



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.

NAME OF JURISDICTION: CUMBERLAND COUNTY, NC

Consolidated Plan Time Period: JULY 1, 2010 THROUGH JUNE 30, 2015

GENERAL

Executive Summary

The Executive Summary is required. The Summary must include the objectives and outcomes identified in the plan and an evaluation of past performance.

3-5 Year Strategic Plan Executive Summary Response:

Background

The Consolidated Plan is intended to assist Cumberland County in developing a collaborative process to establish a unified vision for community development actions. The Plan enables the County to view its HUD programs, not as isolated tools to solve narrow problems, but rather as an invitation to embrace a comprehensive vision of housing and community development. The Consolidated Plan serves four separate, but integrated, functions:

- A planning document for the County that is developed with participation from the community's local government municipalities, public and private agencies, as well as the general public;
- An application for federal funds under HUD's entitlement grant programs:
 - Community Development Block Grant (CDBG),
 - Home Investment Partnership Act (HOME),
 - Emergency Shelter Grant (ESG), and
 - Housing Opportunities for Persons with AIDS (HOPWA);
- A strategic plan to be followed in carrying out housing and community development programs; and
- An annual action plan that provides a basis for assessing the County's performance.

Cumberland County is the recipient of entitlement funds from the Community Development Block Grant (CDBG) and Home Investment Partnership Act (HOME) programs. The Cumberland County Community Development Department (CCCD) is the lead agency responsible for compiling and implementing the Consolidated Plan for Cumberland County.

Methodology

The Consolidated planning process began in the late fall of 2009 and ran through early spring 2010. During this process, a review was conducted of the community's housing market and services/facilities currently available. CCCD staff also sought input from both public and private agencies as well as the general public to assist in determining priority needs in the

community. From these resources, CCCD staff established priority needs that will be addressed with the County’s entitlement funds.

As a result of information obtained from citizen and agency surveys, public meetings, and mandatory consultations with community agencies, CCCD identified the following priority needs:

Cumberland County Community Development Priority Needs
1. Affordable Housing
2. Employment Services/Job Training
3. Human Services (specifically health care and homeless services)
4. Services for the Disabled
5. Water & Sewer Improvements

To meet these needs, CCCD has established the following goals, and objectives to address the above priority needs during the next five years:

CONSOLIDATED PLAN GOALS / OBJECTIVES

Housing Needs	
Priority Need: Affordable Housing	
Goal 1: Increase the availability and accessibility of decent, safe, and affordable housing in Cumberland County.	Objective 1: To rehabilitate 125 owner-occupied units and 20 rental units from 2010 to 2015.
Goal 2: Increase the availability and accessibility of decent, safe, and affordable housing in Cumberland County.	Objective 2: Provide assistance to 75 low/moderate income citizens to become first-time home buyers from 2010 to 2015.
Goal 3: A County in which all rental housing is affordable and in standard condition.	Objective 3: Provide 125 additional standard rental units that are affordable to very low-and-income residents from 2010-2015.
Goal 4: Alleviate lead-based paint hazards in Cumberland County’s housing inventory.	Objective 4: Make available educational literature to at least 500 households that may be potentially affected by lead-based paint from 2010-2015.
Goal 5: To eliminate housing discrimination in Cumberland County.	Objective 5: Increase awareness of fair housing law for 15 providers serving minorities and special populations groups from 2010-2015.

Non-Housing Community Development Needs	
Priority Need: Employment Services / Job Training	
Goal 1: Improve self-sufficiency for Cumberland County residents by increasing the number of new private sector full time permanent jobs, available to, or taken by, low and moderate income persons.	Objective 1: Creation of 25 new full-time permanent jobs for low/moderate residents of Cumberland County from 2010-2015.
Non-Housing Community Development Needs	
Priority Need: Human Services (specifically health care and homeless services)	
Goal 1: Maximize use, coordination, and delivery of human services.	Objective 1: Work with human services agencies to maximize use, coordination and delivery of human services for 5000 residents, with a priority given to agencies providing health care services and services to the homeless from 2010-2015.
Homeless Needs	
Priority Need: Human Services (specifically health and homeless services)	
Goal 1: Increase available funding for local homeless service/housing providers Goal also addresses 10-Year Plan to End Homelessness Priority 3 (Identify additional funding sources for local programs).	Objective: Provide financial stability for local homeless initiatives in order to eliminate potential gaps in services by setting aside at least 25% of the Public Services annual allocation to create 10 beds in priority homeless categories from 2010 - 2015.
Goal 2: Provide housing options by creating transitional housing beds for the homeless (chronic and/or families). Goal also addresses 10-Year Plan to End Homelessness Priority 9 (Develop Additional Affordable Housing Options)	Objective 2: Provide 24 additional transitional housing units for homeless veteran households from 2010 -2015 to get them "off the street."
Special Populations Needs	
Priority Need: Services for the Disabled	
Goal 1: Increase supportive services and activities in Cumberland County for the disabled (mental and physical).	Objective 1: Provide funding to programs that will assist at a total of 100 disabled persons between 2010 and 2015.
Non-Housing Community Development Needs	
Priority Need: Water and Sewer Improvements	
Goal 1: To make public water and sewer facilities available to low to moderate income neighborhoods located within our participating jurisdiction.	Objective1: Make public water/sewer available to 3 low to moderate income neighborhoods from 2010-2015.

Strategic Plan

Mission: The goal of the strategic plan outlined for the 2010 through 2014 Program Years is to address the priority needs identified by implementing strategies to promote adequate and affordable housing, economic opportunity, access to services, and a suitable living environment free from discrimination.

MANAGING THE PROCESS

Consultation 91.200(b)

1. **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.**

Response:

The Community Development Department serves as the lead agency responsible for preparation and submission of the Consolidated Plan and will administer all programs covered in the Consolidated Plan.

