

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

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

<b>A.</b>	<b>PHA Information.</b>														
<b>A.1</b>	<p> <b>PHA Name:</b> Housing Authority of the City of Decatur      <b>PHA Code:</b> IN062  <b>PHA Plan for Fiscal Year Beginning:</b> (MM/YYYY): 07/2025  <b>The Five-Year Period of the Plan (i.e., 2019-2023):</b> 2025-2029  <b>Plan Submission Type</b> <input checked="" type="checkbox"/> 5-Year Plan Submission <input type="checkbox"/> Revised 5-Year Plan 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 on the PHA policies contained in the standard Annual Plan, but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and the main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official websites. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.</p> <p><b>How the public can access this PHA Plan:</b> The Decatur Housing Authority (DHA) makes its proposed PHA Plan, Plan Elements, and all relevant information available for public review at its central office.. The full plan and any updates are also posted on DHA's managing housing authority's official website at <a href="https://fwha.org/">https://fwha.org/</a> to ensure broad accessibility. The public may call the DHA's managing housing authority's (FWHA) main office to request additional copies or information.</p> <p><input type="checkbox"/> PHA Consortia: (Check box if submitting a Joint PHA Plan and complete table below.)</p> <table border="1"> <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>	<b>Plan Elements. Required for all PHAs completing this form.</b>														
<b>B.1</b>	<p><b>Mission.</b> State the PHA's mission for serving the needs of low- income, very low- income, and extremely low- income families in the PHA's jurisdiction for the next five years.</p> <p>The Decatur Housing Authority's mission for the next five years is to sustain and continue providing Housing Choice Voucher (HCV) assistance to approximately 170 low-income, very low-income, and extremely low-income families within its jurisdiction. The primary goal is to maintain current service levels and ensure ongoing access to safe, decent, and affordable housing through the effective administration of the HCV program.</p>														
<b>B.2</b>	<p><b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low- income, very low-income, and extremely low-income families for the next five years.</p> <p>Over the next five years, the Decatur Housing Authority's primary goal is to continue providing Housing Choice Voucher (HCV) assistance to approximately 170 low-income, very low-income, and extremely low-income families. To achieve this, DHA will focus on maintaining a high voucher utilization rate, ensuring timely and accurate processing of annual and interim recertifications, and conducting ongoing landlord outreach to preserve and expand the pool of available units. These efforts will help ensure consistent access to safe, affordable housing for eligible households in the community.</p>														
<b>B.3</b>	<p><b>Progress Report.</b> Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p>Over the past five years, the Decatur Housing Authority has made steady progress in meeting the goals and objectives outlined in its previous 5-Year Plan. The primary goal—to maintain assistance for over 150 households through the Housing Choice Voucher (HCV) program—was successfully achieved. DHA maintained a high voucher utilization rate by promptly issuing vouchers as they turned over and ensuring timely completion of annual and interim recertifications. Additionally, DHA preserved strong partnerships with local landlords, which helped sustain a reliable inventory of rental units for voucher holders. These efforts collectively ensured continued access to safe, affordable housing for low-income, very low-income, and extremely low-income families in the community.</p>														

B.4	<p><b>Violence Against Women Act (VAWA) Goals.</b> Provide a statement of the PHA's goals, activities objectives, policies, or programs that will enable the PHA to serve the needs of child and adult victims of domestic violence, dating violence, sexual assault, or stalking.</p> <p><b>The Decatur Housing Authority is committed to supporting the safety and housing stability of child and adult victims of domestic violence, dating violence, sexual assault, or stalking. To meet this commitment, DHA implements the protections outlined in the Violence Against Women Act (VAWA) across its Housing Choice Voucher (HCV) program. These efforts include maintaining a VAWA policy that ensures victims are not denied housing assistance solely due to being victims of abuse; providing all applicants and participants with VAWA notices and rights at key program interactions; and offering emergency transfer options, when feasible, to help victims relocate to safer housing. DHA also collaborates with local service providers to connect survivors with supportive services and resources. Through these ongoing activities, DHA aims to provide a safe and supportive housing environment for individuals and families affected by violence.</b></p>
C.	<p><b>Other Document and/or Certification Requirements.</b></p>
C.1	<p><b>Significant Amendment or Modification.</b> Provide a statement on the criteria used for determining a significant amendment or modification to the 5-Year Plan.</p> <p><b>The Decatur Housing Authority considers a significant amendment or modification to the 5-Year Plan to be any substantial change in the agency's mission, goals, or policies that fundamentally alters the nature of its programs or the population served.</b></p>
C.2	<p><b>Resident Advisory Board (RAB) Comments.</b></p> <p>(a) Did the RAB(s) have comments to the 5-Year 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 5-Year PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p>
C.3	<p><b>Certification by State or Local Officials.</b></p> <p>Form HUD-50077-SL, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
C.4	<p><b>Required Submission for HUD FO Review.</b></p> <p>(a) Did the public challenge any elements of the Plan? Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>(b) If yes, include Challenged Elements.</p>
D.	<p><b>Affirmatively Furthering Fair Housing (AFFH).</b></p>
D.1	<p><b>Affirmatively Furthering Fair Housing. (Non-qualified PHAs are only required to complete this section on the Annual PHA Plan. All qualified PHAs must complete this section.)</b></p> <p><b>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.</b></p>

