



<p><b>B.</b></p>	<p><b>Plan Elements</b></p>
<p><b>B.1</b></p>	<p><b>Revision of Existing PHA Plan Elements.</b>                  (a) Have the following PHA Plan elements been revised by the PHA?</p> <p>Y N</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Statement of Housing Needs and Strategy for Addressing Housing Needs</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.</li> <li><input checked="" type="checkbox"/> <input type="checkbox"/> Financial Resources.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Rent Determination.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Operation and Management.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Grievance Procedures.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Homeownership Programs.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Community Service and Self-Sufficiency Programs.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Safety and Crime Prevention.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Pet Policy.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Asset Management.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Substantial Deviation.</li> <li><input checked="" type="checkbox"/> <input type="checkbox"/> Significant Amendment/Modification</li> </ul> <p>(b) If the PHA answered yes for any element, describe the revisions for each revised element(s):</p> <p><b>Financial Resources.</b>                  Revision due to needed financial document attached.</p> <p><b>Significant Amendment/Modification</b>                  Subject to approval by the U.S. Department of Housing and Urban Development (HUD), North Chicago Housing Authority (NCHA) plans to relinquish the Annual Contributions Contract (ACC) units to the Lake County Housing Authority (LCHA). These units include 471 Housing Choice Vouchers (HCV), 70 Veteran Affairs Supportive Housing (VASH), 5 Family Unification Program Vouchers (FUP) and the Family Self-Sufficiency Program (FSS) along with the corresponding Annual Budget Authority, Administrative Fees and supporting grant funds. LCHA intends to assume administrative responsibility for these units and programs, ensuring quality continued housing assistance to affected residents. LCHA's intent is to promote administrative efficiency, improve service delivery, and ensure the long-term sustainability of housing assistance for current and future participants.</p> <p>(c) The PHA must submit its Deconcentration Policy for Field Office review.</p>
<p><b>B.2</b></p>	<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> <ul style="list-style-type: none"> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Hope VI or Choice Neighborhoods.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Mixed Finance Modernization or Development.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Demolition and/or Disposition.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Designated Housing for Elderly and/or Disabled Families.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Tenant-Based Assistance.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Project-Based Rental Assistance or Project-Based Vouchers under RAD.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Occupancy by Over-Income Families.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Occupancy by Police Officers.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Non-Smoking Policies.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Project-Based Vouchers.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Units with Approved Vacancies for Modernization.</li> <li><input type="checkbox"/> <input checked="" type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).</li> </ul> <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>
<p><b>B.3</b></p>	<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 and Annual Plan.  <b>The PHA continues to follow all rules and updated regulations to follow the mission and goals of the agency.</b></p>
<p><b>B.4</b></p>	<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>The most recent HUD-approved 5-Year Action Plan was on 02/29/2024.</b></p>

<p><b>B.5</b></p>	<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>C.</b></p>	<p><b>Other Document and/or Certification Requirements.</b></p>
<p><b>C.1</b></p>	<p><b>Resident Advisory Board (RAB) Comments.</b>                  (a) Did the RAB(s) have comments to the PHA Plan?                  Y <input type="checkbox"/> N <input checked="" type="checkbox"/>                  (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>                  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>
<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>                  Form HUD-50077-ST-HCV-HP, <i>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.                  (a) Did the public challenge any elements of the Plan?                  Y <input type="checkbox"/> N <input checked="" type="checkbox"/>                  If yes, include Challenged Elements.</p>
<p><b>C.5</b></p>	<p><b>Troubled PHA.</b>                  (a) Does the PHA have any current Memorandum of Agreement, Performance Improvement Plan, or Recovery Plan in place?                  Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>                  (b) If yes, please describe: <b>The PHA is working closely with the agency's assigned HUD staff to ensure the status is changed to accommodate an upgraded status.</b></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 (AFFH).</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.</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 and Annual PHA Plan.

Public reporting burden for this information collection is estimated to average 7.52 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.

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