2. **Identify agencies, groups, and organizations that participated in the process. This should reflect consultation requirements regarding the following:**

- **General §91.100 (a)(1) - Consult with public and private agencies that provide health services, social and fair housing services (including those focusing on services to children, elderly persons, persons with disabilities, persons with HIV/AIDS and their families, homeless persons) during the preparation of the plan.**
- **Homeless strategy §91.100 (a)(2) – Consult with public and private agencies that provide assisted housing, health services, and social services to determine what resources are available to address the needs of any persons that are chronically homeless.**
- **Lead lead-based paint hazards §91.100 (a) (3) – Consult with State or local health and child welfare agencies and examine existing data related to lead-based paint hazards and poisonings.**
- **Adjacent governments §91.100 (a) (4) -- Notify adjacent governments regarding priority non-housing community development needs.**
- **Metropolitan planning §91.100 (a)(5) -- Consult with adjacent units of general local government, including local government agencies with metropolitan-wide planning responsibilities, particularly for problems and solutions that go beyond a single jurisdiction, i.e. transportation, workforce development, economic development, etc.**
- **HOPWA §91.100 (b) -- Largest city in EMSA consult broadly to develop metropolitan-wide strategy for addressing needs of persons with HIV/AIDS and their families.**
- **Public housing §91.100 (c) -- Consult with the local public housing agency concerning public housing needs, planned programs, and activities.**

Response:

Consultation/Coordination

Cumberland County's 2010 Consolidated Plan was prepared by the Community Development Department through the solicitation and consultation with other agencies providing services in

the community. To the extent possible, the following steps were taken to solicit input from local agencies.

- **LOCAL JURISDICTIONS.** To assess the impact of needs and activities to be addressed in the Consolidated Plan, the Community Development Department consulted with all municipalities within its geographic area. The geographic area is comprised of the Towns of Eastover, Falcon, Godwin, Hope Mills, Linden, Spring Lake, Stedman, Wade and the unincorporated areas of the County. Letters outlining the consolidated planning process and requesting meetings were sent to each locality. Meetings were held with the municipal leader (or his/her designee) for each town within the geographic area.

Municipality	Consultation Meeting Date	Needs Discussed
Town of Eastover	March 4, 2010	<ul style="list-style-type: none"> ▪ Town will serve as referral source for housing repair and homeownership assistance ▪ Water & Sewer
Town of Falcon	March 3, 2010	<ul style="list-style-type: none"> ▪ Historic preservation ▪ Water/Sewer line improvements (identified as critical need) ▪ Streets and sidewalks improvements (identified as critical need) ▪ Health care services (identified as critical need) ▪ Crime prevention
Town of Godwin	February 17, 2010	<ul style="list-style-type: none"> ▪ Segment of housing along Highway 82 without drinkable water
Town of Hope Mills	February 9, 2010	<ul style="list-style-type: none"> ▪ Sewer installation for small "donut hole" areas without services ▪ Refacing of building in former downtown area ▪ Sidewalk and street improvements in certain blighted areas ▪ Cotton community (off Cameron Road) could benefit from revitalization of homes, streets ▪ Homeless services are handled thru local non-profit - Alms House ▪ Alms House is seeking funding for new facility to expand its services
Town of Linden	February 10, 2010	<ul style="list-style-type: none"> ▪ Transportation for elderly to attend doctor's appointments ▪ Water & Sewer ▪ Paving dirt roads to improve emergency vehicle access
Town of Spring Lake	February 5, 2010	<ul style="list-style-type: none"> ▪ Reimplementation of satellite offices for Dept of Social Services ▪ Funding for municipalities transit authority - estimated implementation 4/2010 ▪ Water/sewer extensions & streets/ sidewalks (identified as top priority) ▪ Demolition and removal of blighted/condemned property (houses and mobile homes) ▪ Façade program for commercial development downtown ▪ Splash pad for children ▪ Coordination of services for the homeless ▪ Developing loan pool for downtown area to spur development and job creation ▪ Recycling program
Town of Stedman	March 17, 2010	<ul style="list-style-type: none"> ▪ Housing renovations for owner-occupied units or landlords ▪ Homeownership assistance (down payment assistance interest subsidies) (identified as a critical need) ▪ Historic Preservation ▪ Water/sewer improvements (identified as a critical need) ▪ Streets and sidewalks (identified as a critical need) ▪ Neighborhood facilities for persons with special needs
Town of Wade	February 8, 2010	<ul style="list-style-type: none"> ▪ Installation of community wells to add to current water system ▪ Water/sewer lines on Snelling Street to tie into lines on Clara ▪ Street paving in area that has illegal dumping ▪ Have not had issue with homeless - however have noticed occasional person staying in community park ▪ Sharing of community resources on serving homeless

The City of Fayetteville is also an entitlement jurisdiction located within Cumberland County. As such, this agency is also required to conduct its own consolidated planning process regarding the needs within the city limits of Fayetteville.

- **PUBLIC HOUSING AUTHORITY.** Community Development staff met with the Fayetteville Metropolitan Housing Authority (FMHA) on February 16, 2010. FMHA staff assisted in verifying and updating information regarding its current housing stock and Section 8 Program as well as future plans. FMHA conducts its own 5-year plan that addresses the needs of the public housing authority – in particular upgrades of current facilities. Future plans include:
 - Replacing the community center building in the Old Wilmington Road community that was demolished as a part of a HOPE VI revitalization project;
 - Revitalization of the Grove View community will be included in the next 5 year plan;
 - Pursuing tax credit funding for future mixed use units.
- **Section 8 Vouchers** – Currently have approximately 1,600 vouchers, however will see reduction to approximately 1,500 due to funding reductions. There are currently 357 on waiting list – not accepting new applicants at this time. However, community will receive 20 additional Section 8 vouchers specifically for veterans.
- **Public Housing Units** – Currently have 1,045 units (24 units are completely Section 504 compliant). Number of public housing units will be reduced to 796 after HOPE VI revitalization. Waiting time for public housing units currently takes about 6-8 months.
- **Scattered Site Housing** – FMHA owns 124 scattered site housing units – these are not Section 8 voucher units. Must be current resident in good standing for a least 1 year before approved for scattered site housing. Rent is structured on a flat rate based on bedroom size. These residents are often good candidates for homeownership.
- **Homeless** – There is currently no emergency housing or a preference for the homeless. Homeless individuals are worked into the system just as other citizens needing housing. Obstacles to assisting homeless individuals include:
 - Failure to have proper identification documents and birth certificates in order to apply for housing;
 - Criminal history such as felonies or current drug abuse prohibit their entry (per HUD mandates);
 - Need for continued case management to help resolve issues that resulted in homelessness. Often those same issues lead to their eviction. All residents evicted are referred to Legal Aide for consultation.