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

Public reporting burden for this information collection is estimated to average 1.64 hours per year per response or 8.2 hours per response every five years, 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:** IN062-Housing Authority of the City of Decatur form HUD-50075-5Y (Form ID - 3516) printed by Lindsey Griggs in HUD Secure Systems/Public Housing Portal at 07/01/2025 08:04AM EST

**Certification by State or Local  
Official of PHA Plans Consistency  
with the Consolidated Plan or  
State Consolidated Plan  
(All PHAs)**

**U.S. Department of Housing and Urban  
Development**  
Office of Public and Indian Housing  
OMB No. 2577-0226  
**Expires 09/30/2027**


**Certification by State or Local Official of PHA Plans  
Consistency with the Consolidated Plan or State Consolidated Plan**

I, Daniel L Rickord, the Mayor certify that the 5-Year PHA Plan for fiscal years 2025-2029 and/or Annual PHA Plan for fiscal year 2025 of the IN062 - Housing Authority of the City of Decatur is consistent with the Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair Housing Choice or Assessment of Fair Housing (AFH) as applicable to the City of Decatur pursuant to 24 CFR Part 91 and 24 CFR § 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or State Consolidated Plan.

The Decatur Housing Authority's 5-year PHA Plan is consistent with the State of Indiana's Consolidated Plan in its focus on addressing the housing needs of low-income, very low-income, and extremely low-income households. Both plans prioritize the preservation and expansion of affordable housing options and emphasize the importance of housing stability for vulnerable populations.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official:	<b>Daniel L Rickord</b>	Title:	<b>Mayor</b>
Signature:		Date:	<u>6/25/25</u>

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. This information is collected to ensure consistency with the consolidated plan or state consolidated plan.

Public reporting burden for this information collection is estimated to average 0.16 hours per year 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.

**Form identification:** *IN062-Housing Authority of the City of Decatur form HUD-50077-SL (Form ID - 4743) printed by Lindsey Griggs in HUD Secure Systems/Public Housing Portal at 06/23/2025 09:13AM EST*

**Civil Rights Certification  
(Qualified PHAs)**
**RECEIVED**
**MAY 19 2025**
**Fort Wayne  
Housing Authority**
**U.S. Department of Housing and Urban Development**
**Office of Public and Indian Housing**
**OMB Approval No. 2577-0226**
**Expires 03/31/2024**
**Civil Rights Certification  
Annual Certification and Board Resolution**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairperson or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year PHA Plan, hereinafter referred to as "the Plan", of which this document is a part, and make the following certification and agreements with the Department of Housing and Urban Development (HUD) for the fiscal year beginning 07/2025 in which the PHA receives assistance under 42 U.S.C. 1437f and/or 1437g in connection with the mission, goals, and objectives of the public housing agency and implementation thereof:*

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d-2000d—4), the Fair Housing Act (42 U.S.C. 3601-19), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), title II of the Americans with Disabilities Act (42 U.S.C. 12101 et seq.), and other applicable civil rights requirements and that it will affirmatively further fair housing in the administration of the program. In addition, if it administers a Housing Choice Voucher Program, the PHA certifies that it will administer the program in conformity with the Fair Housing Act, title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, title II of the Americans with Disabilities Act, and other applicable civil rights requirements, and that it will affirmatively further fair housing in the administration of the program. The PHA will affirmatively further fair housing, which means that it will take meaningful actions to further the goals identified in the Assessment of Fair Housing (AFH) conducted in accordance with the requirements of 24 CFR § 5.150 through 5.180, that it will take no action that is materially inconsistent with its obligation to affirmatively further fair housing, and that it will address fair housing issues and contributing factors in its programs, in accordance with 24 CFR § 903.7(o)(3). The PHA will fulfill the requirements at 24 CFR § 903.7(o) and 24 CFR § 903.15(d). Until such time as the PHA is required to submit an AFH, the PHA will fulfill the requirements at 24 CFR § 903.7(o) promulgated prior to August 17, 2015, which means that it examines its programs or proposed programs; identifies any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement; and maintains records reflecting these analyses and actions.

Housing Authority of the City of Decatur

IN062

PHA Name

PHA Number/HA Code

I hereby certify that all the statement above, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Executive Director: **MR George Guy**Name of Board Chairperson: **Jack Macklin**

Signature: Date: 5/19/25

Signature: Date: 5-14-25

Executive Director Signature:

Board Chairperson Signature:

The United States Department of Housing and Urban Development is authorized to collect 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. The information is collected to ensure that PHAs carry out applicable civil rights requirements.

Public reporting burden for this information collection is estimated to average 0.16 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.

**Form identification:** IN062-Housing Authority of the City of Decatur form HUD-50077-CR (Form ID - 3184) for CY 2025 printed by Lindsey Griggs in HUD Secure Systems/Public Housing Portal at 04/21/2025 01:25PM EST

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MAY 19 2025

Fort Wayne  
Housing Authority