Continuum of Care.
6. Assist in the purchase of 75 homes by low income families with HOME down payment assistance. The downpayment assistance program has consistently met the needs of the minority community. To date, 60% of those assisted are African American, 19% are Hispanic, and 5% are Asian. It is anticipated that future downpayment assistance will continue these trends. This would result in minorities receiving the majority of the downpayment loans for the year 2005 – 2006.
7. Make 160 units lead safe using anticipated Lead Hazard Control funds.
8. Through Inclusionary Zoning, construct 245 units for low income families.
9. Through Inclusionary Zoning buy-outs and Linkage funds, construct 110 units.
10. Assist in the acquisition of six housing development sites using Capital Budget funds.

The City of Stamford requires that participants in the HOME downpayment program make the units assisted their principal residence for the life of the loan. In addition, should they sell the unit, HOME funds are recaptured. When foreclosure by sale occurs, the owner will be required to repay HOME funds only as net proceeds permit the satisfaction of prior liens, closing costs and the HOME loan. When voluntary sale occurs, the City must be notified by the Owner, and, should the sale price of the property be less than outstanding liens, the City may exercise a right of first refusal, and arrange a purchase by a low-income home buyer. This will assure that the affordable unit will not be lost.

#### Integration of Other Funding Sources

The City of Stamford budgets some \$800,000 in local capital funds for housing related matters. These funds are most often used to purchase property for development as affordable housing. In addition, \$2,100,000 in Affordable Housing Trust Funds has been generated through Inclusionary Zoning buy-outs. The City of Stamford has modified its Linkage Ordinance that will begin generating revenue for the Housing Trust Funds in 2005-06. These funds will be used to assist prioritized projects submitted to the City by non-profit developers. The developers' efforts will be further expanded and targeted to HUD defined low income families through participation of CDBG or HOME funds. Current developers have also used State HOME funds and Low Income Tax Credits for financing housing.

### **Needs of Public Housing (91.210 (b))**

In cooperation with the public housing agency or agencies located within its boundaries, describe the needs of public housing, including the number of public housing units in the jurisdiction, the physical condition of such units, the restoration and revitalization needs of public housing projects within the jurisdiction, and other factors, including the number of families on public housing and tenant-based waiting lists and results from the Section 504 needs assessment of public housing projects

located within its boundaries (i.e. assessment of needs of tenants and applicants on waiting list for accessible units as required by 24 CFR 8.25). The public housing agency and jurisdiction can use the optional Priority Public Housing Needs Table (formerly Table 4) of the Consolidated Plan to identify priority public housing need to assist in this process.

#### 3-5 Year Strategic Plan Needs of Public Housing response:

The Stamford Housing Authority (SHA) owns and/or manages 1,660 housing units. This excludes 430 apartments that were privatized and continue to provide affordable housing (Rippowam Park, formerly known as W.C. Ward Homes ). In Southfield Village, HOPE VI created 330 on-site units plus 40 off-site units which house a mixture of low-moderate income and market rate units. In addition, the Authority has received a HOPE VI grant for Fairfield Court. With the new \$20 million HOPE VI grant from HUD, (awarded in 2004) the Authority will build 179 new rental housing units and create 96 homeownership opportunities. The Authority's stock includes 628 smaller units designed for elderly or disabled households. Family public housing comprises the remainder of public housing. The SHA has an average vacancy rate of 5 percent.

#### Housing Authority Needs Analysis

A review of the waiting list summaries provided by the Housing Authority in its "Year 5 PHA Plan, 5 Year Plan for Fiscal Years 2005 - 2009" indicates great need for units to serve those earning 0 - 30% of Average Median Income, as defined by HUD. The four housing resources the Authority offers are Section 8 Tenant Based assistance, Section 8 Moderate Rehabilitation units, Section 8 Single Room Occupancy assistance, and Housing Authority owned and operated Public Housing. A total of 1272 people are on the waiting list for these resources, with 85% of them falling into the 0 - 30% AMI category. Families with children are the bulk of those on the waiting list, at 49%, followed by elderly at 12% and disabled/families with disabilities at 11%. The waiting list for Section 8 tenant based assistance and Public Housing, two and three bedroom units, are closed. The need evidenced by the Authority's waiting lists parallels that on the Housing Needs analysis for this plan, in which the most numerous with housing problems are those in the 0 - 30% AMI category.

#### Section 8 Rental Assistance Program

The Stamford Housing Authority (SHA) administers a rental assistance program that provides Section 8 vouchers for approximately 966 extremely low and low income households. The Authority will continue to encourage private landlords to participate in the Section 8 program, including requesting rent exceptions whenever required by the market. It has also successfully initiated a homebuyer program using Section 8 assistance. The Authority will work in combination with private housing developers to provide project based Section 8 assistance in housing developments as funds are available.

#### Physical Condition And Restoration And Revitalization Needs

The Stamford Housing Authority owns and manages 21 developments, many of which are over 50 years old and in need of modernization or replacement. The SHA has conducted a physical needs analysis for their properties to determine whether apartments should be rehabilitated or replaced. Need for renovation and maintenance of major systems greatly exceeds funds available through capital fund and capital fund program replacement.

## **Public Housing Strategy (91.210)**

1. Describe the public housing agency's strategy to serve the needs of extremely low-income, low-income, and moderate-income families residing in the jurisdiction served by the public housing agency (including families on the public housing and section 8 tenant-based waiting list), the public housing agency's strategy for addressing the revitalization and restoration needs of public housing projects within the jurisdiction and improving the management and operation of such public housing, and the public housing agency's strategy for improving the living environment of extremely low-income, low-income, and moderate families residing in public housing.
2. Describe the manner in which the plan of the jurisdiction will help address the needs of public housing and activities it will undertake to encourage public housing residents to become more involved in management and participate in homeownership. (NAHA Sec. 105 (b)(11) and (91.215 (k))
3. If the public housing agency is designated as "troubled" by HUD or otherwise is performing poorly, the jurisdiction shall describe the manner in which it will provide financial or other assistance in improving its operations to remove such designation. (NAHA Sec. 105 (g))

3-5 Year Strategic Plan Public Housing Strategy response:

1 and 2. Strategies To Improve The Living Environment Of Families Residing In Public Housing

The goals of the Housing Authority include completing the HOPE VI project for Fairfield Court to create 179 new rental units; initiating the Vidal Court predevelopment process; developing a supportive housing development with a non-profit; acquiring a housing development site; considering expiring-use properties for acquisition; considering a second supportive housing project; improving property security with community policing, and providing homebuyer counselling and downpayment loans to 86 Housing Authority tenants. The Housing Authority's Comprehensive Plan identifies improvement needs of its properties. The City will consider the recommendations of this Plan in deliberating on requests from the Housing Authority for CDBG funds for public housing improvements. The Housing Authority will develop 35-55 supportive housing units.

A major goal of the Stamford Housing Authority (SHA) is to increase the self-sufficiency and economic integration of families living in public housing by redeveloping its non-elderly housing complexes, conducting resident outreach and promoting its homeownership downpayment initiatives. The SHA is promoting the involvement of residents by collaborating on supportive services, management, and redevelopment issues. Residents were consulted in the hiring of a new SHA executive director and a citywide residents' council was formed to join the elected leaders of each housing complex in collective efforts. The Authority has also conducted a series of resident association/community meetings across its entire state and federal portfolio. these meets are addressing a number of property management issues including parking administration, lease enforcement and development security.

The Authority will continue to stimulate partnerships with private developers to provide much needed capital for redevelopment and the construction of new mixed-income housing. In this way, the Authority will create privately owned, economically integrated developments that include low, moderate and market rate housing operating under long term use restrictions. Tenants of these "privatized" developments will enjoy a high degree of investment as have members of the Southfield Village HOPE VI resident community. The Authority invited residents of Fairfield Court, a severely distressed public housing complex, to join neighborhood advocates in planning the revitalization of their West Side community. These efforts, along with the support of local non-profits and service providers, resulted in a successful HOPE VI Application.

The Housing Authority is also planning a 'state funded' HOPE VI project at another of its older developments, Vidal Court. To improve management and operation of all housing under its purview, the Authority has initiated a management-by-objectives organizational model focussing on quality assurance.

### **Barriers to Affordable Housing (91.210 (e) and 91.215 (f))**

1. Explain whether the cost of housing or the incentives to develop, maintain, or improve affordable housing are affected by public policies, particularly those of the local jurisdiction. Such policies include tax policy affecting land and other property, land use controls, zoning ordinances, building codes, fees and charges, growth limits, and policies that affect the return on residential investment.
2. Describe the strategy to remove or ameliorate negative effects of public policies that serve as barriers to affordable housing, except that, if a State requires a unit of general local government to submit a regulatory barrier assessment that is substantially equivalent to the information required under this part, as determined by HUD, the unit of general local government may submit that assessment to HUD and it shall be considered to have complied with this requirement.

3-5 Year Strategic Plan Barriers to Affordable Housing response:

Cost of housing is perhaps the greatest barrier to housing choice for the low-and moderate income family. Market forces have resulted in rents being "bid up". The finance and technology boom brings many housing consumers to the market with more cash. At the same time, service sector jobs that most often support the low-moderate income remain at low earning levels.

In 2004, the National Low-Income Housing Coalition showed that in order to rent a two-bedroom apartment at the fair market rate in the Stamford-Norwalk area, one would have to earn \$27.63 an hour (\$50,286 annually). Home ownership opportunities are very limited, as noted above, the average price of a condominium in Stamford in the Spring of 2005 was \$315,585, and for a home, \$754,088. A buyer of low or moderate income is most often confined to the condominium market, and to the lower end of that market. At that point, the quality of the housing, and continued uncontrolled obligations to a condominium association must be evaluated - a condominium may not always be a good alternative to renting.

2. The following policies and conditions have been identified as creating obstacles to the delivery of affordable housing in Stamford. Key goal of any policy relative to access to affordable housing is the policy's creation of additional units.

- Zoning

Stamford Zoning Regulations not only promotes, but requires the inclusion of affordable housing in new multifamily developments. The zoning regulations permit multi-family housing in a good portion of the city. Furthermore, zoning provides for a 50 percent density bonus to developers of affordable elderly housing as well as a favorable 1:3 parking requirement for government-assisted elderly housing. Assisted family housing also receives a reduction in the parking requirement to 1.5:1 from the normal ratio of 1.75:1.

Stamford has a historical density bonus - if a redevelopment plan keeps a historical structure, additional density is allowed on the site. This feature has generated approximately 200 units since 1990, nearly all of which have been affordable. In addition, inclusionary zoning and a commercial linkage ordinance is now in place that is generating affordable housing units and capitalizing an affordable housing trust fund.

Although developers in Stamford have not been able to satisfactorily address the housing needs of single persons that are neither elderly nor have disabilities, current zoning does permit up to four unrelated persons to share a housing unit. This regulation allows single persons to share the cost of an apartment and thereby secure adequate and affordable housing. Zoning also permits rooming houses in multi-family and commercial zones.

Limited availability of vacant residential property makes accessory apartment zoning one of the best opportunities for expanding the housing stock of small rental apartments. The Master Plan for the City of Stamford recommends permitting accessory apartments, and in 1986, the Zoning Board adopted regulations to permit accessory apartments. An appeal to the Board of Representatives was successful. The appeal called for overturning the regulations because they would mean "elimination of existence of single family neighborhoods and destruction of property values." One suggestion for again looking at accessory apartments is to have the Zoning Board re-consider an accessory apartment regulation targeted to the elderly.

- Housing Code Enforcement

Rooming houses and SROs generally have a reputation for poor conditions. The local housing code does not have specific provisions for this type of housing. Local codes could be reviewed for provisions for SRO housing, creating a desirable housing alternative for individuals with low incomes. Standards might include 200-300 square foot rooms with a private bathroom, small refrigerator, and food preparation area.

- Historic Preservation

Stamford has many old historic residential structures. Preservation maintains the character and stability of neighborhoods. However, preservation is often more costly than new construction. Rehabilitating and preserving historic features in these properties often escalates development costs, making some projects infeasible. The Planning and Zoning Commission will continue to give special exceptions and 50 percent density bonuses for development of historic properties. (Section 7.3 of Stamford Zoning Regulations), as discussed above.

- Geographic Concentration of Housing Choice

The paradox associated with the zoning, housing code and historic preservation measures developed above is that the opportunities for development of affordable housing will be in areas of the City that have higher concentrations of low-moderate income and minority residents. The need for affordable housing units is so

great, that opportunities to provide affordable housing must be taken where they can be made. The Inclusionary Zoning regulations will assure that new housing opportunities will become available wherever new housing is developed. That is, in the Mill River Zone and other multifamily zones, zoning will assure that there will be affordable housing as part of every new development.

While Stamford is the region's leader in providing affordable housing, it is important that our neighbors in New Canaan and Darien step up to the plate and contribute to the effort of creating affordable housing. The Southwestern Regional Planning Agency and the Conference of Connecticut Municipalities should work to achieve a regional affordable housing program, that would be:

- profitable to developers and building trades,
- tolerated by current area residents by improving tax base, assisting in achieving extension of needed infrastructure, and offering housing opportunities for maturing offspring, and
- appeal to those with moderate income seeking greater housing choice - size, kind, and location.



### **Homeless Needs (91.205 (b) and 91.215 (c))**

\*Please also refer to the Homeless Needs Table in the Needs.xls workbook

Homeless Needs— The jurisdiction must provide a concise summary of the nature and extent of homelessness in the jurisdiction, (including rural homelessness where applicable), addressing separately the need for facilities and services for homeless persons and homeless families with children, both sheltered and unsheltered, and homeless subpopulations, in accordance with Table 1A. The summary must include the characteristics and needs of low-income individuals and children, (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered. In addition, to the extent information is available, the plan must include a description of the nature and extent of homelessness by racial and ethnic group. A quantitative analysis is not required. If a jurisdiction provides estimates of the at-risk population(s), it should also include a description of the operational definition of the at-risk group and the methodology used to generate the estimates.

3-5 Year Strategic Plan Homeless Needs response:

In January of 2005, the local Continuum of Care conducted a census of the homeless in Stamford and Norwalk. A total of 14 agencies participated in the 'point in time' count of homeless. A total of 550 people were surveyed. Of those surveyed, 426 met the HUD definition of 'homeless'. Of those responding, 330 were male, and 227 were white (HUD definition). Thirty eight per cent were Black or African American (211) while 67 (12%) considered themselves 'other multi-racial'. Of the 426 'homeless', 194 were at a shelter, 209 were in transitional facilities and 23 were unsheltered.

The following lists characteristics and needs of low income individuals and families with children (especially extremely low income) threatened with homelessness.

Families find that the income payments from the AFDC program are insufficient to pay current rental charges. If families are able to find an affordable apartment, they often lack the money to pay for a security deposit. The following profile typifies the families that come to emergency shelters:

- \* Evicted from homes of friends or family
- \* Female head of household
- \* Two children under five years old
- \* No high school diploma
- \* Income from AFDC program
- \* Black or Hispanic.

According to social service providers in Stamford, the following groups of adults and children are not currently homeless but are imminently at risk of becoming homeless:

- \* Single mothers with children who don't have their own households and live with their children in someone else's household, usually relatives
- \* Extremely low income households in non-assisted, substandard, overcrowded, and unaffordable units
- \* Lower-paid and laid off workers during a recessionary period
- \* Extremely low and low income substance abusers in recovery
- \* Extremely low and low income mentally ill persons
- \* Extremely low and low income dually diagnosed persons experiencing both mental illness and substance abuse
- \* Families in buildings being foreclosed or condemned, or in assisted developments being converted to market-rate developments
- \* Extremely low and low income ex-offenders
- \* People paying too much of their income for rent or mortgage payments
- \* Extremely low and low income Hispanic families and individuals who do not take advantage of housing and social services because of language problems
- \* Extremely low and low income individuals with disabilities for whom housing and social service programs are not available.