Identified Needs:

- Funding for security deposits and utilities to assist applicants;
 - Additional affordable housing units;
 - Funding for legal representation to assist persons with felonies in obtaining affordable housing;
 - Funding for advocates to assist people with old criminal records looking to move into affordable housing.
- **DEPARTMENT OF SOCIAL SERVICES.** Community Development staff met with Cumberland County Department of Social Services (DSS) March 3, 2010. DSS staff expressed needs in the following areas:
 - Adult Services
 - Gap in services for customers that do not fit adult care home facility (40 to 60 years old)
 - Guardian issues for people who are incompetent

- Children Services
 - Currently there are 30-100 children about to age out of foster care. Need housing and supportive services around money management
 - Job skills/readiness training to equip youth with ability to pay for housing
 - Lack of parenting skills and general life skills are needed as well as housing
 - Childcare assistance currently has waiting list of at least 2,000 children. No homeless preference - priority of slots given to Work First parents (those seeking employment or employed full-time and child protective services (CPS) cases).
- Faith Team
 - Seeking agencies to serve as mentors to families
 - Funding resources to assist faith based organizations with building homeless facilities
- General – Services for mentally disabled adults that are falling through the cracks (i.e. do not qualify for Medicaid or Medicare).
- **HEALTH DEPARTMENT.** Community Development staff met with Cumberland County Health Department February 4, 2010. Health Department staff expressed needs in the following areas:
 - **Primary Care**
 - New patients are not being accepted due to lack of funding
 - Services for clients with chronic conditions
 - **Septic Failures & Contaminated Wells** - Since many areas outside the city limits of Fayetteville are without public sewer systems, inquiry regarding the number of failures netted the following results:
 - Septic failures/repairs requires – 454 over the past 26 months (See Appendix D for map of septic tank incidents)
 - Cumberland County is committed to ensuring that all residents have safe potable water. Towards that end, the County has established the Safe Water Task Force to address ground water issues and develop strategies for addressing those issues. The map at Appendix D illustrates households in the community with ground water issues. As a member of the Task Force, Community Development will provide both technical assistance and financial resources (as funding allows) to implement actions to address problem areas.
 - **Lead Based Paint Hazards** - Due to a high percentage of the County’s housing stock based on age having the potential of lead-based paint hazards, staff also inquired about the number of lead poisoning cases in small children. Health Department staff estimate that the number of cases of children reported with elevated blood levels total less than five (5) each year.
- **MENTAL HEALTH DEPARTMENT.** Community Development staff met with Cumberland County Local Management Entity (Mental Health Department) February 2, 2010. The following needs were expressed needs in the following areas:
 - Lack of services for children between the age of 16 and 21 who have aged out of the foster care system.
 - There are problems helping children transition out of foster care. Plenty of assistance while the consumer is foster care age, but no assistance once they “age out”. Those individuals are technical adults but still need guidance.
 - Shelters that can house children with mental illness.

- Decent safe housing for those with disabilities (both mental and physical).
- Transportation to take adults from home to services (i.e. appointments for mental health, substance abuse treatment group meetings, and other treatment)
- Medical assistance – funds to pay for lab work to determine if mental health medication levels are within limits and ensure medication is working correctly.
- Childcare/summer camps need staff training so that autistic children can participate. Services are limited for children in this category due to their mental disability.
- Transitional housing for single women and women and children
- Agencies that provide inpatient substance abuse treatment as “no show” rate is often high; particularly for substance Abuse Intensive Outpatient Treatment.¹

Noted Gaps in Services from 2009 Needs Assessment:

A Gaps and Needs Analysis was conducted in 2009 assessing mental health needs of the community – results are noted below:

Cumberland Service Needs Identified in Surveys & Forums ¹			
	Providers	Community-Stakeholders	Community Forums
General Services Needed	<ul style="list-style-type: none"> ▪ Youth Services ▪ Psychiatrists ▪ Crisis services ▪ Language services 	<ul style="list-style-type: none"> ▪ Substance abuse for youth ▪ Co-occurring Services ▪ Access to Interpreters for language barriers ▪ Child Psychiatrist ▪ Emergency services/ ER wait times too long 	<ul style="list-style-type: none"> ▪ Improve overall quality of provider services ▪ Provider training/Customer service ▪ Transportation ▪ Reduce wait times for services ▪ Consumer education
Developmental Disabilities	<ul style="list-style-type: none"> ▪ Day Activities ▪ Parental Training ▪ Respite ▪ CAP Services 	<ul style="list-style-type: none"> ▪ School-based Services ▪ Transportation 	<ul style="list-style-type: none"> ▪ Quality day programs ▪ Improve crisis services ▪ Expand education on available services & supports ▪ More CAP services ▪ Peer Support Services ▪ Employment training
Mental Health	<ul style="list-style-type: none"> ▪ Psychiatric/Medication ▪ More Psychiatrists ▪ Community-based Inpatient Psychiatric ▪ Clubhouse/Drop-in Center ▪ Licensed Therapists ▪ Partial hospitalization 	<ul style="list-style-type: none"> ▪ Mobile Crisis ▪ State funded Substance Abuse services ▪ Psychiatric Care 	<ul style="list-style-type: none"> ▪ Medication ▪ Support to achieve Independence ▪ Affordable housing ▪ Employment opportunities
Substance Abuse	<ul style="list-style-type: none"> ▪ Medically monitored Community Residential Treatment ▪ More Detox/Inpatient Residential Treatment for women ▪ Comprehensive SAIOP 	<ul style="list-style-type: none"> ▪ Detox ▪ Residential Treatment ▪ Day Treatment 	<ul style="list-style-type: none"> ▪ Limited services for very young children at risk of substance abuse ▪ More qualified service providers
Child & Adolescent	<ul style="list-style-type: none"> ▪ Partial Hospitalization ▪ School-based services ▪ Psychiatric/Medication ▪ Substance Abuse ▪ PRTF Residential ▪ Sex offender Treatment ▪ MST 	<ul style="list-style-type: none"> ▪ School-based services ▪ Psychiatric Care ▪ Inpatient services 	<ul style="list-style-type: none"> ▪ Limited services for very young children ▪ Improve communication between PRTF’s and school system ▪ Family involvement in treatment team meetings

¹ Excerpt from Cumberland local Management Entity Community Assessment of Service Needs, Service Gaps and Provider Capacity – March 2009.)

- **PLANNING DEPARTMENT.** Community Development staff met with the Cumberland County Planning Department February 12, 2010. Planning staff expressed needs in the following areas:
 - Drainage issues in the area east of the Cape Fear River
 - The Town of Stedman’s main canal is blocked

Planning Department currently administrators transportation program to assist rural elderly residents with transportation to medical appointments and shopping trips. CD and Planning staff will further discuss possibility of partnership to fund transportation needs for homeless, disabled, and elderly citizens.

