

<p><b>Streamlined Annual PHA Plan</b> <i>(Small PHAs)</i></p>	<p><b>U.S. Department of Housing and Urban Development</b> <b>Office of Public and Indian Housing</b></p>	<p><b>OMB No. 2577-0226</b> <b>Expires 09/30/2027</b></p>
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**Purpose.** The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, including changes to these policies, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families

**Applicability.** The Form HUD-50075-SM is to be completed annually by **Small PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, HCV-Only PHA, or Qualified PHA do not need to submit this form.

**Definitions.**

- (1) **High-Performer PHA** - A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers and was designated as a high performer on both the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, and that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceed 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceed 550, and that was designated as a standard performer in the most recent PHAS or SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined and is not PHAS or SEMAP troubled.

<b>A.</b>	<b>PHA Information.</b>														
A.1	<p><b>PHA Name:</b> <u>Housing Authority City of Linden</u>      <b>PHA Code:</b> <u>NJ066</u>  <b>PHA Type:</b> <input checked="" type="checkbox"/> Small</p> <p><b>PHA Plan for Fiscal Year Beginning:</b> (MM/YYYY): <u>10/2025</u>  <b>PHA Inventory</b> (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)  <b>Number of Public Housing (PH) Units</b> <u>201</u>    <b>Number of Housing Choice Vouchers (HCVs)</b> <u>362</u>  <b>Total Combined</b> <u>563</u>  <b>PHA Plan Submission Type:</b> <input checked="" type="checkbox"/> Annual Submission    <input type="checkbox"/> Revised Annual Submission</p> <p><b>Availability of Information.</b> In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information of the PHA policies contained in the standard Annual Plan but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.</p> <p><b>How the public can access this PHA Plan:</b> The public can access this PHA Plan through the following methods: &gt; Online Access: The PHA plan is available on our website <a href="http://www.lindenhousingauthority.org">www.lindenhousingauthority.org</a> where visitors can view and download the plan in PDF format. &gt; In-Person Access: Physical copies of the PHA plan are available for public review at the following locations during regular business hours: Monday-Friday, 9am-4:30pm (except Holidays) at: Ann J. Ferguson Towers, 1601 Dill Avenue, Linden, NJ 07036 &gt; By Mail: Upon request, a printed copy of the PHA Plan can be mailed to individuals. Requests can be made by contacting our office at (908) 298-3820 ext. 203 or by email at <a href="mailto:mberghammer@lindenha.org">mberghammer@lindenha.org</a>. &gt; Public Meeting: The PHA Plan is discussed and reviewed in public meetings, where attendees can obtain copies and ask questions. Notices of these meetings, including dates, times and locations, are posted on our website and at the PHA main office. &gt; Electronic Request: Interested individuals can request an electronic copy of the PHA plan by sending an email to <a href="mailto:ksanders@lindenha.org">ksanders@lindenha.org</a>. The plan will be sent as a PDF attachment.</p> <p><input type="checkbox"/> <b>PHA Consortia:</b> (Check box if submitting a Joint PHA Plan and complete table below)</p> <table border="1" data-bbox="164 1877 1528 1934"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) in the Consortia</th> <th rowspan="2">Program(s) not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program		PH	HCV						
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<b>B.</b>	<p><b>Plan Elements Submitted with 5-Year PHA Plans.</b> Required elements for Small PHAs completing this document in years in which the 5-Year Plan is also due. This section does not need to be completed for years when a Small PHA is not submitting its 5-Year Plan. See sub-section below for required elements in all other years (Years 1-4).</p>
<b>B.1</b>	<p><b>Revision of Existing PHA Plan Elements.</b>                  (a) Have the following PHA Plan elements been revised by the PHA since its last <b>Five-Year PHA Plan</b> submission?</p> <p>Y N</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Statement of Housing Needs and Strategy for Addressing Housing Needs.  <input type="checkbox"/> <input checked="" type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.  <input type="checkbox"/> <input checked="" type="checkbox"/> Financial Resources.  <input type="checkbox"/> <input checked="" type="checkbox"/> Rent Determination.  <input type="checkbox"/> <input checked="" type="checkbox"/> Homeownership Programs.  <input type="checkbox"/> <input checked="" type="checkbox"/> Substantial Deviation.  <input type="checkbox"/> <input checked="" type="checkbox"/> Significant Amendment/Modification</p> <p>(b) If the PHA answered yes for any element, describe the revisions for each element(s):</p> <p>(c) The PHA must submit its Deconcentration Policy for Field Office Review.</p>
<b>B.2</b>	<p><b>New Activities.</b>                  (a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?</p> <p>Y N</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Hope VI or Choice Neighborhoods.  <input type="checkbox"/> <input checked="" type="checkbox"/> Mixed Finance Modernization or Development.  <input type="checkbox"/> <input checked="" type="checkbox"/> Demolition and/or Disposition.  <input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Tenant Based Assistance.  <input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Project-Based Rental Assistance or Project-Based Vouchers under RAD.  <input type="checkbox"/> <input checked="" type="checkbox"/> Project Based Vouchers.  <input type="checkbox"/> <input checked="" type="checkbox"/> Units with Approved Vacancies for Modernization.  <input type="checkbox"/> <input checked="" type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).</p> <p>(b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process. If using Project-Based Vouchers (PBVs), provide the projected number of project-based units and general locations, and describe how project basing would be consistent with the PHA Plan.</p>