The following groups constitute the major part of the unsheltered homeless:

- \* Individuals who are extremely low and low income substance abusers turned away from some shelters and evicted from housing
- \* Lower paid and laid off workers during a recessionary period
- \* Extremely low and low income mentally ill persons who have been released from State mental hospitals or can no longer live any longer with family and friends

## **Priority Homeless Needs**

1. Using the results of the Continuum of Care planning process, identify the jurisdiction's homeless and homeless prevention priorities specified in Table 1A, the Homeless and Special Needs Populations Chart. The description of the jurisdiction's choice of priority needs and allocation priorities must be based on reliable data meeting HUD standards and should reflect the required consultation with homeless assistance providers, homeless persons, and other concerned citizens regarding the needs of homeless families with children and individuals. The jurisdiction must provide an analysis of how the needs of each category of residents provided the basis for determining the relative priority of each priority homeless need category. A separate brief narrative should be directed to addressing gaps in services and housing for the sheltered and unsheltered

chronic homeless.

2. A community should give a high priority to chronically homeless persons, where the jurisdiction identifies sheltered and unsheltered chronic homeless persons in its Homeless Needs Table - Homeless Populations and Subpopulations.

3-5 Year Strategic Plan Priority Homeless Needs response:

The Continuum of Care's strategy and priorities for addressing the needs of the Homeless and Special Needs Populations were developed with significant input from homeless assistance providers, homeless persons, and other concerned citizens. The plan states:

"Our strategy for Ending Chronic Homelessness by 2012 is four pronged:

- 1) Divert funds spent on emergency and transitional programs for chronically homeless persons and use the freed up funds to build more Permanent Supportive Housing (PSH) for chronically homeless persons; use HUD CoC funds to leverage our mainstream resources such as HOME, CDBG, HOPE VI, Low Income Housing Tax Credits, and Housing Trust Fund funds via Continuum members such as SLLW and Mutual Housing via the Affordable Housing Action Collaborative (AHAC). Goal: 20 new units in 18 months.

- 2) Use the HMIS and our \$450,000 SSA HOPE grant to increase the speed at which homeless persons apply for Medicaid, SSI, TANF, and Food Stamps (goal: five days) and the speed at which they receive those benefits/entitlements. Goal: 60 days.

- 3) "Close the front door" of our Emergency Shelter (ES) and Transitional Housing (TH) components and "open the backdoor" by building PSH and targeting chronically homeless persons at 25% of new admissions Goal: 25% by June 1, 2006.

- 4) Build the capacity of vocational programs for homeless persons in mainstream programs."

## **Homeless Inventory (91.210 (c))**

The jurisdiction shall provide a concise summary of the existing facilities and services (including a brief inventory) that assist homeless persons and families with children and subpopulations identified in Table 1A. These include outreach and assessment, emergency shelters and services, transitional housing, permanent supportive housing, access to permanent housing, and activities to prevent low-income individuals and families with children (especially extremely low-income) from becoming homeless. The jurisdiction can use the optional Continuum of Care Housing Activity Chart and Service Activity Chart to meet this requirement.

3-5 Year Strategic Plan Homeless Inventory response:

The Continuum of Care Charts contained in the Continuum's Plan indicate:

Prevention

Services in place: Please list by type (e.g., rental/mortgage assistance)

Eviction Mediation Program, housing support, short-term emergency rental assistance, crisis and respite beds, assessment and referral to appropriate community resources

Service Providers:

Person-to-Person

FS DuBois Center

St. Luke's LifeWorks

Shelter for the Homeless

Component: Outreach

Outreach in place: Please list the outreach activities, e.g., mobile van, for homeless persons who are living on the streets in your CoC area.

Project for Assistance in Transition from Homelessness, HIV testing/services, drug treatment outreach and advocacy, Specialized assessment and case management, street canvassing, placement of information at public facilities, coordination with mainstream agencies and other Continuum members.

Service Providers:

Stamford Health Department, Committee on Training and Employment (CTE), St. Luke's LifeWorks, Shelter for the Homeless, Stamford CARES (HIV/AIDS), F.S. DuBois and Stamford Health Systems (mental health), LMG or CT Renaissance (substance abuse), veteran agencies from the West Haven VA Hospital, Priority Care (visiting nurse) and Kids in Crisis Care Center (for youth and children).

Component: Supportive Services

Services in place: Please list each of the following services, if provided in your community: case management, life skills, alcohol and drug abuse treatment, mental health treatment, AIDS-related treatment, education, employment assistance, child care, transportation, and other.

Case management and Social Services, Employment Services, Substance Abuse Services, Primary and Specialty Medical Care, Mental Health Services, Veterans Services.

Service Providers:

Easter Seal's Rehabilitation Center (mental health and disabled), Goodwill Industries (disabled), CTE's Strictly Business Program, Urban League, Shelter for the Homeless, LMG, Inc. (inpatient and outpatient drug and alcohol treatment programs), and Viewpoint Recovery (inpatient drug treatment programs), Stamford Hospital, and Sober Housing (alcoholism). The Connecticut Mental Health Association, CT Renaissance, St. Luke's LifeWorks, Laurel House, Person-to Person, Stamford CARES, Health Care Connection, Child Guidance Center, and Child Care Center of Stamford Catholic Family Services, Family Centers, Options, Stamford Behavioral Health Clinic, the Office of Advocacy and Assistance of the Department of Veterans' Affairs and the West Haven VA Medical Center in the Healthcare for Homeless Veterans Program.

## Homeless Strategic Plan (91.215 (c))

1. Homelessness— Describe the jurisdiction's strategy for developing a system to address homelessness and the priority needs of homeless persons and families (including the subpopulations identified in the needs section). The jurisdiction's strategy must consider the housing and supportive services needed in each stage of the process which includes preventing homelessness, outreach/assessment, emergency shelters and services, transitional housing, and helping homeless persons (especially any persons that are chronically homeless) make the transition to permanent housing and independent living. The jurisdiction must also describe its strategy for helping extremely low- and low-income individuals and families who are at imminent risk of becoming homeless.
2. Chronic homelessness—Describe the jurisdiction's strategy for eliminating chronic homelessness by 2012. This should include the strategy for helping homeless persons make the transition to permanent housing and independent living. This strategy should, to the maximum extent feasible, be coordinated with the strategy presented Exhibit 1 of the Continuum of Care (CoC) application and any other strategy or plan to eliminate chronic homelessness. Also describe, in a narrative, relationships and efforts to coordinate the Conplan, CoC, and any other strategy or plan to address chronic homelessness.
3. Homelessness Prevention—Describe the jurisdiction's strategy to help prevent homelessness for individuals and families with children who are at imminent risk of becoming homeless.
4. Institutional Structure—Briefly describe the institutional structure, including private industry, non-profit organizations, and public institutions, through which the jurisdiction will carry out its homelessness strategy.
5. Discharge Coordination Policy—Every jurisdiction receiving McKinney-Vento Homeless Assistance Act Emergency Shelter Grant (ESG), Supportive Housing, Shelter Plus Care, or Section 8 SRO Program funds must develop and implement a Discharge Coordination Policy, to the maximum extent practicable. Such a policy should include "policies and protocols for the discharge of persons from publicly funded institutions or systems of care (such as health care facilities, foster care or other youth facilities, or correction programs and institutions) in order to prevent such discharge from immediately resulting in homelessness for such persons." The jurisdiction should describe its planned activities to implement a cohesive, community-wide Discharge Coordination Policy, and how the community will move toward such a policy.

### 3-5 Year Homeless Strategic Plan response:

Stamford's Continuum of Care (CoC) Plan was prepared by a comprehensive group of shelter operators and homeless population service providers. The list of CoC members/participants is found in Exhibit 3 to this Plan. The Continuum of Care's Plan homeless strategic plan response speaks to HUD's five concerns listed above:

The CoC conducted a Point In Time homeless census in January of 2005. It counted 82 sheltered chronically homeless persons in the Greater Stamford/Greenwich Area, and 11 unsheltered chronically homeless persons. The CoC strategy for Ending Chronic Homelessness by 2012 is four pronged:

1) Divert funds spent on emergency and transitional programs for chronically homeless persons and use the freed up funds to build more Permanent Supportive Housing (PSH) for chronically homeless persons; use HUD CoC funds to leverage Stamford's mainstream resources such as HOME, CDBG, HOPE VI, Low Income Housing Tax Credits, and Housing Trust Fund funds via Continuum members such as SLLW and Mutual Housing via the Affordable Housing Action Collaborative (AHAC). Goal: 20 new units in 18 months.

2) Use the HMIS and \$450,000 SSA HOPE grant to increase the speed at which homeless persons apply for Medicaid, SSI, TANF, and Food Stamps (goal: five days) and the speed at which they receive those benefits/entitlements. Goal: 60 days.

3) "Close the front door" of the Emergency Shelter (ES) and Transitional Housing (TH) components and "open the backdoor" by building PSH and targeting chronically homeless persons at 25% of new admissions Goal: 25% by June 1, 2006.

4) Build the capacity of vocational programs for homeless persons in mainstream programs.

CoC members will engage in activities adapted from the National Alliance to End Homelessness.

The remainder of this section is excerpted from the Continuum of Care Plan:

"Paradigm Shift and Planning: Beginning with our September 17, 2003 Plenary Session, we made a fundamental change in our approach to ending chronic homelessness by 2012. This work continued throughout 2004 and 2005. For our July Plenary Session, we hired Suzanne Wagner, a professional facilitator from the Center for Urban Community Services (CUCS) to conduct the meeting and chart our goals and objectives. This was of great help in completing Logic Models for all eight of our programs."

"Based on our Analysis of Unmet Need, we have adequate ES and TH beds, but we do not have adequate Permanent Housing or PSH. If we could divert the funds that we spend on the 93 chronic homeless persons in the Greater Stamford Area, we could free up a significant amount of funds spent in our shelters and use it to leverage more PH/PSH. That would allow us to "close the front door and open the back door." We are building both more PH and PSH so that we can move homeless persons out of ES and TH and into less expensive PH/PSH."

"Data: We want to use our HMIS and SSA HOPE funds to monitor and increase the speed at which chronically homeless persons apply for, receive and utilize mainstream resources. We want to do this system-wide. To achieve this we used HMIS funds to hire a full-time Systems Administrator (shared by Stamford, Norwalk and Bridgeport), a 0.6 FTE SSA HOPE Project Director (in Stamford) and two 0.3 FTE HOPE Associate Directors (in Norwalk and Bridgeport). They send each HUD-funded provider an "exception list" which highlights those persons new to the CoC system who have not yet applied for mainstream resources. We are also developing an "exception list" of persons who have been in the system 30, 60, and 90+ days or more and are not receiving entitlements and benefits. Once we have cleared confidentiality issues we hope to have the Care Coordination Committee review

progress on these "exception reports" twice each month. In a section below, we discuss the security and privacy issues with this plan."

"As a result of our Point-In-Time survey, we learned that only 1 of our chronically homeless unsheltered person received SSI or SSDI, and only 5 of our chronically homeless persons in Emergency Shelter were receiving SSI/SSDI and 41 in Transitional Housing were receiving those benefits. Since chronically homeless persons are, by definition, disabled, we need to concentrate our efforts on getting mainstream benefits beginning with SSI/SSDI and Medicaid."

"Emergency Prevention: The CoC in the Greater Stamford Area uses ESG funds, Stamford Housing Authority funds (and other non-HUD, non-CoC resources) to provide prevention programs including rent, mortgage and utility assistance, case management, landlord and mortgage-lender interventions and similar aid."

"System Prevention: The Continuum supports the St. Luke's LifeWorks-sponsored Jail Diversion Program. The CT Department of Mental Health and Addiction Services funds it (not HUD) , and it assists anyone who is homeless and mentally ill and is being released from jail, or is being arraigned or is being released from the Connecticut Valley Hospital, a state funded mental institution. The collaborators are St. Luke's LifeWorks and the F.S. Dubois Center, our state funded local mental health authority and Stamford Hospital. Homeless persons are guaranteed up to sixty days of housing (the goal is seven days) in the Jail Diversion Program and then into a placement in Permanent Housing, or if indicated, up to 24 months in TH and then Permanent Housing."

"Outreach: Our goal is to get chronically homeless persons off the streets and into housing immediately, and we are able to do this in less than one day in most cases. Although there is "no wrong door" to enter any Continuum member agency, most homeless persons enter the system through the Shelter for the Homeless (men) or the Emergency Shelters (single women and families) at St. Luke's LifeWorks or through St. Luke's LifeWorks' PATH Teams. SSA HOPE funds will provide us with two interns per semester that will conduct street outreach."

"Shorten Homelessness and Rapid Re-Housing: Our P-I-T survey found 93 persons who were chronically homeless. The Continuum is realigning resources to reduce the duration of each spell of homelessness, and prevent recurrence. In particular, the Continuum is using a "housing first" approach, particularly with Mutual Housing's 12 PSH units that came on line in 2004/2005 and the four new low-demand beds that just completed their Technical Submission and the new project ranked "First" this year. Both programs are committed to taking 100% chronically homeless persons directly off the street."

"Ensuring that homeless people have incomes to pay for housing: CTE, a former CoC member has rejoined and is now attending 100% of our meetings and worked on our ranking Committee. CTE will now provide pre-employment services to individuals who are living in supportive housing and struggling with multiple barriers to economic self-sufficiency. SSA Hope should dramatically increase the number of eligible persons receiving SSI/SSDI."

"(3) Coordination. If your CoC covers a jurisdiction that has developed, or is developing, a separate strategy to end chronic homelessness, please provide a narrative description of efforts made to ensure coordination between that strategy

and the overall CoC strategy, i.e. endorsement of that coordination by the applicable unit of government chief executive officer, etc."

"Stamford/Greenwich is proud to be listed as one of the "10-Year Plan communities" on the United States Interagency Council on Homelessness' website. We have met with the Mayor of Stamford Dannel P. Malloy and outlined our plan. Mr. John O'Brien, our ICH Regional Coordinator (Boston), accompanied us to the meeting with Mayor Malloy. Mr. O'Brien had also previously met with us (Nov. 19, 2003) to help us formulate our proposal. The Mayor made several suggestions that have been incorporated into our Plan. The revised plan will be discussed and voted on at the September 2005 Plenary and will be presented to the Mayor shortly thereafter. We will also present our "Plan to End Chronic Homelessness by 2012" to the First Selectman of the Town of Greenwich in the Fall of 2005."

"Our work with the Mayor has been successful because the City is an active participant in the CoC process. Sarah Pour, Department of Planning, and Ellen Bromley, Social Services Coordinator, City of Stamford, and Nancy Brown, Director of Planning in the Town of Greenwich are regular participants in the CoC. Their work with us ensures that the CoC is always consistent with the Consolidated Plan. This includes regular grants for the city's CDBG and HOME funds in support of our CoC Projects. Likewise, the Town of Greenwich supported us through CDBG over the past two years, and by inclusion in their Consolidated Plans and Action Plans. This year Stamford provided \$71,600 and Greenwich \$57,500 to CoC members."

"In addition, the City of Stamford and the Town of Greenwich are each developing a new Consolidated Plan 2005 through 2010. We have provided them with drafts of this Exhibit 1, and they have attended more than 80% of our Plenary meetings. The Consolidated Plan will reflect our Plan to End Chronic Homelessness by 2012, just as it now reflects our Needs Analysis. Both cities plan to continue to support the CoC with CDBG and HOME (Stamford only, Greenwich is not a participating jurisdiction) funds and in their Annual Action Plans."

The need for a Discharge Coordination Policy is considered critical by the Continuum. Currently, one program operated by St. Luke's (a Continuum member), the Jail Diversion Program, assists anyone who is homeless and mentally ill and is being released from jail, or is being arraigned or released from the Connecticut Valley Hospital, a state funded mental institution. The Continuum is also committed to utilizing the expanding new HMIS (Homelessness Management Information System) to offer a means of tracking those discharged or otherwise at risk (removal from a treatment program) of being homeless to assure that needed follow up is provided.

### **Emergency Shelter Grants (ESG)**

(States only) Describe the process for awarding grants to State recipients, and a description of how the allocation will be made available to units of local government.

3-5 Year Strategic Plan ESG response:

Not Applicable. the City of Stamford does not receive an ESG entitlement grant.