- **WORKFORCE DEVELOPMENT.** Community Development staff met with the Cumberland County Workforce Development Department March 5, 2010. Staff discussed the following assistance offered by Workforce Development:
 - Employment training
 - Rent assistance
 - Transportation (travel reimbursement to attend training, etc.)
 - Funds for tuition, books, supplies, permits, licenses, or equipment necessary for training program
 - Program length is based on each applicants needs (no maximum time limit)

Agency does not collect data on the number of homeless individuals that come through its program. However, would be willing to consider future ways that it could partner with CCCD to better serve the needs of Cumberland County residents.

- **OTHER AGENCIES, GROUPS, AND ORGANIZATIONS.** Community Development staff developed a survey to be distributed to local non-profit groups and agencies. The purpose of the survey was two-fold. It served as a means of identifying the services that are currently available in the community as well as the specific needs of the community. Letters outlining the consolidated planning process as well as the survey were sent to the following agencies in the community:

Special Population Groups	Cumberland County Departments
<ul style="list-style-type: none"> • NAACP • Hispanic Latino Center • Fayetteville Cumberland County Advisory Council (for persons with disabilities) • The ARC of Cumberland County • Catholic Social Ministries • Consumer Credit Counseling • Cumberland County Association for Indian People • Cumberland County Coordinating Council on Older Adults • Cumberland County Veterans Services • NC Independent Living Services • NC Indian Housing Authority • Fayetteville/Cumberland County • Continuum of Care Planning Council 	<ul style="list-style-type: none"> Animal Services Board of Elections Central Maintenance Clerk of Court Coliseum Complex Cooperative Extension County Management Day Reporting Center Emergency Services Engineering Finance Health Human Resources IS Technology Legal Library System Mail Management Maintenance Mental Health Parks & Recreation Planning & Inspections Pre-trial Release Print Shop Public Information Public Utility Register of Deeds Sheriff’s Department Social Services Soil & Water Conservation Solid Waste Management Tax Administration Veterans Services Workforce Development

Interagency Network of Cumberland County	
· B.I.G. 8 Ministries	· FTCC
· Better Health	· KISS 107.7
· Better Opportunity for Single Soldiers	· Legal Aid
· Boys and Girls Club	· Mt Olive Missionary Baptist Church
· Bragg N' Barn	· Mt. Sinai Baptist Church
· Cape Fear Regional Bureau for Community Action	· Mt. Zion AME Church
· Carolina Treatment Center	· Myrover Reese
· Catholic Social Services	· NABVETS
· CC Care Center	· Northwood Temple
· CC Communicare	· Operation Inasmuch
· CC Sheriff's Office	· Outreach Ministries New Beginnings
· CC Workforce Development	· Parks Chapel
· City Rescue Mission	· Prosperity Properties
· Continuous Flow Center	· Rape Crisis Center
· Cumberland County Community Action	· Save the Babies House of Refuge
· Cumberland County Schools	· Simon Temple AMEZ
· Department of Social Services	· The Salvation Army
· Fayetteville Urban Ministries	· United Way
	· Valor Explosion

Citizen Participation 91.200 (b)

3. Based on the jurisdiction's current citizen participation plan, provide a summary of the citizen participation process used in the development of the consolidated plan. Include a description of actions taken to encourage participation of all its residents, including the following:

- a. low- and moderate-income residents where housing and community development funds may be spent;**
- b. minorities and non-English speaking persons, as well as persons with disabilities;**
- c. local and regional institutions and other organizations (including businesses, developers, community and faith-based organizations);**
- d. residents of public and assisted housing developments and recipients of tenant- based assistance;**
- e. residents of targeted revitalization areas.**

Response:

In accordance with its Citizen Participation Plan, all citizens were afforded the opportunity to participate in the planning process the Consolidated Plan and Annual Action Plan. Efforts used to ensure citizen participation included hosting several public meetings, a public hearing, and distributed surveys throughout Cumberland County to solicit input from the citizens to find out the needs of the community. Refer to Appendix G for a copy of Community Development's Citizen Participation Plan.

Public Meetings. Community Development conducted four public meetings during the month of January (2010) to inform the citizens about the five-year Consolidated Plan and to solicit input from the citizens. In order to ensure that all areas of the County had an opportunity and access to attend the public meetings, locations were selected from various sections of the County. Public Meetings were held at the following locations:

- Hope Mills Community Center January 19, 2010
- Pine Forest Recreation Center January 21, 2010

- Spring Lake Community Center January 26, 2010
- Eastover Recreation Center January 28, 2010

See Appendix G for results of public meetings.

Surveys.

- Citizen Surveys: As a means of obtaining citizen input on community priority needs, a citizen survey was developed. The survey was available at various venues during the survey period January 15 through February 15, 2010. While the survey document could not possibly reach all citizens, the distribution points were selected as a means of collecting a representative sample from the community. A total of 2,357 surveys were distributed. See Appendix E for a copy of the survey document, list of survey distribution methods, and survey results.
- Agency Surveys: A separate survey document was used to solicit input from community agencies on priority needs. This survey document was also available from January 15 through February 15, 2010. See Appendix E for a copy of the survey document and survey results.

4. Provide a description of the process used to allow citizens to review and submit comments on the proposed consolidated plan, including how the plan (or a summary of the plan) was published for review; the dates, times and locations of a public hearing, or hearings; when and how notice was provided to citizens of the hearing(s); the dates of the 30 day citizen comment period, and if technical assistance was provided to groups developing proposals for funding assistance under the consolidated plan and how this assistance was provided.

Response:

Request for Proposals (RFP).

To identify viable projects that will be implemented to meet needs identified during the consolidated planning process, Community Development solicited applications for its Affordable Housing and Public Services Programs. During the RFP, interested applicants were provided technical assistance on a one-on-one basis, if requested. A total of four applications were received for the Affordable Housing Program – two applicants were conditional selected for funding. A total of four applications were received for the Public Services Program – two applicants were selected for funding. See Appendix F for a copy of the RFP notice.

Public Review Period and Public Hearing.

A draft version of the Consolidated Plan was available for a 30-day review period beginning April 9, 2010 and ending May 8, 2010. During this period, the document was available for review and comment at various sites throughout the County. A Public Hearing before the Board of County Commissioners was held on April 19, 2010 at 6:45 pm in the Commissioners Meeting Room, at the County Courthouse, 117 Dick Street.

5. Provide a summary of citizen comments or views received on the plan and explain any comments not accepted and reasons why these comments were not accepted.

Response:

There were no speakers at the Public Hearing nor were there any comments received during the public period.