<b>B.3</b>	<p><b>Progress Report.</b>                  Provide a description of the PHA's progress in meeting its Mission and Goals described in the PHA 5-Year Plan.  <b>In the last five years we have: 1. Replaced bathroom sinks, fixtures and toilets in several apartments, the stair railing in the common area have been replaced and new Danfoss valves have been replaced in the entire building 2. We installed screens in every apartment and on every window 3. Emergency generator was installed, tested the water for lead, cycled painted all common areas, and the front office reception was replaced with ADA compliant window 4. We cleaned the exterior of the building and updated the security system</b></p>
<b>B.4</b>	<p><b>Capital Improvements.</b> Include a reference here to the most recent HUD-approved 5-Year Action Plan in EPIC and the date that it was approved.  <b>A5 year action plan was originally submitted on 4/23/2020 and approved on 5/28/2020, but was revised on 3/14/2024 and the revisions were approved on 3/14/2024 (See HUD Form 50075.2)s part of or capital improve plan, we updated the two elevators that we working poorly for several years. both elevators have been modernized. We completed the elevator modernization plan in June 2025</b></p>
<b>B.5</b>	<p><b>Most Recent Fiscal Year Audit.</b>                  (a) Were there any findings in the most recent FY Audit?                  Y <input type="checkbox"/> N <input checked="" type="checkbox"/>                  (b) If yes, please describe:</p>
<p><b>Plan Elements Submitted All Other Years (Years 1-4).</b> Required elements for all other fiscal years. This section does not need to be completed in years when a Small PHA is submitting its 5-Year PHA Plan.</p>	
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<p><b>C</b></p>	<p><b>Other Document or Certification Requirements for Annual Plan Submissions.</b> Required in all submission years.</p>		
<p><b>C.1</b></p>	<p><b>Resident Advisory Board (RAB) Comments.</b></p> <p>(a) Did the RAB(s) have comments to the PHA Plan?                  Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>(b) If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p>		
<p><b>C.2</b></p>	<p><b>Certification by State or Local Officials.</b></p> <p><i>Form HUD 50077-SL, Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan,</i> must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>		
<p><b>C.3</b></p>	<p><b>Civil Rights Certification/ Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan.</b></p> <p><i>Form HUD-50077-CRT-SM, PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed,</i> must be submitted by the PHA as an electronic attachment to the PHA Plan</p>		
<p><b>C.4</b></p>	<p><b>Challenged Elements.</b> If any element of the PHA Plan is challenged, a PHA must include such information as an attachment with a description of any challenges to Plan elements, the source of the challenge, and the PHA's response to the public.</p> <p>(a) Did the public challenge any elements of the Plan?                  Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>If yes, include Challenged Elements.</p>		
<p><b>D.</b></p>	<p><b>Affirmatively Furthering Fair Housing (AFFH).</b></p>		
<p><b>D.1</b></p>	<p><b>Affirmatively Furthering Fair Housing.</b></p> <p>Provide a statement of the PHA's strategies and actions to achieve fair housing goals outlined in an accepted Assessment of Fair Housing (AFH) consistent with 24 CFR § 5.154(d)(5). Use the chart provided below. (PHAs should add as many goals as necessary to overcome fair housing issues and contributing factors.) Until such time as the PHA is required to submit an AFH, the PHA is not obligated to complete this chart. The PHA will fulfill, nevertheless, the requirements at 24 CFR § 903.7(o) enacted prior to August 17, 2015. See Instructions for further detail on completing this item.</p> <table border="1" data-bbox="162 1591 1534 2011"> <tr> <td data-bbox="162 1591 1534 1703"> <p><b>Fair Housing Goal: The Housing Authority City of Linden (HACL) will take affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status,</b></p> </td> </tr> <tr> <td data-bbox="162 1703 1534 2011"> <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p> <p>HACL will ensure affirmative measures to make accessible housing available to persons with disabilities. When it is reasonable, the HACL shall accommodate the needs of a person with disabilities. Some examples are as follows:                      Permitting applications and reexaminations to be completed by mail, conducting home visits, installing grab bars in a bathroom, installing visual fire alarms for hearing impaired persons, allowing a PHA-approved live-in aide to reside in the unit if that person is determined to be essential to the care of a person with disabilities, is not obligated for the support of the person with disabilities, and would not be otherwise living in the unit, permitting an authorized designee or advocate to participate in the application or certification process and any other meetings with HACL staff,</p> </td> </tr> </table>	<p><b>Fair Housing Goal: The Housing Authority City of Linden (HACL) will take affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status,</b></p>	<p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p> <p>HACL will ensure affirmative measures to make accessible housing available to persons with disabilities. When it is reasonable, the HACL shall accommodate the needs of a person with disabilities. Some examples are as follows:                      Permitting applications and reexaminations to be completed by mail, conducting home visits, installing grab bars in a bathroom, installing visual fire alarms for hearing impaired persons, allowing a PHA-approved live-in aide to reside in the unit if that person is determined to be essential to the care of a person with disabilities, is not obligated for the support of the person with disabilities, and would not be otherwise living in the unit, permitting an authorized designee or advocate to participate in the application or certification process and any other meetings with HACL staff,</p>
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**displaying posters and other housing information in locations throughout the PHA's office. A person with a disability may require special accommodations in order to have equal access to the public housing program.**

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced the 5-Year and Annual PHA Plan. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families.

Public reporting burden for this information collection is estimated to average 7.02 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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

**Form identification:** NJ066-Housing Authority City of Linden Form HUD-50075-SM (Form ID - 5151) printed by Marlene Berghammer in HUD Secure Systems/Public Housing Portal at 08/08/2025 05:05PM EST