## COMMUNITY DEVELOPMENT

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### **Community Development (91.215 (e))**

\*Please also refer to the Community Development Table in the Needs.xls workbook

1. Identify the jurisdiction's priority non-housing community development needs eligible for assistance by CDBG eligibility category specified in the Community Development Needs Table (formerly Table 2B), – i.e., public facilities, public improvements, public services and economic development.
2. Describe the basis for assigning the priority given to each category of priority needs.
3. Identify any obstacles to meeting underserved needs.
4. Identify specific long-term and short-term community development objectives (including economic development activities that create jobs), developed in accordance with the statutory goals described in section 24 CFR 91.1 and the primary objective of the CDBG program to provide decent housing and a suitable living environment and expand economic opportunities, principally for low- and moderate-income persons.

NOTE: Each specific objective developed to address a priority need, must be identified by number and contain proposed accomplishments, the time period (i.e., one, two, three, or more years), and annual program year numeric goals the jurisdiction hopes to achieve in quantitative terms, or in other measurable terms as identified and defined by the jurisdiction.

3-5 Year Strategic Plan Community Development response:

The HUD concerns regarding non-housing community development needs, priorities and long term and short term objectives are summarized in a table format as Exhibit 5. Each table provides the strategy to be addressed, and corresponding community goals, obstacles, resources, and the number of products/outcomes hoped for. A priority is provided for each strategy, as well.

### **Antipoverty Strategy (91.215 (h))**

1. Describe the jurisdiction's goals, programs, and policies for reducing the number of poverty level families (as defined by the Office of Management and Budget and revised annually). In consultation with other appropriate public and private agencies, (i.e. TANF agency) state how the jurisdiction's goals, programs, and policies for producing and preserving affordable housing set forth in the housing component of the consolidated plan will be coordinated with other programs and services for which the jurisdiction is responsible.
2. Identify the extent to which this strategy will reduce (or assist in reducing) the number of poverty level families, taking into consideration factors over which the jurisdiction has control.

3-5 Year Strategic Plan Antipoverty Strategy response:

People and families in poverty, living in Stamford, face the following types of social and economic barriers:

Barriers	Opportunities Needed
Lack of education	GED, literacy training
Lack of child care	Child care, after-school programs
Substance abuse	Treatment
Lack of employable skills	Training
Mental disabilities	Counseling individually and in groups
Lack of health care	Health care access
Domestic violence	Legal assistance, emergency shelter, and advocacy
Family dysfunction	Counseling
Lack of skills	Training in finances and tenant/landlord responsibilities

Although Stamford is not perceived as a poor city, certain areas have a poverty rate as high as 30%. The number of individuals living in poverty increased to from 6.3% to 7.9% of the population. The number of families living in poverty increased from 3.9% to 5.4% of all families. Only two census tracts exceed a 20% poverty rate, the Central City has a rate of 21.5% and the South End has a 29.7% rate. One census tract had a significant drop in poverty: Waterside neighborhood, which had a poverty rate of 24.6% in 1990, had its rate reduced to 12%. This was primarily due to vacating most of the housing in Southfield Village in preparation of its demolition. Half of the apartments in Southfield Village had been demolished as of April 2000. Consequently, the 2000 Census figures show a substantial reduction in poverty in Waterside. The adjoining South End neighborhood in 1990 had a poverty rate of 16.2% which nearly doubled in the 1990's.

The City of Stamford had sufficient concentrations of poverty to apply for Federal Empowerment Zone or Enterprise Community designation. However, HUD did not select Stamford for funding. The City of Stamford has successfully worked with residents and businesses to obtain a state Enterprise Zone designation for the Waterside and South End neighborhoods. The designation provides incentives to firms to create jobs, housing, and support services in these neighborhoods.

The City encourages persons living at the poverty level to obtain a GED, literacy and job training programs offered by the Board of Education and local non-profit organizations.

The City will also support child care programs and after school programs. The Welfare and Health Departments and non-profit agencies will support programs that address substance abuse, mental illness, inadequate health care and domestic violence, often associated with poverty.

Homelessness often threatens households living at or below the poverty level in Stamford because of the high cost of housing. The City will continue to assist the development of affordable housing by the Stamford Housing Authority, non-profit organizations, and private housing developers. The Consolidated Plan emphasizes providing housing for extremely low income households. The Stamford Housing Authority is committed to furthering the economic independence of Section 8 tenants through the application of its own and leveraged resources. A new Housing Assistance Program will increase the level of participation and long-term success of

low-income residents in the Section 8 program by addressing typical barriers to engagement. Section 8 tenants will be helped in the purchase of their first home by participating in the SHA's homebuyer assistance program. Section 8 tenants are also a targeted group of Stamford's Job Ladder Welfare to Work program.

#### Community Goals To Eliminate Poverty:

The following community goals, if achieved, would eliminate poverty in Stamford's distressed neighborhoods.

1. Economic and employment opportunities to achieve and sustain full independence
2. Education and training programs designed to gain access to quality jobs

#### Strategies

The strategies described below will work to reduce the concentrated poverty in Stamford. These programs involve collaboration with other organizations and agencies.

- Supportive housing
- Maximizing use of Enterprise Zone designation
- Job training and microbusiness assistance
- Assist existing and developing micro-enterprises
- Literacy and English as a second language programs
- Youth programs.

### **Low Income Housing Tax Credit (LIHTC) Coordination (91.315 (k))**

1. (States only) Describe the strategy to coordinate the Low-income Housing Tax Credit (LIHTC) with the development of housing that is affordable to low- and moderate-income families.

#### 3-5 Year Strategic Plan LIHTC Coordination response:

The City of Stamford will support applications for developments that apply to the Connecticut Housing Finance Authority for the federal Low Income Housing Tax Credits. For projects that receive an allocation of HOME funds, such funds will be loaned at the applicable federal interest rate so that HOME financing will be consistent with the LIHTC regulations.

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### **Specific Special Needs Objectives (91.215)**

1. Describe the priorities and specific objectives the jurisdiction hopes to achieve over a specified time period.

2. Describe how Federal, State, and local public and private sector resources that are reasonably expected to be available will be used to address identified needs for the period covered by the strategic plan.

3-5 Year Non-homeless Special Needs Analysis response:

Non-homeless with special needs are summarized in the HUD required spreadsheet. The categories listed, however, are not mutually exclusive. The HUD spreadsheet lists those conditions which readily qualify individuals as special needs: elderly, frail elderly, persons with severe mental illness, developmentally disabled physically disabled, alcohol/other drug addicted, HIV/AIDS. The categories listed, however, are not mutually exclusive. For example, persons who are elderly may also have physical disabilities. Persons with HIV/AIDS may also suffer an addiction. The figures reported can best indicate that there are a total of some 22,600 manifestations of conditions that require supportive services. Similarly, people having housing problems manifest some 15,200 of these conditions. For those manifesting housing issues, the City has listed the units that we know are responsive to these issues. For those manifesting need for supportive services, the City presents the number of housing units (these offer supportive services), plus the number benefiting from supportive services offered through such agencies as the Food Bank, DMHAS, Domestic Violence program, etc. (Many of these supportive services are CDBG funded activities). There is a continued great need for services to this population, and the supply of supportive housing is inadequate. The provision of adequate permanent supportive housing is a cornerstone of Stamford's Continuum of Care's plan to end homelessness by 2010. The City supports development of such housing. The City places a high priority on supportive elderly housing, as the need for elderly housing is so great, and as many services for elderly are established (senior center activities, meals on wheels, health clinics) but places a 'medium' priority on housing for other subcategories of the non-homeless, as development proposals must first show commitment from other sources for continuing subsidy of supportive services.

### **Non-homeless Special Needs (91.205 (d) and 91.210 (d)) Analysis (including HOPWA)**

\*Please also refer to the Non-homeless Special Needs Table in the Needs.xls workbook.

1. Estimate, to the extent practicable, the number of persons in various subpopulations that are not homeless but may require housing or supportive services, including the elderly, frail elderly, persons with disabilities (mental, physical, developmental, persons with HIV/AIDS and their families), persons with alcohol or other drug addiction, and any other categories the jurisdiction may specify and describe their supportive housing needs. The jurisdiction can use the Non-Homeless Special Needs Table (formerly Table 1B) of their Consolidated Plan to help identify these needs.

\*Note: HOPWA recipients must identify the size and characteristics of the population with HIV/AIDS and their families that will be served in the metropolitan area.

2. Identify the priority housing and supportive service needs of persons who are not homeless but require supportive housing, i.e., elderly, frail elderly, persons with disabilities (mental, physical, developmental, persons with HIV/AIDS and their families), persons with alcohol or other drug addiction by using the Non-homeless Special Needs Table.

3. Describe the basis for assigning the priority given to each category of priority needs.
4. Identify any obstacles to meeting underserved needs.
5. To the extent information is available, describe the facilities and services that assist persons who are not homeless but require supportive housing, and programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing.
6. If the jurisdiction plans to use HOME or other tenant based rental assistance to assist one or more of these subpopulations, it must justify the need for such assistance in the plan.

3-5 Year Non-homeless Special Needs Analysis response:

1. Populations that are non homeless with special needs have been estimated on the relevant HUD worksheet: "Non Homeless Special Needs Table. The source of the data for the categories of severe mental illness, developmentally disabled (interpreted as difficulty in self care), and physical disability is the 2000 Census. Figures on those receiving supportive mental health services were based on respondent count to the DMHAS Consumer Satisfaction Survey of Fy 04. This data indicates that there is a critical need for services to the physically disabled, elderly/frail elderly, and mentally ill. Note, for the data derived from the Census, it is probable that these categories overlap. Clearly, the service strategy adopted for this group must assure that individuals who present a number of disabilities receive a comprehensive evaluation and treatment plan/support.

Priority housing and service needs for this group include specialized housing, transportation, and monitoring/case management to avoid the need for crisis care.

A significant portion of those requiring supportive services are over 65 - 27%. A first priority is the delivery of support services to elderly disabled, and repair and maintenance of housing facilities for elderly.

Mental illness is a significant contributing cause of disability in all age groups. A first priority is the provision/assistance in leveraging mental health services to all age groups of this vulnerable population.

Supportive housing for the functioning 16-65 year old disabled must be provided so that life goals can be achieved. HOME funds and CDBG funds can be used in combination with other construction sources and funded support programs to create housing that offers specialized support services for mentally ill, developmentally and physically disabled. As HOME or CDBG funds must be combined with other unknown sources (these will present themselves project by project) this is a second priority for funding.

## **Housing Opportunities for People with AIDS (HOPWA)**

\*Please also refer to the HOPWA Table in the Needs.xls workbook.

1. The Plan includes a description of the activities to be undertaken with its HOPWA

Program funds to address priority unmet housing needs for the eligible population. Activities will assist persons who are not homeless but require supportive housing, such as efforts to prevent low-income individuals and families from becoming homeless and may address the housing needs of persons who are homeless in order to help homeless persons make the transition to permanent housing and independent living. The plan would identify any obstacles to meeting underserved needs and summarize the priorities and specific objectives, describing how funds made available will be used to address identified needs.

2. The Plan must establish annual HOPWA output goals for the planned number of households to be assisted during the year in: (1) short-term rent, mortgage and utility payments to avoid homelessness; (2) rental assistance programs; and (3) in housing facilities, such as community residences and SRO dwellings, where funds are used to develop and/or operate these facilities. The plan can also describe the special features or needs being addressed, such as support for persons who are homeless or chronically homeless. These outputs are to be used in connection with an assessment of client outcomes for achieving housing stability, reduced risks of homelessness and improved access to care.
3. For housing facility projects being developed, a target date for the completion of each development activity must be included and information on the continued use of these units for the eligible population based on their stewardship requirements (e.g. within the ten-year use periods for projects involving acquisition, new construction or substantial rehabilitation).
4. The Plan includes an explanation of how the funds will be allocated including a description of the geographic area in which assistance will be directed and the rationale for these geographic allocations and priorities. Include the name of each project sponsor, the zip code for the primary area(s) of planned activities, amounts committed to that sponsor, and whether the sponsor is a faith-based and/or grassroots organization.
5. The Plan describes the role of the lead jurisdiction in the eligible metropolitan statistical area (EMSA), involving (a) consultation to develop a metropolitan-wide strategy for addressing the needs of persons with HIV/AIDS and their families living throughout the EMSA with the other jurisdictions within the EMSA; (b) the standards and procedures to be used to monitor HOPWA Program activities in order to ensure compliance by project sponsors of the requirements of the program.
6. The Plan includes the certifications relevant to the HOPWA Program.

3-5 Year Strategic Plan HOPWA response:

The city of Stamford does not receive entitlement HOPWA funds. We will support applications for housing providers for discretionary funds, including, for example, funding for McKinney house, a local residence.

## **Specific HOPWA Objectives**

1. Describe how Federal, State, and local public and private sector resources that are reasonably expected to be available will be used to address identified needs for the period covered by the strategic plan.

3-5 Year Specific HOPWA Objectives response:

**OTHER NARRATIVE**

Include any Strategic Plan information that was not covered by a narrative in any other section.



# CPMP Non-State Grantee Certifications

Many elements of this document may be completed electronically, however a signature must be manually applied and the document must be submitted in paper form to the Field Office.

- This certification does not apply.  
 This certification is applicable.

## NON-STATE GOVERNMENT CERTIFICATIONS

In accordance with the applicable statutes and the regulations governing the consolidated plan regulations, the jurisdiction certifies that:

**Affirmatively Further Fair Housing** -- The jurisdiction will affirmatively further fair housing, which means it will conduct an analysis of impediments to fair housing choice within the jurisdiction, take appropriate actions to overcome the effects of any impediments identified through that analysis, and maintain records reflecting that analysis and actions in this regard.

**Anti-displacement and Relocation Plan** -- It will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended, and implementing regulations at 49 CFR 24; and it has in effect and is following a residential antidisplacement and relocation assistance plan required under section 104(d) of the Housing and Community Development Act of 1974, as amended, in connection with any activity assisted with funding under the CDBG or HOME programs.

**Drug Free Workplace** -- It will or will continue to provide a drug-free workplace by:

1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
2. Establishing an ongoing drug-free awareness program to inform employees about --
  - a. The dangers of drug abuse in the workplace;
  - b. The grantee's policy of maintaining a drug-free workplace;
  - c. Any available drug counseling, rehabilitation, and employee assistance programs; and
  - d. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph 1;
4. Notifying the employee in the statement required by paragraph 1 that, as a condition of employment under the grant, the employee will --
  - a. Abide by the terms of the statement; and
  - b. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 4(b) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 4(b), with respect to any employee who is so convicted --
  - a. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
  - b. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1, 2, 3, 4, 5 and 6.

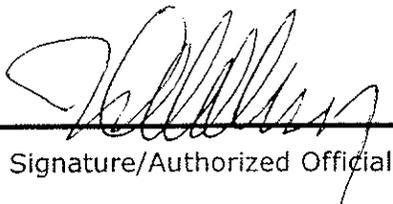
**Anti-Lobbying** -- To the best of the jurisdiction's knowledge and belief:

8. No Federal appropriated funds have been paid or will be paid, by or on behalf of it, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;
9. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, it will complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and
10. It will require that the language of paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

**Authority of Jurisdiction** -- The consolidated plan is authorized under State and local law (as applicable) and the jurisdiction possesses the legal authority to carry out the programs for which it is seeking funding, in accordance with applicable HUD regulations.

**Consistency with plan** -- The housing activities to be undertaken with CDBG, HOME, ESG, and HOPWA funds are consistent with the strategic plan.

**Section 3** -- It will comply with section 3 of the Housing and Urban Development Act of 1968, and implementing regulations at 24 CFR Part 135.



---

Signature/Authorized Official

8/2/05

Date

Dannel P. Malloy

Name

Mayor

Title

888 Washington Blvd., P.O. Box 10152

Address

Stamford, CT 06904- 2152

City/State/Zip

(203) 977-4150

Telephone Number

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/>            | <b>This certification does not apply.</b> |
| <input checked="" type="checkbox"/> | <b>This certification is applicable.</b>  |

### Specific CDBG Certifications

The Entitlement Community certifies that:

**Citizen Participation** -- It is in full compliance and following a detailed citizen participation plan that satisfies the requirements of 24 CFR 91.105.