HOUSING AND HOMELESS NEEDS

Housing Needs 91.205

**If using the CPMP Tool: Complete and submit the Needs /Housing Table*

- 6. In this narrative, 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, victims of domestic violence, 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) and substandard conditions being experienced by extremely low-income, low-income, moderate-income, and middle-income renters and owners compare to the jurisdiction as a whole. The jurisdiction must define the terms "standard condition" and "substandard condition but suitable for rehabilitation."*

Response: As per Cumberland County Code Article IV Minimum Housing Code (see Appendix I) a substandard unit is defined as any condition existing in any housing or structure which does not meet the standards of fitness of this code. Therefore, CCCD defines "standard condition" to be any housing unit that meets the conditions for a housing unit as set forth in the Cumberland County Minimum Housing Ordinance. "Substandard condition but suitable for rehabilitation" is defined to mean any housing unit that fails to meet the minimum housing standard but retains the structural integrity to permit it to meet the minimum housing standards once the needed or necessary repairs have been made.

Using CHAS Tables, Cumberland County is able to estimate the housing needs of extremely low, low and moderate-income households. CHAS tables are provided by HUD and are based on the 2000 Census. HUD has determined that certain criteria place a household in need. These criteria include cost burden (paying more than 30% or more than 50% of gross household income for housing costs); occupying a substandard dwelling unit (lacking complete plumbing or kitchen facilities); or, being overcrowded (having more than one person per room). This data source is the most current information available on which to base the five-year housing needs assessment for the County outside of the City.

According to the 2000 Census 167,456 County residents (outside of Fayetteville) lived in 58,992 households. The remaining 14,644 residents were living in group quarters. Of the 58,992 households, 37,457 were owner households and the remaining 21,535 were renter households. In other words, owners represented 63% of all households and renters comprised the remaining 37%.

Conclusions

Based on the data and analysis included in this section of the Consolidated Plan, the following conclusions relative to housing need in Cumberland County (outside of Fayetteville) for all household types, income groups and racial groups can be made:

- Extremely low-income households are the most vulnerable for becoming homeless, regardless of household type or income group. In 2000, there were 2,865 renter households and 2,158 owner households in this income category. These 5,023 households represented 9% of all households in the County with incomes of less than \$12,210 for a family of four.

- The most frequent housing problem experienced by all households with housing problems was cost burden. This was indicated by similar rates for “any” housing problems and for cost burden in several income groups for most household types.
- For renters, the most common problem of cost burden could be resolved with rent subsidies. Programs like Section 8 require a household to pay only 30% of the fair market rate rent assessed for a specified unit size. Based on the housing needs assessment for the County, rent subsidies (in one form or another) are needed for approximately 3,441 renter households with incomes between 0-<50% of the MFI. Another 1,513 rental subsidies are needed for low-income households with incomes between 50-<80% of the MFI.
- For owners, housing problems associated with substandard and/or overcrowded units can be addressed with rehabilitation activities. However, according to Table 1 (HUD Table 1-C), in nearly all income categories the rate of “any housing problem” is identical or nearly identical to the rate of cost burden. This leads to the assumption that the primary housing problem for most owners is cost burden. (The exception to this would be large families for whom overcrowding is the greatest problem.) From the County’s perspective, mortgage assistance payments are not possible but rehabilitation activities that focus on making a housing unit more energy-efficient, and thereby reducing monthly utility costs, may be more appropriate. Based on Table 2-1, approximately 3,213 households with incomes between 0-<50% of the MFI could benefit from such activities. Another 2,683 low-income households with incomes between 50-<80% of the MFI could also benefit.
- Extremely low income Hispanic family renters reported a disproportionately higher rate of housing problems at 82%, which is twelve percentage points higher than the rate of housing problems experienced by all family renter households in this same income category (70%). “All other” very low-income Hispanic households also had a disproportionate housing need (88%) when compared to the same household type and income group in the County (77%).
- All extremely low-income Hispanic household types were disproportionately impacted with housing problems when compared to all other households in the County. All very low-income elderly households and 94% of family households were impacted compared to 43% and 79%, respectively, for the County. Among low-income homeowners, the elderly and all other household types were disproportionately impacted at 50% and 100%, respectively, compared to 34% and 57%, respectively, for the County.
- Among black non-Hispanic renters, 70% of very low-income family households had housing problems compared to 58% for the County. For low income renters, 48% of black non-Hispanic families and 43% of all other non-Hispanic households had housing problems compared to 58% and 33%, respectively, for the County.
- Among black non-Hispanic homeowners, only low income households were disproportionately affected (45%) when compared to the same household and income type in the County (34%).
- Homeless housing needs were reported by many of the affordable housing and supportive service agencies. The most often cited housing need was a resolution to the ineligibility of persons with criminal records who apply for public housing. Without the possibility of living in public housing, these individuals have no place but the streets and homeless shelters to turn to for housing.
- Advocates for the disabled reported a need for decent and affordable rental units in a secure environment for their vulnerable clients. They also cited the desperate need for these units to

be located in desirable neighborhoods along public transportation routes so their clients could depend on daily transportation to work.

The following sections describe in greater detail the degree to which each household type in each income group experiences housing problems and cost burden in Cumberland County outside of Fayetteville.

Categories of Persons Affected

Table 1C categorizes families in need as follows:

- Extremely low income (0% to 30% of median family income)
- Very low income (31% to 50% of median family income), and
- Low income (51% to 80% of median family income)

Table 1C also provides a summary of the **number** of households in each income category by tenure and household type, and the **percent** of such households that had a housing problem. The **needs** of various households, by household type within each income category, are also described. The extent to which the households within each group are cost burdened and extremely cost burdened, and/or living in substandard housing, was examined. Also, the extent to which such problems impact minority households was reviewed.