**Community Development Plan** -- Its consolidated housing and community development plan identifies community development and housing needs and specifies both short-term and long-term community development objectives that provide decent housing, expand economic opportunities primarily for persons of low and moderate income. (See CFR 24 570.2 and CFR 24 part 570)

**Following a Plan** -- It is following a current consolidated plan (or Comprehensive Housing Affordability Strategy) that has been approved by HUD.

**Use of Funds** -- It has complied with the following criteria:

11. Maximum Feasible Priority - With respect to activities expected to be assisted with CDBG funds, it certifies that it has developed its Action Plan so as to give maximum feasible priority to activities which benefit low and moderate income families or aid in the prevention or elimination of slums or blight. The Action Plan may also include activities which the grantee certifies are designed to meet other community development needs having a particular urgency because existing conditions pose a serious and immediate threat to the health or welfare of the community, and other financial resources are not available);
12. Overall Benefit - The aggregate use of CDBG funds including section 108 guaranteed loans during program year(s) 2005, 2\_\_\_\_, 2\_\_\_\_, (a period specified by the grantee consisting of one, two, or three specific consecutive program years), shall principally benefit persons of low and moderate income in a manner that ensures that at least 70 percent of the amount is expended for activities that benefit such persons during the designated period;
13. Special Assessments - It will not attempt to recover any capital costs of public improvements assisted with CDBG funds including Section 108 loan guaranteed funds by assessing any amount against properties owned and occupied by persons of low and moderate income, including any fee charged or assessment made as a condition of obtaining access to such public improvements.

However, if CDBG funds are used to pay the proportion of a fee or assessment that relates to the capital costs of public improvements (assisted in part with CDBG funds) financed from other revenue sources, an assessment or charge may be made against the property with respect to the public improvements financed by a source other than CDBG funds.

The jurisdiction will not attempt to recover any capital costs of public improvements assisted with CDBG funds, including Section 108, unless CDBG funds are used to pay the proportion of fee or assessment attributable to the capital costs of public improvements financed from other revenue sources. In this case, an assessment or charge may be made against the property with respect to the public improvements financed by a source other than CDBG funds. Also, in the case of properties owned and occupied by moderate-income (not low-income) families, an assessment or charge may be made against the property for public improvements financed by a source other than CDBG funds if the jurisdiction certifies that it lacks CDBG funds to cover the assessment.

**Excessive Force** -- It has adopted and is enforcing:

14. A policy prohibiting the use of excessive force by law enforcement agencies within its jurisdiction against any individuals engaged in non-violent civil rights demonstrations; and
15. A policy of enforcing applicable State and local laws against physically barring entrance to or exit from a facility or location which is the subject of such non-violent civil rights demonstrations within its jurisdiction;

**Compliance With Anti-discrimination laws** -- The grant will be conducted and administered in conformity with title VI of the Civil Rights Act of 1964 (42 USC 2000d), the Fair Housing Act (42 USC 3601-3619), and implementing regulations.

**Lead-Based Paint** -- Its activities concerning lead-based paint will comply with the requirements of part 35, subparts A, B, J, K and R, of title 24;

**Compliance with Laws** -- It will comply with applicable laws.



8/2/2005

Signature/Authorized Official

Date

Dannel P. Malloy

Name

Mayor

Title

888 Washington Boulevard

Address

Stamford, CT 06904

City/State/Zip

(203) 977-4150

Telephone Number

- This certification does not apply.  
 This certification is applicable.

**OPTIONAL CERTIFICATION  
CDBG**

Submit the following certification only when one or more of the activities in the action plan are designed to meet other community development needs having a particular urgency as specified in 24 CFR 570.208(c):

The grantee hereby certifies that the Annual Plan includes one or more specifically identified CDBG-assisted activities, which are designed to meet other community development needs having a particular urgency because existing conditions pose a serious and immediate threat to the health or welfare of the community and other financial resources are not available to meet such needs.

---

Signature/Authorized Official

Date

Name

Title

Address

City/State/Zip

Telephone Number

<input type="checkbox"/> This certification does not apply.
<input checked="" type="checkbox"/> This certification is applicable.

### Specific HOME Certifications

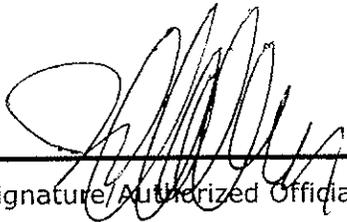
The HOME participating jurisdiction certifies that:

**Tenant Based Rental Assistance** -- If the participating jurisdiction intends to provide tenant-based rental assistance:

The use of HOME funds for tenant-based rental assistance is an essential element of the participating jurisdiction's consolidated plan for expanding the supply, affordability, and availability of decent, safe, sanitary, and affordable housing.

**Eligible Activities and Costs** -- it is using and will use HOME funds for eligible activities and costs, as described in 24 CFR § 92.205 through 92.209 and that it is not using and will not use HOME funds for prohibited activities, as described in § 92.214.

**Appropriate Financial Assistance** -- before committing any funds to a project, it will evaluate the project in accordance with the guidelines that it adopts for this purpose and will not invest any more HOME funds in combination with other Federal assistance than is necessary to provide affordable housing;



Signature/Authorized Official

8/2/05

Date

Dannel P. Malloy

Name

Mayor

Title

888 Washington Blvd., P.O. Box 10152

Address

Stamford, CT 06904-2152

City/State/Zip

(203) 977-4150

Telephone Number

<input checked="" type="checkbox"/> This certification does not apply.
<input type="checkbox"/> This certification is applicable.

### HOPWA Certifications

The HOPWA grantee certifies that:

**Activities** -- Activities funded under the program will meet urgent needs that are not being met by available public and private sources.

**Building** -- Any building or structure assisted under that program shall be operated for the purpose specified in the plan:

1. For at least 10 years in the case of assistance involving new construction, substantial rehabilitation, or acquisition of a facility,
2. For at least 3 years in the case of assistance involving non-substantial rehabilitation or repair of a building or structure.

---

Signature/Authorized Official

Date

Name

Title

Address

City/State/Zip

Telephone Number

- This certification does not apply.  
 This certification is applicable.

### ESG Certifications

I, \_\_\_\_\_, Chief Executive Officer of **Error! Not a valid link.**, certify that the local government will ensure the provision of the matching supplemental funds required by the regulation at 24 *CFR* 576.51. I have attached to this certification a description of the sources and amounts of such supplemental funds.

I further certify that the local government will comply with:

1. The requirements of 24 *CFR* 576.53 concerning the continued use of buildings for which Emergency Shelter Grants are used for rehabilitation or conversion of buildings for use as emergency shelters for the homeless; or when funds are used solely for operating costs or essential services.
2. The building standards requirement of 24 *CFR* 576.55.
3. The requirements of 24 *CFR* 576.56, concerning assurances on services and other assistance to the homeless.
4. The requirements of 24 *CFR* 576.57, other appropriate provisions of 24 *CFR* Part 576, and other applicable federal laws concerning nondiscrimination and equal opportunity.
5. The requirements of 24 *CFR* 576.59(b) concerning the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.
6. The requirement of 24 *CFR* 576.59 concerning minimizing the displacement of persons as a result of a project assisted with these funds.
7. The requirements of 24 *CFR* Part 24 concerning the Drug Free Workplace Act of 1988.
8. The requirements of 24 *CFR* 576.56(a) and 576.65(b) that grantees develop and implement procedures to ensure the confidentiality of records pertaining to any individual provided family violence prevention or treatment services under any project assisted with ESG funds and that the address or location of any family violence shelter project will not be made public, except with written authorization of the person or persons responsible for the operation of such shelter.
9. The requirement that recipients involve themselves, to the maximum extent practicable and where appropriate, homeless individuals and families in policymaking, renovating, maintaining, and operating facilities assisted under the ESG program, and in providing services for occupants of these facilities as provided by 24 *CFR* 76.56.
10. The requirements of 24 *CFR* 576.57(e) dealing with the provisions of, and regulations and procedures applicable with respect to the environmental review responsibilities under the National Environmental Policy Act of 1969 and related

authorities as specified in 24 *CFR* Part 58.

11. The requirements of 24 *CFR* 576.21(a)(4) providing that the funding of homeless prevention activities for families that have received eviction notices or notices of termination of utility services will meet the requirements that: (A) the inability of the family to make the required payments must be the result of a sudden reduction in income; (B) the assistance must be necessary to avoid eviction of the family or termination of the services to the family; (C) there must be a reasonable prospect that the family will be able to resume payments within a reasonable period of time; and (D) the assistance must not supplant funding for preexisting homeless prevention activities from any other source.
12. The new requirement of the McKinney-Vento Act (42 *USC* 11362) to develop and implement, to the maximum extent practicable and where appropriate, policies and protocols for the discharge of persons from publicly funded institutions or systems of care (such as health care facilities, foster care or other youth facilities, or correction programs and institutions) in order to prevent such discharge from immediately resulting in homelessness for such persons. I further understand that state and local governments are primarily responsible for the care of these individuals, and that ESG funds are not to be used to assist such persons in place of state and local resources.
13. HUD's standards for participation in a local Homeless Management Information System (HMIS) and the collection and reporting of client-level information.

I further certify that the submission of a completed and approved Consolidated Plan with its certifications, which act as the application for an Emergency Shelter Grant, is authorized under state and/or local law, and that the local government possesses legal authority to carry out grant activities in accordance with the applicable laws and regulations of the U. S. Department of Housing and Urban Development.

---

Signature/Authorized Official

Date

Name

Title

Address

City/State/Zip

Telephone Number

<input type="checkbox"/> This certification does not apply.
<input checked="" type="checkbox"/> This certification is applicable.

**APPENDIX TO CERTIFICATIONS**

Instructions Concerning Lobbying and Drug-Free Workplace Requirements

**Lobbying Certification**

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

**Drug-Free Workplace Certification**

1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification.
2. The certification is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, HUD, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
3. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
4. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio stations).
5. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph three).
6. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant: Place of Performance (Street address, city, county, state, zip code) Check if there are workplaces on file that are not identified here. The certification with regard to the drug-free workplace is required by 24 CFR part 21.

Place Name	Street	City	County	State	Zip
City of Stamford City Hall	888 Washington Blvd.	Stamford	Fairfield	CT	06901

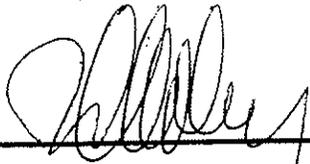
7. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules: "Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15); "Conviction" means a finding of guilt (including a plea of *nolo contendere*) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes; "Criminal drug statute" means a Federal or non-Federal

criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance; "Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including:

- All "direct charge" employees;
- all "indirect charge" employees unless their impact or involvement is insignificant to the performance of the grant; and
- a. temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

Note that by signing these certifications, certain documents must be completed, in use, and on file for verification. These documents include:

1. Analysis of Impediments to Fair Housing
2. Citizen Participation Plan
3. Anti-displacement and Relocation Plan



Signature/Authorized Official

8/2/05

Date

Dannel P. Malloy

Name

Mayor

Title

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Address

Stamford, CT 06904-2152

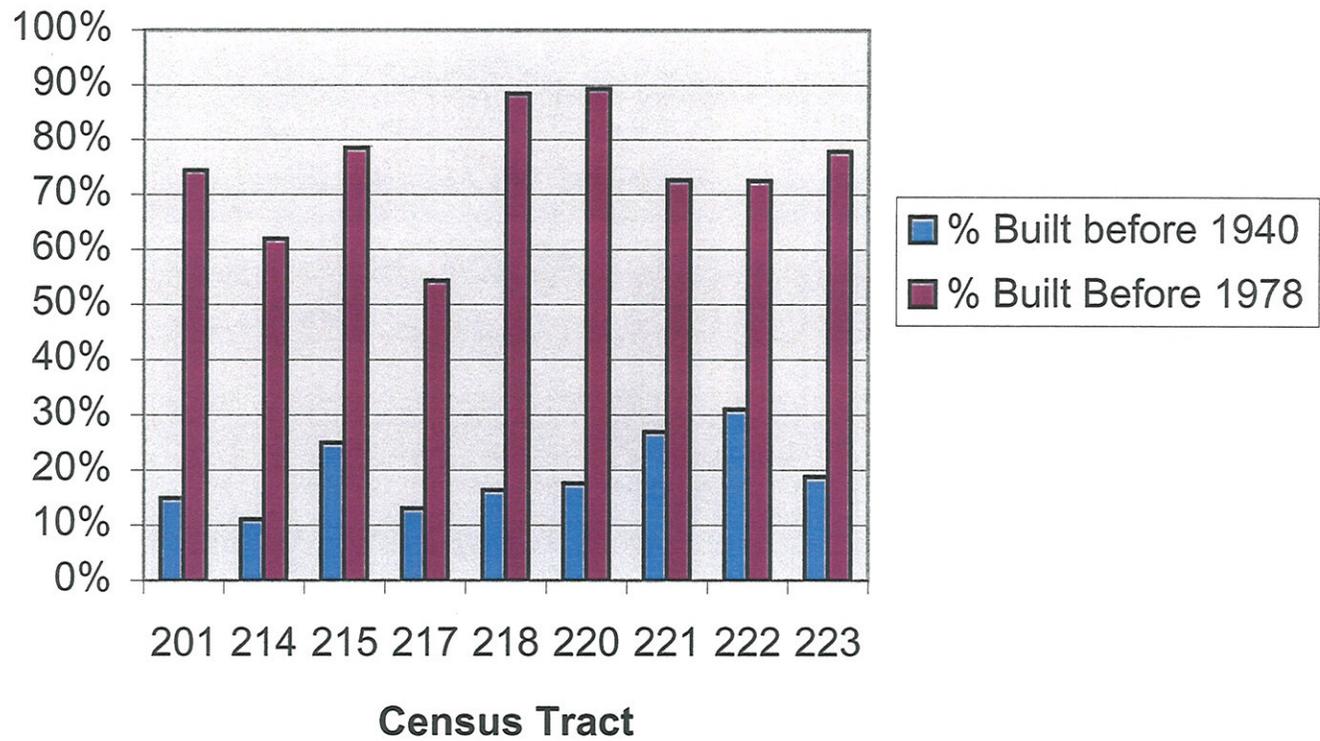
City/State/Zip

(203) 977-4150

Telephone Number

## IV. Housing Chart and Maps

### Age of Housing and Probable Lead Presence



SOCDS CHAS Data: Housing Problems Output Summary  
(% Table)

MFI	Overall		Hispanic		Black		Asian		White	
	Renter	Owner	Renter	Owner	Renter	Owner	Renter	Owner	Renter	Owner
<30%							86.7%	77.3%		
Elderly	53.4%	88.4%	37.0%	100.0%	43.3%	75.2%	N/A	N/A	59.6%	88.4%
Family	83.8%	88.6%	92.5%	94.8%	84.9%	100.0%	N/A	N/A	68.5%	87.3%
Other HH	77.4%	98.4%	85.2%	100.0%	68.1%	100.0%	N/A	N/A	77.1%	91.9%
>30-<50%							94.9%	92.2%		
Elderly	70.9%	52.8%	54.5%	71.4%	40.0%	72.0%	N/A	N/A	82.6%	50.2%
Family	66.9%	80.5%	81.0%	95.2%	58.5%	77.9%	N/A	N/A	83.7%	80.8%
Other HH	74.3%	78.6%	77.6%	N/A	71.3%	61.5%	N/A	N/A	78.8%	79.6%
>50-<80%							100.0%	65.5%		
Elderly	56.3%	21.7%	N/A	0.0%	0.0%	100.0%	N/A	N/A	62.8%	22.7%
Family	43.8%	65.0%	66.1%	89.1%	36.0%	71.1%	N/A	N/A	52.1%	55.9%
Other HH	62.4%	62.2%	63.0%	N/A	38.9%	0.0%	N/A	N/A	67.1%	79.2%

\* For "Family overall figures, smaller percentage was used - small family or large family - from the CHAS/needs worksheet data

**Eligibility for Area Benefit Under CDBG  
Stamford, CT  
2000 Census Data**

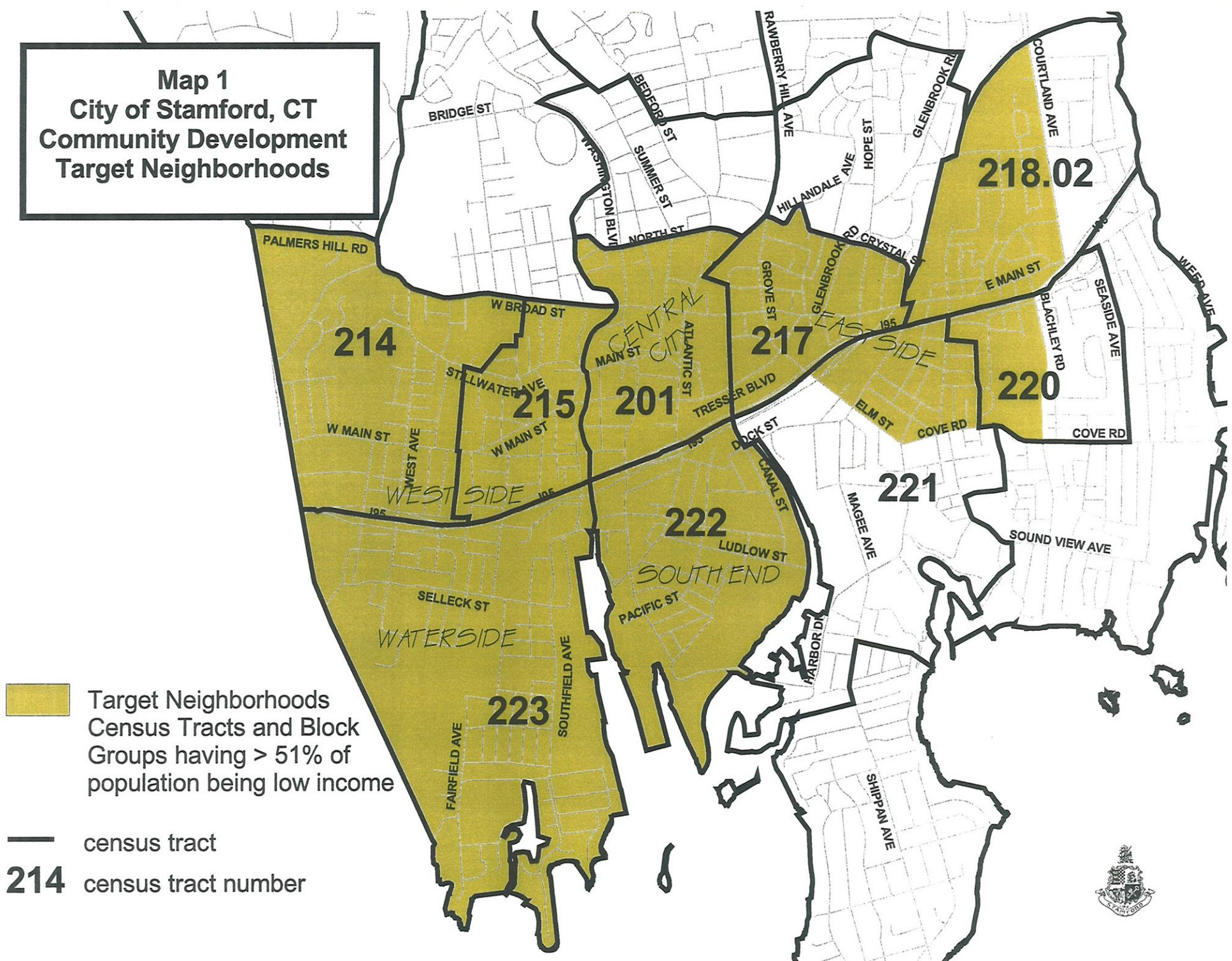
**Section 570.208(a)(1)(i): Areas with 51% or more Low income persons:**

<b>Tract #</b>	<b>Block #</b>	<b>Percent Low</b>
201	Residential Portions	65.11
214	All	65.17
215	All	70.94
217	All	51.25
218-02	2	56.5
218-02	3	64.1
220	2	73.7
221	1	61.1
222	All	76.46
223	All	54.46

Note: Using 570.208(a)(1)(ii) all Top Quartile L/M Tracts and BG's are already in excess of 51%

Source: HUD Website Data from U.S. Census 2000

**Map 1**  
**City of Stamford, CT**  
**Community Development**  
**Target Neighborhoods**



 Target Neighborhoods  
 Census Tracts and Block  
 Groups having > 51% of  
 population being low income

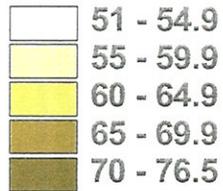
 census tract

**214** census tract number



**Map 2**  
**Areas with 51% or more**  
**low income persons**  
**City of Stamford, CT**

**Percent Low Income**

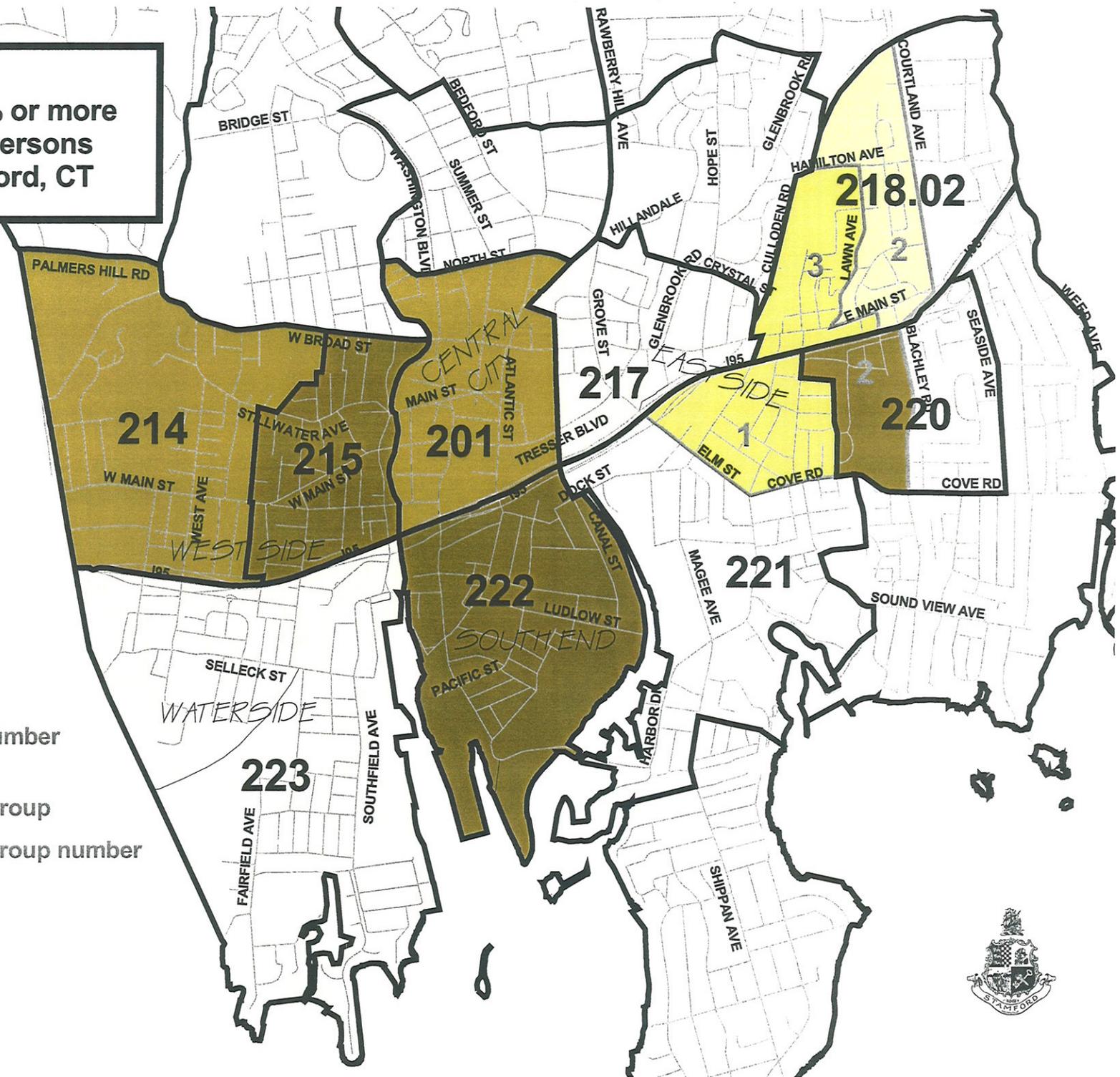


 census tract

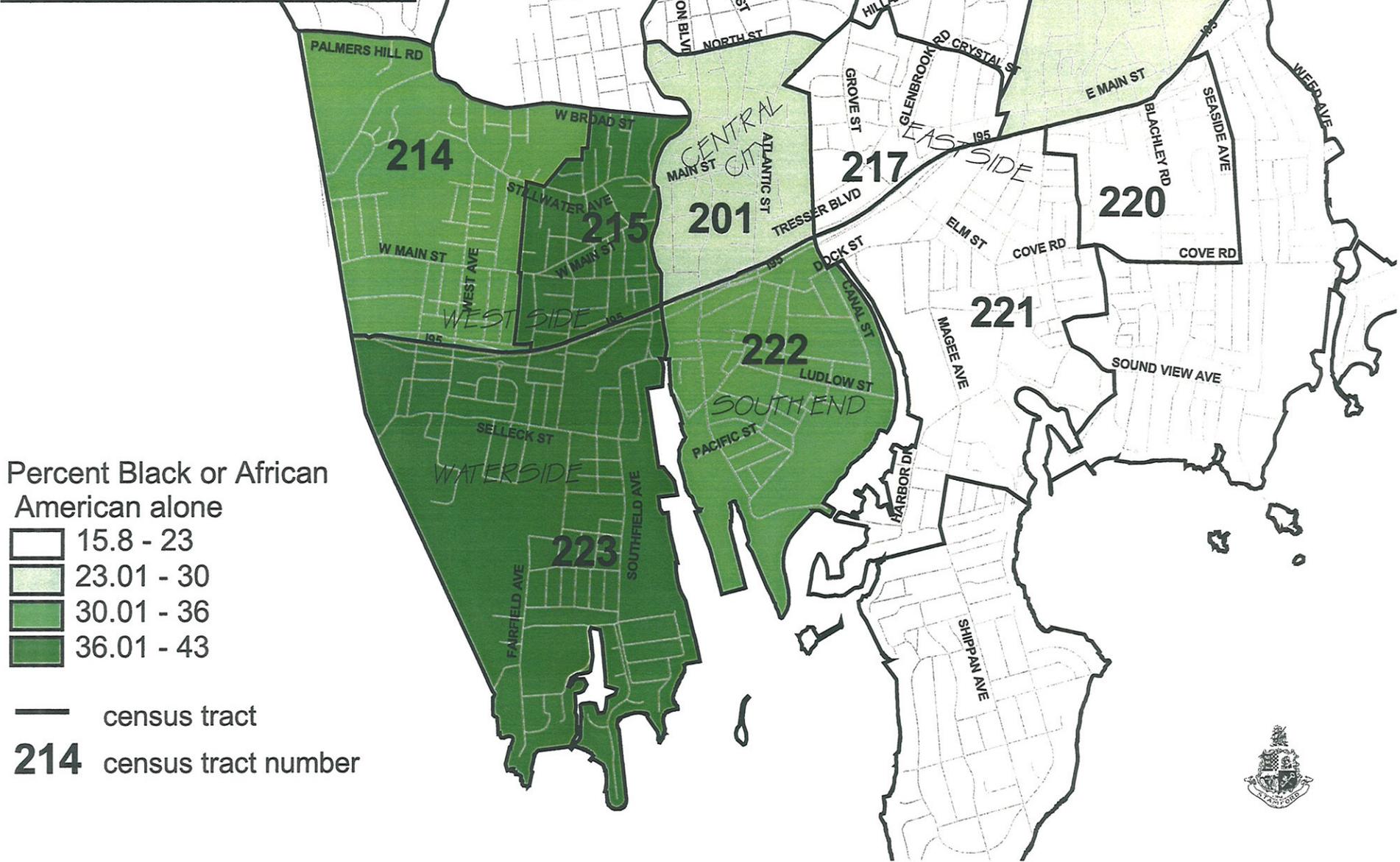
**214** census tract number

 census block group

**1** census block group number



**Map 3**  
**Percent Black or African American alone**  
**City of Stamford, CT**



Percent Black or African American alone

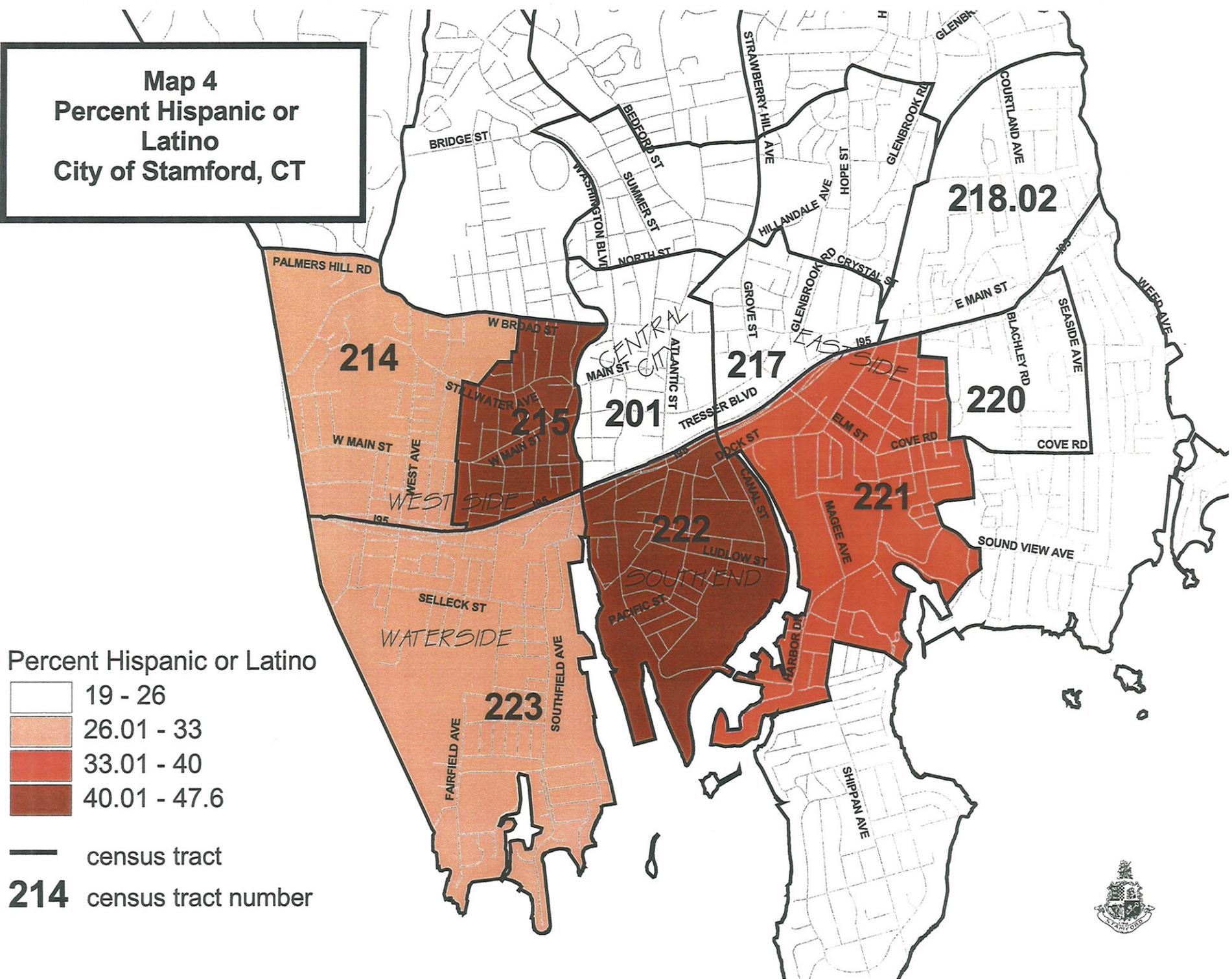
- 15.8 - 23
- 23.01 - 30
- 30.01 - 36
- 36.01 - 43

— census tract

**214** census tract number



**Map 4**  
**Percent Hispanic or Latino**  
**City of Stamford, CT**



Percent Hispanic or Latino

- 19 - 26
- 26.01 - 33
- 33.01 - 40
- 40.01 - 47.6

— census tract

**214** census tract number



## V. Exhibits

EXHIBIT 1  
Affordable Housing Task Force

Dear Friend:

Housing is vital to making our City work. Despite tremendous strides in creating new housing, ongoing demand continues to exceed supply. While finding housing is a challenge for house-hunters at all income levels, it has become particularly difficult for low- and moderate- income families and individuals to find homes in Stamford they can afford.