**Table 1
Housing Needs of All Households (HUD Table 1C)
(Cumberland County Outside of Fayetteville)**

Income Category by Housing Problem	Renters					Owners					Total Households
	Elderly	Small Families	Large Families	All Others	Total Renters	Elderly	Small Families	Large Families	All Others	Total Owners	
0 - 30% of MFI	409	1,497	161	798	2,865	812	706	228	412	2,158	5,023
% with Any Housing Problem	61%	68%	83%	60%	66%	66%	76%	83%	72%	72%	69%
% Cost Burdened	60%	66%	78%	59%	64%	66%	75%	75%	71%	71%	67%
% Extremely Cost Burdened	50%	57%	63%	49%	54%	52%	65%	69%	57%	59%	56%
>30 - 50% of MFI	202	1,642	312	663	2,819	929	962	238	497	2,626	5,445
% with Any Housing Problem	48%	60%	49%	78%	62%	43%	75%	96%	70%	64%	63%
% Cost Burdened	43%	56%	32%	77%	57%	43%	74%	88%	70%	64%	60%
% Extremely Cost Burdened	27%	14%	14%	28%	18%	23%	50%	49%	58%	42%	30%
>50 - 80% of MFI	257	3,348	938	1,058	5,601	1,067	2,551	698	652	4,968	10,569
% with Any Housing Problem	25%	37%	36%	33%	36%	34%	64%	70%	57%	57%	46%
% Cost Burdened	21%	29%	18%	30%	27%	33%	61%	60%	56%	54%	40%
% Extremely Cost Burdened	12%	3%	0%	4%	3%	13%	17%	8%	26%	16%	9%
>80% of MFI	289	5,789	1,436	2,049	9,563	3,624	18,020	2,940	3,121	27,705	37,268
% with Any Housing Problem	1%	5%	24%	8%	8%	10%	13%	25%	25%	15%	13%
% Cost Burdened	1%	2%	2%	4%	2%	10%	12%	13%	24%	13%	10%
% Extremely Cost Burdened	0%	0%	0%	0%	0%	1%	1%	1%	3%	2%	1%
Total Households	1,157	12,276	2,847	4,568	20,848	6,432	22,239	4,104	4,682	37,457	58,305
% with Any Housing Problem	36%	29%	34%	33%	31%	26%	23%	40%	38%	27%	29%
% Cost Burdened	34%	24%	15%	30%	25%	26%	22%	29%	37%	25%	25%
% Extremely Cost Burdened	25%	10%	5%	14%	11%	13%	7%	9%	17%	10%	10%

Source: HUD CHAS Table 1C

Renter Households

According to the HUD CHAS data, renter households in Cumberland County outside of Fayetteville numbered 20,848 in 2000. Of these, 54% had incomes up to 80% of the MFI. Among all lower income renter households, those with incomes between >50-80% of the MFI were the largest group at 5,601. Among household types, small families were the most numerous (68%).

Extremely Low Income (0-30% of MFI)

Extremely low income households were the second-largest category of renters, accounting for 25% of renters with incomes up to 80% of the MFI. Small families were the largest sub-category and accounted for 52% of this income group, while elderly households accounted for

14%. Large families were the smallest subcategory at 6%. All other household types comprised 28% of all extremely low income renter households.

Overall, 66% of these households reported housing problems. The occurrence of cost burden was slightly lower at 64%, and extreme cost burden was reported by 54% of all extremely low income renter households.

Housing problems reported by renters in this income group were high, ranging from 83% among large families to 60% among all other household types. Similarly, households in this income group reported high rates of cost burden where renters were paying more than 30% of their income toward housing costs. Cost-burdened households ranged from 78% among large families to 59% among all other household types. The rates of households experiencing extreme cost burden were highest among large families at 63% and lowest among all other household types at 49%.

In summary, large families were the smallest household type (by number) among extremely low income renters but experienced the highest rates of housing problems and cost burden. However, all household types in this income group have significant housing problems with high rates of cost burden and extreme cost burden. Typically, rental assistance is the greatest need among these households, as well as housing rehabilitation of substandard units.

Very Low Income (>30-50% of MFI)

Very low income households accounted for 25% of all lower income renter households and were the smallest income group. Elderly households represented 7% of this income group, large families represented 11%, and all other household types accounted for 24%. Small families were the largest group with 58%.

As a group, these households experienced housing problems at a rate of 62%. Cost burden rates were significantly lower than among extremely low income households: 57% of very low income renter households paid 30% or more of their income on housing costs, while 18% paid 50% or more.

Housing problems reported among the household types within this income group were also lower than among extremely low income renters. The rate of housing problems ranged from 48% among elderly households up to 78% among all other household types. In all categories of housing problems and cost burden, all other household types were the most severely impacted and had the highest rates in this income group. In summary, large families were the smallest household type (by number) among extremely low income renters but experienced the highest rates of housing problems and cost burden. However, all household types in this income group have significant housing problems with high rates of cost burden and extreme cost burden.

Typically, rental assistance is the greatest need among these households, as well as housing rehabilitation of substandard units.

Low Income (>50-80% of MFI)

As the income level rises among renter households, the degree of housing problems and cost burden decrease but at varying rates among the various household types. Low income renters account for 50% of all lower income renters but have lower rates of housing needs than other renters. Of all low income renter households in the County outside of the City, 36% experienced some type of housing problem, 27% experienced cost burden and only 3% of these households were extremely cost burdened.

Housing problems ranged from 25% among elderly households and small families to a high of 37% among small families. Cost burden continued to decline among households in this income group from the higher rates noted in extremely low income and very income renter households. Rates ranged from 18% for large families to a high of 30% for all other household types.

Extreme cost burden remained a problem for some groups, though, ranging from 0% among large families to a high of 12% among elderly households. In summary, housing rehabilitation and rental assistance appear to be significant needs for low income households, but at a lower rate than among extremely low and very low income renter households in Cumberland County outside of Fayetteville.

Owners

According to the HUD CHAS data, owner households of any type and income level numbered 37,457 in Cumberland County outside of Fayetteville in 2000. Of these, 9,752 households with incomes up to 80% of the MFI and classified as lower income. This represented 26% of all owner households. Lower income renters outnumbered lower homeowners in the County outside of the City by 14%.

Extremely Low Income (0-30% of MFI)

Extremely low income homeowners were the smallest group of homeowners and accounted for 22% of all lower income owner households. Overall, this income group experienced the greatest degree of housing problems and cost burden than both owner and renter households of higher income groups. Seventy-two percent (72%) of extremely low income owner households had housing problems of one type or another; 71% experienced cost burden; and, another 59% were extremely cost burdened.

Large family households experienced the highest rate of housing problems (83%) even though they constituted the smallest household type (by number) in this income group. Small families follow with 76% and all other household types with 72%. Elderly households had the lowest rate at 66%.

The rate of cost burden among this income group was also quite severe. Rates of cost burden ranged from 75% among small families and large families to a low of 66% for elderly households.

Extreme cost burden for owners in this income group was also very severe with 69% of all large families impacted as well as 52% of all elderly households affected. In summary, the high rates of cost burden on these households will impact their ability to perform routine as well as major maintenance and repairs on their housing units.