Six months ago I formed a Task Force to help me find a way to expand affordable housing opportunities. Chaired by Tom Cassone, assisted by City staff, a national housing expert and our master plan consultants, the Task Force assessed local conditions, explored options, and endorsed, in draft form, workable strategies to assist affordable housing in Stamford.

Prior to finalizing the strategy, we are asking you to join other civic, government, business, labor and elected leaders at a working summit to review and refine the draft, and help set the agenda for implementation.

I hope you can come.



**Task Force Members:**

Ross Burkhardt, New Neighborhoods, Inc.  
Bill Callion, Chair, Board of Finance  
Linda Canady, Board of Representatives  
Reverend James Carter, Council of Churches and Synagogues  
Joan Carty, Housing Development Fund  
Msgr. Stephen Digiovanni, St. John's Catholic Church  
Carmen Domonkos, President, Board of Representatives  
Clayton Fowler, Spinnaker Company  
Richard Fox, Executive Director, Stamford Housing Authority  
Sandy Goldstein, Downtown Special Services District  
Skdie Green-Carter, Board of Representatives  
Jackie Heftman, Zoning Board  
Duane Hill, Planning Board  
Reverend Winton Hill, New Neighborhoods, Inc., Bethel A.M.E.  
Ellen Isidro, Pacific House  
Larry Kluetsch, Mutual Housing Association  
Ralph Loomis, Stamford Partnership  
John McClutchy, JHM Financial  
Joe McGee, SACIA  
Phil McKain, CTE  
Elaine Mitchell, Board of Representatives  
Courtney Nelthropp, Stamford Housing Authority  
Steve Osman, Urban Redevelopment Commission  
Melvina Peters, Renaissance Co-ops  
Brad Perkins, Perkins-Eastman Architects  
Rick Redniss, Redniss & Mead  
Elisabeth B. Rosenbaum, Urban Initiatives  
Rev. Richard Schuster, St. Luke's Lifeworks  
Madison Smith, Neighborhood Housing Services  
John Stamm, AFL-CIO  
Trenda Thompson, Southfield Village Residents' Council  
Vin Tufo, Stamford Housing Authority  
Steve Woodward, Pitney Bowes

**City Staff:**

Tom Cassone, Special Assistant to the Mayor  
Robin Stein, Land Use Bureau Chief  
Ellen Bromley, Social Services Commission Coordinator  
Tim Beeble, Director, Stamford Community Development  
Sarah Pour, Stamford Community Development  
Steve MacKenzie, Director, Stamford Economic Development  
Norman Cole, Zoning Board Officer

## Human Services Planning Council of Stamford

The mission of the Human Services Planning Council of Stamford is to bring together representatives from Stamford's diverse community, in order to periodically assess and identify unmet and underserved human service needs and to work in a collaborative manner and creative fashion to help ensure that services are in place to address those needs.

The Council is a collaboration of many different entities in Stamford with leadership from the City of Stamford and the United Way of Stamford.

### **Human Services Council Membership**

Dr. Karen Arms	Director, Institute for Children Youth and Families, University of Connecticut
Evelyn Balamaci	Social Service Operations Manager, Connecticut Department of Social Services
Ben Barnes	Director of Administration, City of Stamford
Ellen Bromley	Social Services Coordinator, City of Stamford
Karen Brown	Program Director, Fairfield County Community Foundation
William Callion	Director of Public Health, Safety and Welfare, City of Stamford
Imelda D-Luc	Head Start Director, Childcare Learning Centers
Beth Erickson	Lieutenant, Stamford Police Department
Ellen Isidro	President and CEO, United Way of Stamford
Debra Katz	Project Director, Department of Health and Social Services, City of Stamford
Cathleen Leather	Interim VP, Community Impact, United Way of Stamford
Dr. Johnnie Lee	Director of Health and Social Services and Medical Advisor, City of Stamford
Eileen Lopez-Cardone	Regional Director, 211 Infoline
Dannel P. Malloy	Mayor, City of Stamford
E. Phillip McKain	President and CEO, CTE, Inc
Lisa Mercurio	Director, Fairfield County Information Exchange, SACIA
Jane Norgren	Executive Director, Childcare Learning Centers
Carmella Piacentini	Consultant, Contributions and Community Relations, Olin Corporation
Roberta Ratcliff	Executive Director, Senior Services of Stamford
Ann Sadowsky	Administrator, Scofield Manor
Rev. Richard L. Schuster	Executive Director, St. Luke's LifeWorks
Barbara Seiter	Vice President, Stamford Chamber of Commerce
Charles Shepherd	President and CEO, Director, Urban League of Southwest CT
Sandra Siegartel	Stamford Community Development Office, Grants Technician, City of Stamford
Dr. Judith Singer	Director of Research, Stamford Board of Education
Dr. Edward Spauster	President and CEO, LMG Programs
Kathleen Walsh	President, Stamford Partnership
Phyllis Weinstein	Executive Director, Stamford Red Cross
Beryl Williams	School Family Resource Facilitator, Stamford Public Schools
Mary Willis	Director of the Mayor's Youth Services Bureau, City of Stamford

**Exhibit 3: Continuum of Care**

Special Needs or Subpopulation Group	Geographic Area Represented	Subpopulation Represented	Level of Participation, Activity and Leadership in Planning Process
Connecticut Department of Social Services	Stamford, Greenwich		Attends 75% CoC plenary meetings; Homeless Census Participant; Assists with entitlements. Attends CCC
F.S. DuBois Center of the Department of	Stamford, Greenwich	SMI	Member Gaps/Needs Committee attends 80% group & plenary meetings; Homeless Census participant
Stamford Community Development Office	Stamford		Attends 100% of CoC plenary meetings & AHAC planning meetings
Stamford Health & Soc. Services	Stamford		Attends 100% CoC planning meetings; Member of AHAC attends 100%
CTE, Inc.	Stamford, Greenwich	Y, Vets	Attends 80% CoC plenary meetings; Member of CCC attends 90% of
Family Centers	Stamford, Greenwich		Member of CCC attends most meetings; Service Provider; Homeless
Laurel House	Stamford, Greenwich	SMI	Member of CoC attends 100% planning meetings; member of CCC
Mental Health Association of Connecticut	Stamford, Greenwich	SMI	Attends 90% CCC Member of Ranking Committee attends 100% of group & planning meetings; Member of CCC attends 100% meetings;
Pathways	Stamford, Greenwich	SMI	Member CoC attends 100% planning meetings; Member CCC attends
Person to Person	Stamford, Greenwich		Attends 80% AHAC
Shelter for the Homeless	Stamford, Greenwich		Chairs HOPE, Attends 90% CCC meetings, Chair Gaps/Needs Committee, Member Writing Committee attends 100% of group & planning meetings; Homeless Census Lead Agency; Member CCC attends 100% meetings; Service Provider, Chairs Regional HMIS, attends 90% State HMIS.
St. Luke's Community Services, Inc.	Stamford, Greenwich		Ex. Dir. CoC Steering Committee Chair attends 100% planning meetings, Member of CT Blueprint & Reaching Home attends 100% of planning meetings; Member AHAC attends 100% meetings; Member Gaps/Needs & Writing Comm. attends 100% CoC group & planning meetings; Service Provider; Homeless Census Participant
Line Associates, Inc.	Stamford, Greenwich		Consultant. Attends 90% of Plenary Meetings.
Housing Authority of the City of Stamford	City of Stamford		AHAC Pipeline Committee chair attends 100% meetings; Develops
New Neighborhood Housing	Stamford, Greenwich		Member AHAC attends 100% meetings; Develops Affordable Housing
Neighborhood Housing Services	Stamford, Greenwich		Applicant for CoFC funding; Service Provider; Active on CoFC, Writing, Leveraging, Human Service
Mutual Housing Association of SW CT	Stamford		CoC member attends 100% planning meetings; Partner in '04 new
Melville Foundation	Stamford		Attends CCEH meetings
NOTE: All of the agencies listed under 'Non'			
Connecticut Legal Services	Stamford, Greenwich		Attends all HOPE Meetings
Stamford Health Systems	Stamford, Greenwich	HIV/AIDS	Attends all HOPE Meetings
Veteran's Administration Hospital	Stamford, Greenwich	V	Service Provider
St. Luke's Client #1	Stamford, Greenwich	Recovering	Resident Advisory Group; Planning group participant; Focus group
St. Luke's Client #2	Stamford, Greenwich	Recovering	Planning group participant; Focus group participant
St. Luke's Client #3	Stamford, Greenwich	Recovering	Resident Advisory Group; Planning group participant; Focus group
Shelter for the Homeless Client #1	Stamford, Greenwich	Recovering SMI	Resident Advisory Group; Planning group participant; Focus group participant
Shelter for the Homeless Client #2	Stamford, Greenwich	Recovering SMI	Resident Advisory Group; Planning group participant; Focus group participant
Shelter for the Homeless Client #3	Stamford, Greenwich	Recovering SA	Resident Advisory Group; Planning group participant; Focus group participant
United Way of Stamford and Greenwich	City of Stamford, City		Member Steering & Rankings Committees attends 100% group &

\*Subpopulations Key: Seriously

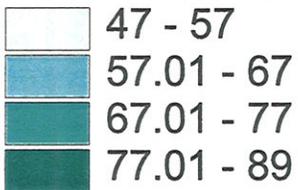
*Exhibit 5: Response to Community Development, Items 1-4*

**NON-HOUSING COMMUNITY DEVELOPMENT**

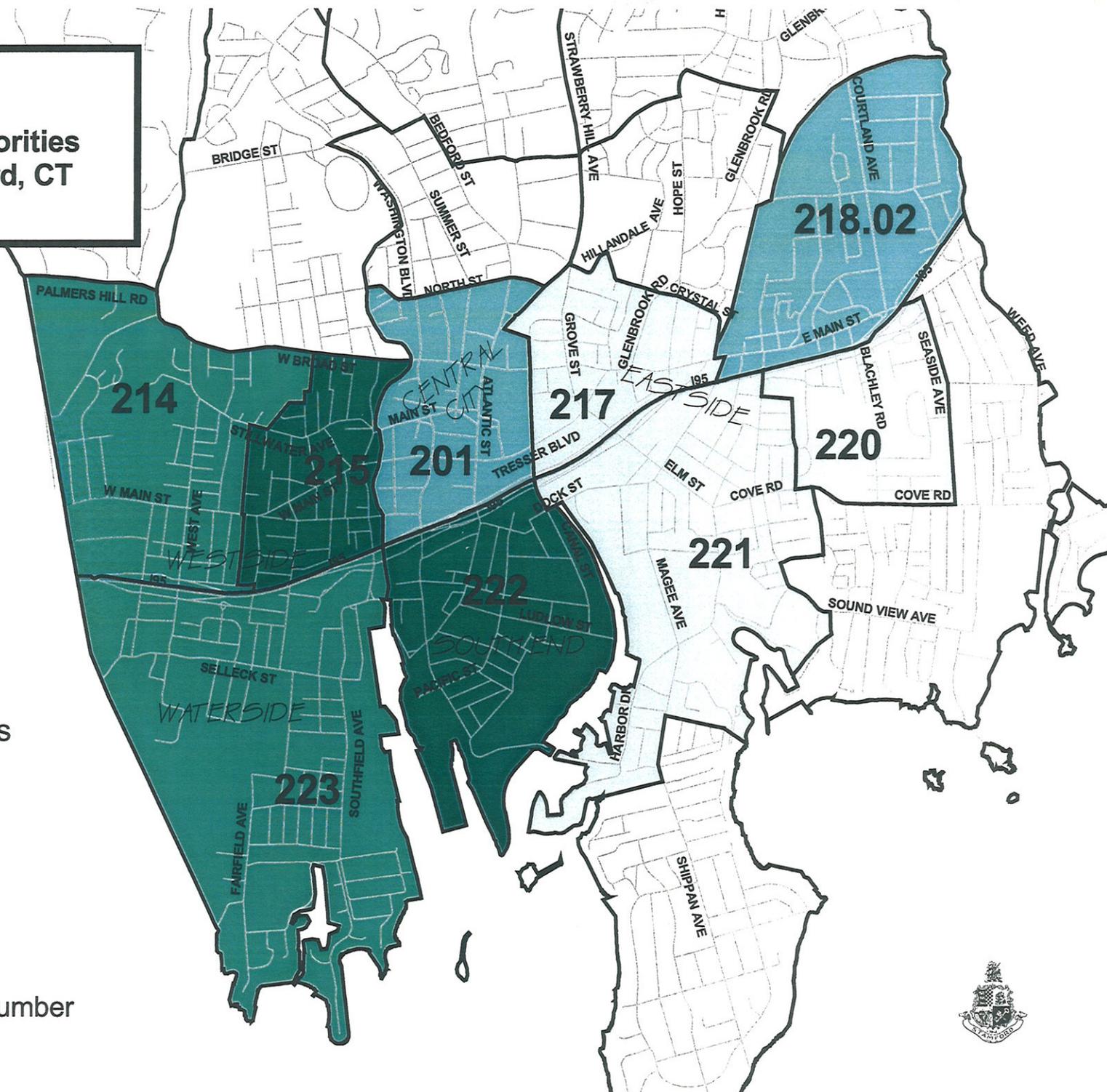
<b>Strategy 1: Assist Existing And Developing Micro-Enterprises</b>		<b>Priority:</b> 2
<b>Corresponding Community Goals:</b>		
<ul style="list-style-type: none"> <li>• Economic and employment opportunities which achieve and sustain full independence</li> <li>• Education and training programs designed to gain access to quality jobs</li> <li>• Community appreciation and support of diversity</li> <li>• Efficient use of community resources</li> <li>• Strong vital neighborhoods with a sense of community</li> </ul>		
<b>Obstacles:</b> Lack of access to capital, lack of technical assistance for business planning		
<b>Resources:</b>		
<i>Federal</i>		
<ul style="list-style-type: none"> <li>• Grant Funds</li> <li>• Program Income</li> </ul>	CDBG, Economic Development Initiative (EDI/BEDI), Section 108	
<ul style="list-style-type: none"> <li>• Direct Loans</li> </ul>	CDBG	
<i>Other Resources</i>		
<ul style="list-style-type: none"> <li>• Private</li> </ul>	SBA	
<ul style="list-style-type: none"> <li>• Non-Federal Public</li> </ul>	Local lenders, Service Corps of Retired Executives (SCORE), Community Economic Development Fund, GE Capital Corporation	
	Connecticut Department of Economic and Community Development	
<b>Activities Or Projects</b>	Micro-business development	
<b>Number And Type Of Businesses To Benefit</b>	10 micro-businesses	
<b>Proposed Objective</b>	Establish and stabilize 30 micro-businesses	
<b>Target Date For Completion Of Objective</b>	2010	
<b>Geographic Distribution</b>	Targeted areas	

**Map 5  
Percent All Minorities  
City of Stamford, CT**

**Percent All Minorities**



— census tract  
**214** census tract number



**NON-HOUSING COMMUNITY DEVELOPMENT PLAN PRIORITY, continued**

<b>Strategy 2: Develop A Skilled Labor Force For Local Businesses</b>		<b>Priority:</b>	1
<b>Corresponding Community Goals:</b>			
<ul style="list-style-type: none"> <li>• Economic and employment opportunities which achieve and sustain full independence</li> <li>• Education and training programs designed to gain access to quality jobs</li> <li>• Efficient use of community resources</li> </ul>			
<b>Obstacles:</b> Lack of training for unemployed individuals; lack of coordination between business employment needs, training programs, and outreach			
<b>Resources:</b>			
<i>Federal</i>			
• <b>Grant Funds</b>	CDBG, EDI/BEDI, Job Training Partnership Act program, Section 108, Department of Education and Department of Labor School To Work Transition Program, Department of Education National Workplace Literacy Program		
• <b>Program Income</b>	CDBG		
• <b>Direct Loans</b>	SBA		
<i>Other Resources</i>			
• <b>Private</b>	Local lenders, SCORE, Community Economic Development Fund		
• <b>Non-Federal Public</b>	Connecticut Department of Economic and Community Development		
<b>Activities Or Projects</b>	Job training for unemployed or underemployed individuals		
<b>Number And Type Of Benefit</b>	80 unemployed or underemployed extremely low and low income individuals		
<b>Proposed Objective</b>	Training/placement of 100 r unemployed or underemployed extremely and low income individuals		
<b>Target Date For Completion Of Objective</b>	2010		
<b>Geographic Distribution</b>	Targeted areas, including State enterprise zone (South End and Waterside)		

**NON-HOUSING COMMUNITY DEVELOPMENT, continued**

<b>Strategy 3: Create Additional Employment Opportunities In Stamford</b>		<b>Priority:</b> 2
<b>Corresponding Community Goals:</b>		
<ul style="list-style-type: none"> <li>• Economic and employment opportunities to achieve and sustain full independence</li> <li>• Education and training programs designed to gain access to quality jobs</li> <li>• Efficient use of community resources</li> </ul>		
<b>Obstacles:</b> Competition with other jurisdictions inside and outside Connecticut, high housing costs, corporate taxes, lack of skilled labor force for potential manufacturing firms, cost of properties		
<b>Resources:</b>		
<i>Federal</i>		
• Grant Funds	CDBG, Economic Development Initiative, Department of Labor programs, Department of Commerce programs	
• Program Income	CDBG	
• Direct Loans	SBA, Section 108,	
<i>Other Resources</i>		
• Private	Local lenders, SCORE, CEDF	
• Non-Federal Public	Connecticut Department of Economic and Community Development	
<b>Activities Or Projects</b>	New jobs	
<b>Number And Type Of Benefit</b>	200 State Enterprise Zone residents who are unemployed or underemployed extremely low and low income to be hired by as many as 20 businesses	
<b>Proposed Objective</b>	200 jobs	
<b>Target Date For Completion Of Objective</b>	2010	
<b>Geographic Distribution</b>	Targeted areas, including State enterprise zone (South End and Waterside)	

***NON-HOUSING COMMUNITY DEVELOPMENT, continued***

<b>Strategy 4:</b> Improve public infrastructure located in targeted areas, Coordinated with Affordable Housing Creation		<b>Priority:</b> 1
<b>Corresponding Community Goals:</b>		
<ul style="list-style-type: none"> <li>• Strong vital neighborhoods with a sense of community</li> <li>• An aesthetically pleasing and well-maintained urban environment that enhances the region's natural resources</li> <li>• Efficient use of community resources</li> <li>• Access to quality health and recreational opportunities to maintain personal well-being</li> <li>• Community support that enables children and youth to achieve their potential</li> </ul>		
<b>Obstacles:</b> Funding		
<b>Resources:</b>		
<i>Federal</i>		
• <b>Grant Funds</b>	CDBG, U.S. Environment Protection Agency Urban Parks and Recreation Recovery Act Program, Department of Justice Midnight Basketball Training and Partnership Grant Program	
• <b>Program Income</b>	CDBG	
<i>Other Resources</i>		
• <b>Private</b>	Groundworks Trust	
• <b>Non-Federal Public</b>	Department of Environmental Protection grants for tree maintenance	
<b>Activities Or Projects</b>	Neighborhood parks	
<b>Number And Type Of Residents To Benefit</b>	Population of targeted area	
<b>Proposed Objective</b>	Improved infrastructure, beautified parks, and effective programs	
<b>Target Date For Completion Of Objective</b>	2010	
<b>Geographic Distribution</b>	Targeted areas	

**NON-HOUSING COMMUNITY DEVELOPMENT PLAN PRIORITY, continued**

<b>Strategy 5: Improve Community Facilities</b>		<b>Priority:</b>	<b>2</b>
<b>Corresponding Community Goals:</b>			
<ul style="list-style-type: none"> <li>• Strong vital neighborhoods with a sense of community</li> <li>• An aesthetically pleasing and well-maintained urban environment that enhances the region's natural resources</li> <li>• Efficient use of community resources</li> <li>• Access to quality health and recreational opportunities that maintain personal well-being</li> <li>• Community support that enables children and youth to achieve their potential</li> </ul>			
<b>Obstacles: Funding</b>			
<b>Resources:</b>			
<i>Federal</i>			
• Grant Funds	CDBG		
• Program Income	CDBG		
• Direct Grants	HUD, Neighborhood Development Program		
<i>Other Resources</i>			
• Private	Foundations, United Way of Stamford		
• Non-Federal Public	State of Connecticut Department of Social Services		
<b>Activities Or Projects</b>	Improved child care centers, community centers, and facilities that house public service programs		
<b>Number And Type Of Residents To Benefit</b>	Population of targeted area		
<b>Proposed Objective</b>	Well-maintained community facilities		
<b>Target Date For Completion Of Objective</b>	2010		
<b>Geographic Distribution</b>	Target Area		

**NON-HOUSING COMMUNITY DEVELOPMENT PLAN PRIORITY, continued**

<b>Strategy 6: Promote Health, Medical, Educational, Nutrition, And Human Service Programs</b>		<b>Priority:</b> 1
<b>Corresponding Community Goal:</b>		
<ul style="list-style-type: none"> <li>• Equal access to high quality education for all age groups</li> <li>• Accessible quality services which sustain independence, including child care, social services, transportation, education, health, and senior services</li> <li>• Strong vital neighborhoods with a sense of community</li> <li>• An aesthetically pleasing and well-maintained urban environment that enhances the region's natural resources</li> <li>• Efficient use of community resources</li> <li>• Access to quality health and recreational opportunities to maintain personal well-being</li> <li>• Community support that enables children and youth to achieve their potential</li> </ul>		
<b>Obstacles: Funding</b>		
<b>Resources:</b>		
<i>Federal</i>		
• Grant Funds		CDBG, Department of Health and Human Services
• Program Income		CDBG
<i>Other Resources</i>		
• Private		Foundations
• Non-Federal Public		Connecticut Department of Social Services
<b>Activities Or Projects</b>	Health, medical, educational, nutrition, and human service programs	
<b>Number And Type Of Residents To Benefit</b>	Extremely low and low income households or persons	
<b>Proposed Objective</b>	Effective services to combat poverty, lack of opportunities, and disabilities	
<b>Target Date For Completion Of Objective</b>	2010	
<b>Geographic Distribution</b>	Targeted areas/populations	

## Exhibit 6

# HUD Housing Needs Charts

Housing Needs Table		Grantee:														Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member		Disproportionate Racial/Ethnic Need?	# of Households in lead-Hazard Housing	Total Low Income, HIV/AIDS Population		
		Only complete blue sections. Do NOT type in sections other than blue.																	% of Goal	% HSHLD				# HSHLD	
		Current % of Households	Current Number of Households	3-5 Year Quantities																					
				Year 1		Year 2		Year 3		Year 4*		Year 5*		Multi-Year											
		Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual										
Household Income <=30% MFI	Renter	Elderly	25	100%	1,935														100%		YES				
			Any housing problems	53.4	1,033	266	348	75	86	75	75	75			434	####	H			50.3					
			Cost Burden > 30%	52.1	1,008											0	####								
			Cost Burden >50%	36.2	701											0	####								
	Small Related	NUMBER OF HOUSEHOLDS	100%	1,342																		YES			
		With Any Housing Problems	83.8	1,124	5	26	37	63	51	51	51			89	####	H									
		Cost Burden > 30%	79.3	1,064											0	####									
		Cost Burden >50%	55.6	746											0	####									
		NUMBER OF HOUSEHOLDS	100%	475																			YES		
		With Any Housing Problems	88.6	421	5	1	5		7	7	7			1	####	H									
	Large Related	Cost Burden > 30%	71.4	339											0	####									
		Cost Burden >50%	46.3	220											0	####									
		NUMBER OF HOUSEHOLDS	100%	1,317																			NO		
	All other hshld	With Any Housing Problems	77.4	1,020	35	58	15	31	15	15	15			89	####	H									
		Cost Burden > 30%	74.8	985											0	####									
		Cost Burden >50%	59.4	782											0	####									
	Elderly	NUMBER OF HOUSEHOLDS	100%	2,089																			YES		
		With Any Housing Problems	88.4	1,846		1								1	####	M									
		Cost Burden > 30%	88.4	1,846											0	####									
		Cost Burden >50%	65.7	1,372											0	####									
Small Related	NUMBER OF HOUSEHOLDS	100%	562																			YES			
	With Any Housing Problems	88.6	498		4	1	1	1	1	1			5	####	M										
	Cost Burden > 30%	86.8	488											0	####										
	Cost Burden >50%	78.3	440											0	####										
Owner Related	NUMBER OF HOUSEHOLDS	100%	51																			NO			
	With Any Housing Problems	100	51		1								1	####	L										

CPMP #REF!

Housing Needs Table		Grantee:		Only complete blue sections. Do NOT type in sections other than blue.														Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member		Disproportionate Racial/Ethnic Need?	# of Households in lead-Hazard Housing	Total Low Income, HIV/AIDS Population		
		Current % of Households	Current Number of Households	3-5 Year Quantities												% of Goal	%				#						
				Year 1		Year 2		Year 3		Year 4*		Year 5*		Multi-Year													
				Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual												
Income > 30 to <= 50% MFI	Renter	Large	Cost Burden > 30%	100	51											0	####										
			Cost Burden > 50%	84.3	43											0	####										
		All other hshold	NUMBER OF HOUSEHOLDS	100%	211																						
			With Any Housing Problems	93.4	197											0	####	L									NO
			Cost Burden > 30%	93.4	197											0	####										
			Cost Burden > 50%	91.5	193											0	####										
	Elderly	NUMBER OF HOUSEHOLDS	100%	402															100%							YES	
		With Any Housing Problems	70.9	285	25	11	35	16	35		35		35		27	####	H							0			
		Cost Burden > 30%	67.4	271											0	####											
		Cost Burden > 50%	34.3	138											0	####											
		Small Related	NUMBER OF HOUSEHOLDS	100%	1,479																						YES
			With Any Housing Problems	66.9	990	4	27	45	28	54		64		64		55	####	H									
Cost Burden > 30%	59.7		883											0	####												
Cost Burden > 50%	15.3		227											0	####												
Large Related	NUMBER OF HOUSEHOLDS	100%	523																						NO		
	With Any Housing Problems	89.3	467	5	2	5	1	6		7		7		3	####	H											
	Cost Burden > 30%	39	204											0	####												
	Cost Burden > 50%	6.3	33											0	####												
	All other hshold	NUMBER OF HOUSEHOLDS	100%	1,033																						NO	
		With Any Housing Problems	74.3	768	70		5	8	5		5		5		8	####	H										
Cost Burden > 30%		73	754											0	####												
Cost Burden > 50%		31.8	329											0	####												
Elderly	NUMBER OF HOUSEHOLDS	100%	1,125																						YES		
	With Any Housing Problems	52.8	594											0	####	M											
	Cost Burden > 30%	52.8	594											0	####												
	Cost Burden > 50%	24.6	277											0	####												



CPMP #REF!

Housing Needs Table		Grantee:		Only complete blue sections. Do NOT type in sections other than blue.												Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member		Disproportionate Racial/Ethnic Need?	# of Households in Lead-Hazard Housing	Total Low Income, HIV/AIDS Population	
		Current % of Households	Current Number of Households	3-5 Year Quantities															% of Goal					
				Year 1		Year 2		Year 3		Year 4*		Year 5*		Multi-Year										
Housing Needs - Comprehensive Housing Affordability Strategy (CHAS) Data Housing Problems		Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	% HSHLD	# HSHLD							
Household Income > 50 to	All other hshld	With Any Housing Problems	62.4	323	20	69	5	5	5	5	5	5	5	5	74	####	H							
		Cost Burden > 30%	54.6	283												0	####							
		Cost Burden >50%	1.9	10												0	####							
	Elderly	NUMBER OF HOUSEHOLDS	100%	405																			YES	
		With Any Housing Problems	21.7	88												0	####	L						
		Cost Burden > 30%	21.7	88												0	####							
		Cost Burden >50%	5.9	24												0	####							
	Small Related	NUMBER OF HOUSEHOLDS	100%	454																			YES	
		With Any Housing Problems	65	295	5	13	6	13	13	13	13	13	13	13	6	####	H							
		Cost Burden > 30%	65	295												0	####							
		Cost Burden >50%	32.6	148												0	####							
	Large Related	NUMBER OF HOUSEHOLDS	100%	162																			YES	
		With Any Housing Problems	72.2	117	1	5	5	5	5	5	5	5	5	5	0	####	M							
		Cost Burden > 30%	66	107												0	####							
		Cost Burden >50%	42	68												0	####							
	All other hshld	NUMBER OF HOUSEHOLDS	100%	233																			YES	
		With Any Housing Problems	62.2	145	1	3	3	2	2	2	2	2	2	2	0	####	M							
		Cost Burden > 30%	62.2	145												0	####							
		Cost Burden >50%	22.7	53												0	####							
	<b>Total Any Housing Problem</b>				465	588	326	261	383	0	417	0	417	0	0	849			Total Disabled		0			
	<b>Total 215 Renter</b>					567		247								814			Tot. Elderly		10653	Total Lead Hazard		0
	<b>Total 215 Owner</b>					21		14								35			Tot. Sm. Related		9676	Total Renters		16311
	<b>Total 215</b>				0	588	0	261	0	0	0	0	0	0	0	849			Tot. Lg. Related		2954	Total Owners		13601

#REF!

Only complete blue sections.