Housing rehabilitation funding could assist with the repair and upgrade work, but would not impact the degree of cost burden.

Very Low Income (>30-50% of MFI)

Very low income homeowners accounted for 27% of all lower income homeowners. Overall, this income group was only slightly better off financially than extremely low income homeowners. Housing problems were reported by 64% of all owners. Cost burden was a problem for 64% of owners, while 42% were extremely cost burdened. Housing problems were greatest among large families (96%) and lowest among the elderly (43%). Cost burden was also greatest among large families (88%) and lowest among the elderly (43%). Extreme cost burden ranged from 23% among the elderly up to 58% for all other household types.

Similar to extremely low income homeowners, housing rehabilitation for these households would be beneficial.

Low Income (>50-80%)

Low income owners accounted for 51% of all lower income owners in the County outside of the City, and comprised the largest income category of homeowners. Rates of housing problems and cost burden were lower in this group but still significant. Fifty-seven percent (57%) of the households reported housing problems, 54% were cost burdened and 16% were extremely cost burdened.

Housing problems ranged from 34% for elderly owners up to 70% for large families. The degree of cost burden ranged from 33% for elderly owners up to 61% for small families. The degree of extreme cost burden ranged from a low of 8% among large families to a high of 26% among all other household types.

Similar to other lower income homeowners, housing rehabilitation for these households would be beneficial.

Supportive housing is defined as living units that provide a planned services component with access to a range of services identified as necessary for the residents to achieve personal goals.

In examining supportive housing for persons with special needs, Cumberland County has considered the needs of the elderly, persons with disabilities (including mental, physical and developmental), alcohol and substance abusers and persons with HIV/AIDS. Because it is not always possible to determine the number of people who have supportive housing needs, the Consolidated Plan uses standards recommended by national agencies to determine the number of persons with supportive housing needs. A discussion of the housing needs for these sub-populations follows.

Elderly and Frail Elderly Persons

A frail elderly person is defined as a person who has one or more limitations of activities of daily living (ADLs) and is a person who may need assistance. Elderly persons may need housing assistance for two reasons – financial and supportive. Supportive housing is needed when an elderly person is both frail and low income, since the housing assistance offers services to compensate for the frailty in addition to financial assistance. By this definition, only the frail elderly require supportive housing.

Since 2000, the number of citizens over the age of 65 in Cumberland County has increased from 20,395 to 28,140 according to the 2006 – 2008 Census Estimates, an increase of 38%. Elderly households represent 20.2% of all households. In 2000 there were 7,164 elderly households in Cumberland County, of which 4,384 households, or 61.2%, were low-income. The table below provides an overview of renter and owner elderly households.

Elderly and Elderly Low-Income Households (2009)¹					
	All Households			Low-Income Households	
	Total	Elderly	Percent of Total	Elderly	Percent Low-Income
Renters	48,920	3,585	7.3%	1,990	55.5%
Owners	68,595	20,240	29.5%	3,600	17.8%
Total	117,515	23,825	20.2%	5,590	23.5%

The majority of elderly renter-occupied households are low-income. Of the 20,240 elderly owner-occupied housing, 3,600 (or 17.8%) are low-income and 55.5% or about two-thirds of renters are low-income.

The 2008 Census Estimates do not report on disabilities, the 2000 Census reports that of the 28,140 elderly individuals living within Cumberland County:

- 11,266 reported that they had a disability.
- 1,230 (24%) of those elderly with a disability reported that they had a self-care disability that limited their ability to dress, bathe, or get around inside their home without assistance.
- 2,344 (46%) of the elderly with a disability reported that their disability limited their ability to go outside their home alone to shop or visit a doctor's office.
- 1,261 (13%) of all elderly persons were living below the poverty level; 866 (17%) of all elderly persons with a disability had income levels below poverty.

Persons with Disabilities

Persons with mental illness, disabilities and substance abuse problems need an array of services. Their housing requires a design that ensures residents maximum independence in the least restrictive setting, including independent single or shared living quarters in communities, with or without onsite support. Options include:

- Living with family or friends with adequate support and/or respite services
- Small, home-like facilities in local communities close to families and friends, with the goal of moving to a less structured living arrangement when clinically appropriate

Residential placements need to provide the equipment and supplies necessary to assist in successful, long-term housing stability. Admission to state or private hospitals, mental retardation centers, state schools or alcohol and drug abuse treatment centers must not be considered permanent or long-term residential options.

The 2000 Census reported on non-institutionalized disabled persons, age five and over. The enumeration excludes institutionalized disabled persons, which consists of persons under formally authorized, supervised care or custody in institutions. The Census specifies that a disability is a long-lasting physical, mental, or emotional condition that can make it difficult for a person to do activities such as walking, climbing stairs, dressing, bathing, learning, or remembering. This condition can also impede a person from being able to go outside the home alone or to work at a job or business.

¹ *Comprehensive Housing Affordability (CHAS) Data Report, 2009*, U.S. Department of Housing and Urban Development, www.huduser.org.

- The 2000 Census reported that there were 139,497 non-institutionalized persons age 5 and over in Cumberland County outside of Fayetteville. Of these, 29,320 (21%) reported a disability.
- There were 10,127 working age persons between the ages of 16 to 64 with a disability who were unemployed.
- 4,742 (16%) of the 52,909 disabled persons were living below poverty.

The disabled population in the County can be divided into three categories: mentally disabled, developmentally disabled, and physically disabled.

Mentally Ill

Those individuals experiencing severe and persistent mental illness are often financially impoverished due to the long-term debilitating nature of the illness. The majority of these individuals receive their sole source of income from financial assistance programs—Social Security Disability Insurance or Social Security Income. The housing needs for this population are similar to other low-income individuals. However, because of this limited income, many of these individuals may live in either unsafe or substandard housing. The citizens need case management, support services and outpatient treatment services to monitor and treat their mental illness. Facilities that provide behavioral and/or psychiatric care include the following:²

- Cumberland County Mental Health Center
- Alternative Care Treatment Systems, Inc.
- Envisions of Life, LLC
- Peterkin & Associates, Inc.

Severe mental illness includes the diagnoses of psychoses and major affective disorders such as bipolar and major depression. The condition must be chronic (i.e. existing for at least one year) to meet the HUD definition for a disability.

The 2000 Census reported on the non-institutionalized population with a mental disability. The Census defines mental disability as an emotional condition that makes it difficult to learn, remember, or concentrate.