Community Development Needs	Needs	Current	Gap	5-Year Quantities										% of Goal	Priority Need: H, L, LL	Dollars to Address	Plan to Fund: Y/N	Fund Source				
				Year 1		Year 2		Year 3		Year 4		Year 5							Cumulative			
				Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual						Goal	Actual		
01 Acquisition of Real Property 570.201(a)	10	0	10	2		2		2		2		2		2		10	0	0%	M			
02 Disposition 570.201(b)	0	0	0													0	0	####	M			
03 Public Facilities and Improvements (General) 570.201(c)	0	0	0													0	0	####	M			
03A Senior Centers 570.201(c)	0	0	0													0	0	####	M			
03B Handicapped Centers 570.201(c)	0	0	0													0	0	####	H			
03C Homeless Facilities (not operating costs) 570.201(c)	400	0	400	64		70		70		70		70		70		344	0	0%	H			
03D Youth Centers 570.201(c)	100	0	100	10		10		10		10		10		10		50	0	0%	H			
03E Neighborhood Facilities 570.201(c)	10	0	10	2		2		2		2		2		2		10	0	0%	H			
03F Parks, Recreational Facilities 570.201(c)	0	0	0													0	0	####	M			
03G Parking Facilities 570.201(c)	0	0	0													0	0	####	L			
03H Solid Waste Disposal Improvements 570.201(c)	0	0	0													0	0	####	L			
03I Flood Drain Improvements 570.201(c)	0	0	0													0	0	####	L			
03J Water/Sewer Improvements 570.201(c)	0	0	0													0	0	####	L			
03K Street Improvements 570.201(c)	0	0	0													0	0	####	L			
03L Sidewalks 570.201(c)	0	0	0													0	0	####	L			
03M Child Care Centers 570.201(c)	300	0	300	190		50		50		50		50		50		390	0	0%	H			
03N Tree Planting 570.201(c)	0	0	0													0	0	####	L			
03O Fire Stations/Equipment 570.201(c)	0	0	0													0	0	####	L			
03P Health Facilities 570.201(c)	0	0	0													0	0	####	M			
03Q Abused and Neglected Children Facilities 570.201(c)	0	0	0													0	0	####	M			
03R Asbestos Removal 570.201(c)	0	0	0													0	0	####	M			
03S Facilities for AIDS Patients (not operating costs) 570.201(c)	0	0	0													0	0	####	M			
03T Operating Costs of Homeless/AIDS Patients Programs	0	0	0													0	0	####	M			
04 Clearance and Demolition 570.201(d)	3	0	3	1				1						1		3	0	0%	L			
04A Clean-up of Contaminated Sites 570.201(d)	0	0	0													0	0	####	M			
05 Public Services (General) 570.201(e)	0	0	0	20K		20K		20K		20K		20K		20K		100K	0	####	M			
05A Senior Services 570.201(e)	3000	0	3000	660		600		600		600		600		600		3060	0	0%	H			
05B Handicapped Services 570.201(e)	0	0	0													0	0	####	M			
05C Legal Services 570.201(e)	0	0	0													0	0	####	M			
05D Youth Services 570.201(e)	0	0	0													0	0	####	M			
05E Transportation Services 570.201(e)	0	0	0													0	0	####	M			
05F Substance Abuse Services 570.201(e)	0	0	0													0	0	####	M			
05G Battered and Abused Spouses 570.201(e)	1300	0	1300	290		250		250		250		250		250		1290	0	0%	H			
05H Employment Training 570.201(e)	80	0	80	16		16		16		16		16		16		80	0	0%	H			
05I Crime Awareness 570.201(e)	0	0	0													0	0	####	M			
05J Fair Housing Activities (if CDBG, then subject to 570.201(e))	0	0	0													0	0	####	M			

#REF!

Only complete blue sections.

Community Development Needs		Needs	Current	Gap	5-Year Quantities										% of Goal	Priority Need: H, M, L	Dollars to Address	Plan to Fund? Y/N	Fund Source		
					Year 1		Year 2		Year 3		Year 4		Year 5							Cumulative	
					Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual						Goal	Actual
Public	05K Tenant/Landlord Counseling 570.201(e)	0	0	0											0	0	####	M			
	05L Child Care Services 570.201(e)	0	0	0											0	0	####	M			
	05M Health Services 570.201(e)	5000	0	5000	1200		1000		1000		1000		1000		5200	0	0%	H			
	05N Abused and Neglected Children 570.201(e)	0	0	0											0	0	####	M			
	05O Mental Health Services 570.201(e)	2788	0	2788	20		20		20		20		20		100	0	0%	H			
	05P Screening for Lead-Based Paint/Lead Hazards Polson 570.201	0	0	0											0	0	####	M			
	05Q Subsistence Payments 570.204	0	0	0											0	0	####	L			
	05R Homeownership Assistance (not direct) 570.204	0	0	0											0	0	####	M			
	05S Rental Housing Subsidies (if HOME, not part of 5% 570.204	0	0	0											0	0	####	L			
	05T Security Deposits (if HOME, not part of 5% Admin c	0	0	0											0	0	####	L			
	06 Interim Assistance 570.201(f)	0	0	0											0	0	####	L			
	07 Urban Renewal Completion 570.201(h)	0	0	0											0	0	####	L			
	08 Relocation 570.201(i)	0	0	0											0	0	####	M			
	09 Loss of Rental Income 570.201(j)	0	0	0											0	0	####	L			
	10 Removal of Architectural Barriers 570.201(k)	0	0	0											0	0	####	M			
	11 Privately Owned Utilities 570.201(l)	0	0	0											0	0	####	L			
	12 Construction of Housing 570.201(m)	85	0	85	15		15		15		15		15		75	0	0%	H			
	13 Direct Homeownership Assistance 570.201(n)	75	0	75	15		15		15		15		15		75	0	0%	H			
14A Rehab; Single-Unit Residential 570.202	0	0	0											0	0	####	M				
14B Rehab; Multi-Unit Residential 570.202	1000	0	1000	60		60		60		60		60		300	0	0%	H				
14C Public Housing Modernization 570.202	100	0	100			25		25		25		25		100	0	0%	H				
14D Rehab; Other Publicly-Owned Residential Buildings 570.202	500	0	500	100		100		100		100		100		500	0	0%	H				
14E Rehab; Publicly or Privately-Owned Commercial/Indu 570.202	0	0	0											0	0	####	M				
14F Energy Efficiency Improvements 570.202	0	0	0											0	0	####	M				
14G Acquisition - for Rehabilitation 570.202	0	0	0											0	0	####	M				
14H Rehabilitation Administration 570.202	5	0	5	1		1		1		1		1		5	0	0%	H				
14I Lead-Based/Lead Hazard Test/Abate 570.202	0	0	0											0	0	####	M				
15 Code Enforcement 570.202(c)	0	0	0											0	0	####	M				
16A Residential Historic Preservation 570.202(d)	200	0	200	20		20		20		20		20		100	0	0%	M				
16B Non-Residential Historic Preservation 570.202(d)	0	0	0											0	0	####	M				
17A CI Land Acquisition/Disposition 570.203(a)	0	0	0											0	0	####	M				
17B CI Infrastructure Development 570.203(a)	0	0	0											0	0	####	M				
17C CI Building Acquisition, Construction, Rehabilittet 570.203(a)	0	0	0											0	0	####	M				
17D Other Commercial/Industrial Improvements 570.203(a)	0	0	0											0	0	####	M				
18A ED Direct Financial Assistance to For-Profits 570.203(b)	0	0	0											0	0	####	M				
18B ED Technical Assistance 570.203(b)	200	0	200	40		40		40		40		40		200	0	0%	H				

#REF!

Only complete blue sections.

Community Development Needs	Needs	Current	Gap	5-Year Quantities												% of Goal	Priority Need: H, M, L	Dollars to Address	Plan to Fund: Y/N	Fund Source		
				Year 1		Year 2		Year 3		Year 4		Year 5		Cumulative								
				Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual							
18C Micro-Enterprise Assistance	10	0	10	2		2		2		2		2		2		10	0	0%	H			
19A HOME Admin/Planning Costs of PJ (not part of 5% Ad	5	0	5	1		1		1		1		1		1		5	0	0%	H			
19B HOME CHDO Operating Costs (not part of 5% Admin ca	3	0	3	1		1		1								3	0	0%	M			
19C CDBG Non-profit Organization Capacity Building	3	0	3	1		1		1								3	0	0%	M			
19D CDBG Assistance to Institutes of Higher Education	0	0	0													0	0	####	L			
19E CDBG Operation and Repair of Foreclosed Property	0	0	0													0	0	####	L			
19F Planned Repayment of Section 108 Loan Principal	0	0	0													0	0	####	L			
19G Unplanned Repayment of Section 108 Loan Principal	0	0	0													0	0	####	L			
19H State CDBG Technical Assistance to Grantees	0	0	0													0	0	####	L			
20 Planning 570.205	0	0	0													0	0	####				
21A General Program Administration 570.206	5	0	5	1		1		1		1		1		1		5	0	0%	H			
21B Indirect Costs 570.206	5	0	5	1		1		1		1		1		1		5	0	0%	H			
21D Fair Housing Activities (subject to 20% Admin cap) 570.206	5	0	5	1		1		1		1		1		1		5	0	0%	H			
21E Submissions or Applications for Federal Programs 570.206	0	0	0													0	0	####	M			
21F HOME Rental Subsidy Payments (subject to 5% cap)	0	0	0													0	0	####	L			
21G HOME Security Deposits (subject to 5% cap)	0	0	0													0	0	####	L			
21H HOME Admin/Planning Costs of PJ (subject to 5% cap)	5	0	5	1		1		1		1		1		1		5	0	0%	H			
21I HOME CHDO Operating Expenses (subject to 5% cap)	0	0	0													0	0	####	L			
22 Unprogrammed Funds	0	0	0													0	0	####				
HOPWA 31J Facility based housing - development	0	0	0													0	0	####				
31K Facility based housing - operations	0	0	0													0	0	####				
31G Short term rent mortgage utility payments	0	0	0													0	0	####				
31F Tenant based rental assistance	0	0	0													0	0	####				
31E Supportive service	0	0	0													0	0	####				
31I Housing Information services	0	0	0													0	0	####				
31H Resource Identification	0	0	0													0	0	####				
31B Administration - grantee	0	0	0													0	0	####				
31D Administration - project sponsor	0	0	0													0	0	####				
<b>Totals</b>	<b>###</b>	<b>0</b>	<b>###</b>	<b>2715</b>	<b>0</b>	<b>2305</b>	<b>0</b>	<b>2306</b>	<b>0</b>	<b>2303</b>	<b>0</b>	<b>2304</b>	<b>0</b>	<b>###</b>	<b>0</b>	<b>0</b>	<b>0%</b>					

<b>#REF!</b>						
<b>Housing Market Analysis</b>						
<i>Complete cells in blue.</i>						
Housing Stock Inventory	Vacancy Rate	0 & 1 Bedroom	2 Bedrooms	3+ Bedroom	Total	Substandard Units
<b>Affordability Mismatch</b>						
Occupied Units: Renter		9286	7301	3096	19683	1371
Occupied Units: Owner		2122	6676	16918	25716	292
Vacant Units: For Rent	1.54%	183	223	309	715	52
Vacant Units: For Sale	0.39%	47	56	78	181	2
Total Units Occupied & Vacant		11638	14256	20401	46295	1717
Rents: Applicable FMRs (in \$s)		1,149	1,437	1,873		
<b>Rent Affordable at 30% of 50% of MFI (in \$s)</b>		976	1,255	1,395		
<b>Public Housing Units</b>						
Occupied Units	94.59%	154	344	184	682	0
Vacant Units	5.41%	36	3	0	39	1
Total Units Occupied & Vacant		190	347	184	721	1
<b>Rehabilitation Needs (in \$s)</b>					0	



Grantee Name: #REF1

Non-Homeless Special Needs Including HOPWA	Needs	Currently Available	GAP	3-5 Year Quantities												Total			Priority Need: N, M, L	Plan to Fund? Y N	Fund Source: CD&G, HC
				Year 1		Year 2		Year 3		Year 4*		Year 5*		Goal	Actual	% of Goal					
				Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete								
Housing Needed	52. Elderly	3909	1735	2174	291	0	250	0	250	0	250	0	250	0	1291	0	0%	H	Y	C	
	53. Frail Elderly	1379	363	1016	0	0	0	0	0	0	0	0	0	0	0	0	####	M	Y*	C	
	54. Persons w/ Severe Mental Illness	2352	25	2327	0	0	0	0	0	0	0	0	0	0	0	0	####	M	Y*	C	
	55. Developmentally Disabled	1832	107	1725	12	0	0	0	0	0	0	0	0	12	0	0%	H	Y*	C		
	56. Physically Disabled	4159	0	4159	0	0	0	0	0	0	0	0	0	0	0	0	####	M	Y*	C	
	57. Alcohol/Other Drug Addicted	504	104	400	64	0	0	0	0	0	0	0	0	64	0	0%	M	Y*	C		
	58. Persons w/ HIV/AIDS & their families	1064	18	1046	0	0	0	0	0	0	0	0	0	0	0	0	####	M	Y*	C	
	59. Public Housing Residents	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####			C	
	<b>Total</b>	<b>15199</b>	<b>2352</b>	<b>12847</b>	<b>367</b>	<b>0</b>	<b>250</b>	<b>0</b>	<b>250</b>	<b>0</b>	<b>250</b>	<b>0</b>	<b>250</b>	<b>0</b>	<b>1367</b>	<b>0</b>	<b>0%</b>				
Supportive Services Needed	60. Elderly	6012	1735	4277	5810	0	5000	0	5000	0	5000	0	5000	0	25810	0	0%	H	Y	C	
	61. Frail Elderly	2658	363	2295	460	0	200	0	200	0	200	0	200	0	1260	0	0%	H	Y	C	
	62. Persons w/ Severe Mental Illness	3295	507	2788	259	0	150	0	150	0	150	0	150	0	859	0	0%	H	Y	C	
	63. Developmentally Disabled	2580	27	2553	75	0	75	0	75	0	75	0	75	0	375	0	0%	H	Y	C	
	64. Physically Disabled	5859	213	5646	0	0	0	0	0	0	0	0	0	0	0	0	####	H	Y	C	
	65. Alcohol/Other Drug Addicted	710	327	383	130	0	100	0	100	0	100	0	100	0	530	0	0%	H	Y	C	
	66. Persons w/ HIV/AIDS & their families	1500	91	1409	0	0	0	0	0	0	0	0	0	0	0	0	####	H	Y	C	
	67. Public Housing Residents	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####			C	
	<b>Total</b>	<b>22614</b>	<b>3263</b>	<b>19351</b>	<b>6734</b>	<b>0</b>	<b>5525</b>	<b>0</b>	<b>5525</b>	<b>0</b>	<b>5525</b>	<b>0</b>	<b>5525</b>	<b>0</b>	<b>28834</b>	<b>0</b>	<b>0%</b>				

Part 4: Homeless Needs Table: Families		Needs	Currently Available	Gap	5-Year Quantities										Total			Priority H. H. L.	Plan to Fund? Y/N	Fund Source: CDHS, HOME, HOPWA, ESG, et. Other
					Year 1		Year 2		Year 3		Year 4		Year 5		Goal	Actual	% of Goal			
					Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete						
Beds	Emergency Shelters	28	28	0	0	0	0	0	0	0	0	0	0	0	0	0	###			
	Transitional Housing	63	63	0	0	0	0	0	0	0	0	0	0	0	0	0	###			
	Permanent Supportive Housing	64	0	64	8	0	0	0	0	0	0	0	0	8	0	0%				
	Total	155	91	64	8	0	0	0	0	0	0	0	0	8	0	0%				

Completing Part 1: Homeless Population. This must be completed using statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations at a one-day point in time. The counts must be from: (A) administrative records, (N) enumerations, (S) statistically reliable samples, or (E) estimates. The quality of the data presented in each box must be identified as: (A), (N), (S) or (E).

Completing Part 2: Homeless Subpopulations. This must be completed using statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations at a one-day point in time. The numbers must be from: (A) administrative records, (N) enumerations, (S) statistically reliable samples, or (E) estimates. The quality of the data presented in each box must be identified as: (A), (N), (S) or (E).

Sheltered Homeless. Count adults, children and youth residing in shelters for the homeless. "Shelters" include all emergency shelters and transitional shelters for the homeless, including domestic violence shelters, residential programs for runaway/homeless youth, and any hotel/motel/apartment voucher arrangements paid by a public/private agency because the person or family is homeless. Do not count: (1) persons who are living doubled up in conventional housing; (2) formerly homeless persons who are residing in Section 8 SRO, Shelter Plus Care, SHP permanent housing or other permanent housing units; (3) children or youth, who because of their own or a parent's homelessness or abandonment, now reside temporarily and for a short anticipated duration in hospitals, residential treatment facilities, emergency foster care, detention facilities and the like; and (4) adults living in mental health facilities, chemical dependency facilities, or criminal justice facilities.

Unsheltered Homeless. Count adults, children and youth sleeping in places not meant for human habitation. Places not meant for human habitation include streets, parks, alleys, parking ramps, parts of the highway system, transportation depots and other parts of transportation systems (e.g. subway tunnels, railroad car), all-night commercial establishments (e.g. movie theaters, laundromats, restaurants), abandoned buildings, building roofs or stairwells, chicken coops and other farm outbuildings, caves, campgrounds, vehicles, and other similar places.

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