- There were 7,111 non-institutionalized persons age 5 and over with a mental disability, which is equivalent to 5.1% of the 139,497 non-institutionalized persons age 5 and over in the County outside of the City.
- 1,698 (24%) of persons with mental disabilities were children between the ages of 5 and 15.
- 4,015 (56%) were working-age adults between the ages of 16 and 64.
- 1,398 (20%) were elderly individuals age 65 and over.

Developmentally Disabled

Housing for the disabled must include a variety of options to meet the unique needs of persons with diverse types of disabilities. Services must be provided by area programs or contracted privately, including group home placements, intermediate care facilities, supported living programs, supported employment, sheltered workshops, home ownership and rental subsidy.

² Extended Care Information Network (www.extendedcare.com)

Facilities in Cumberland County that provide housing and services for the Developmentally Disabled include the following:³

- Cumberland County Mental Health Local Management Entity - provides comprehensive treatment and case management for county residents.
- Cumberland County Health Department - works to maintain the health of county residents through various programs and clinics.
- Wade Family Medical Center - Provides family practice medical services. Fees based on family income, according to Department of Health and Human Services guidelines.
- Cape Fear Valley Health System - provides general medical care, emergency medical, chemotherapy and other health services.
- Better Health of Cumberland County - Provides assistance to low income individuals with health related emergencies. Services include a direct aid program which provides financial assistance for life-sustaining prescription drugs, medical appliances, vision exams and eyeglasses, supplies and transportation to medical centers and other medical services.

Alcohol and Substance Abusers

The majority of people who suffer from any form of alcohol or substance abuse maintain jobs and homes at the beginning stages of their problem. However, as the problem progresses, the ability to maintain a well-functioning lifestyle diminishes. This problem touches every income and racial group, but is found to be most prevalent among the lowest income groups. Preventive programs incorporated into housing services provided to low-income persons are necessary to address this problem.

The National Institute of Alcohol Abuse and Alcoholism estimates the number of men with drinking problems at 14% to 16%, and the number of women with similar problems at 6%. No similar statistics exist for abuse of other drugs. However, the National Institute of Alcohol Abuse and Alcoholism estimates that one-third or more of the clients in publicly funded residential group programs are homeless most of the year before entering treatment. Organizations listed in the table below provide services for Cumberland County residents who struggle with these addictions.

Drug Addiction/Recovery	
Hope Harbor Christian Mission	Recovering substance abuse - men only
Myrover Reese Fellowship Homes Inc.	A residential home for males who are alcoholics or chemically dependent.
The Oxford House - Elder	shared living for substance abusers for men.
The Oxford House - Haymount	shared living for substance abusers for men.
Stedman Recovery House	Offers emergency shelter and food assistance
The Oxford House - Sandelewood	shared living for substance abusers for men.
The Oxford House - Stedman	shared living for substance abusers for men.
The Oxford House - Lyon Road	shared living for substance abusers for women.
Roxie Avenue Center	Crisis Services / Detox
Cape Fear Intergroup Association	Alcoholics Anonymous
Cumberland County Local Management Entity (Mental Health) sponsored groups: Central Group AFG Courageous Steppers (ALATEEN) Helping Hands	AL-ANON / ALATEEN

³ Cumberland County Department on Aging, “Elder Care Guide 2002,” (n.d.) and Extended Care Information Network (www.extendedcare.com)

Hope Mills AFG New Beginnings You Are Not Alone AFG Serenity Seekers AFG New Beginnings AFG	
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Persons with HIV/AIDS

According to the most recent quarterly update of the North Carolina HIV/STD Surveillance Report, Cumberland County had 73 reported cases of HIV disease in 2009, which represents 4% (1,769) of all the cases reported in North Carolina. With 50 cases reported in 2004, Cumberland County showed a marked decrease in the number of AIDS cases—down from 84 reported cases in 2008 and 51 reported cases in 2007. The following are health institutions that provide services to residents with HIV/AIDS:

Reported Cases of HIV/AIDS in Cumberland County⁴		
Year	HIV	AIDS
2007	108	51
2008	167	84
2009	73	50

Case Management Services

Better Home Health Care, Inc.	Borderbelt AIDS Resources Team (BART)
B.R.O.N. Community Development Corp., Inc.	Cape Fear Regional Bureau for Community Action
Cape Fear Valley Medical Center	Carolina Eastern Health Services, Inc.
Community Alternative Housing, Inc	Community Home Care & Hospice
Home Caregivers	Migrant Benevolent Association
Partners In Health Management of Cumberland County, Inc.	Reaching Out to Cultures and Communities (R.O.C.C.), Inc.
Tri-County Community Health Center	Trust The Process, Inc.

While prevention, medical and support services are available to people with HIV/AIDS, there is a greater need for permanent supportive housing. Other types of housing assistance needed include rental assistance and transitional supportive housing for patients leaving institutions of physical health or incarceration.

The housing needs of people living with HIV and AIDS are diverse. Housing programs targeting the population need to be flexible enough to address a wide range of needs and problems. Programs should focus on helping people with HIV and AIDS to stay in their own homes. Housing programs may need to find ways to address underlying causes and related problems such as alcohol and drug services, mental health services, benefits counseling, and public transportation.

Housing programs for persons with HIV and AIDS should include the following:

- Direct financial or in-kind assistance to clients, specifically rental and mortgage assistance.
- Direct services, specifically case management and in-home services.
- A flexible indirect assistance component that provides a pool of funds to address multiple housing concerns such as utility assistance, home improvements and renovations

⁴ North Carolina Department of Health and Human Services, HIV/STD Prevention & Care Branch, North Carolina HIV/STD Quarterly Surveillance Report, Volume 2004, Number 4

HIV/Aids housing services available are funded through the Dogwood Consortium. Currently the Dogwood Consortium offers a tenant based rental assistance program to assist those affected with the disease with rental costs. Community Alternatives Housing Inc. also provides assistance through the operation of a HOPWA funded community family care home.

7. 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 provide 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.

Response: The HUD CHAS tables also provide data on the rate of housing problems and cost burden by minority and ethnic households in Cumberland County outside of Fayetteville. For the purposes of the Five Year Consolidated Plan, the rates for white non-Hispanic households were compared to black non-Hispanic households and Hispanic households.

A racial or ethnic minority group is defined as having a disproportionate need when the percentage of housing need is at least 10 percentage points higher than the percentage of housing need for the County.

Table 2 includes the percentages of lower income black non-Hispanic households (renters and owners), which experienced housing problems, cost burden and extreme cost burden. Table 3 includes the same type of data for lower income white non-Hispanic households (renters and owners) and Table 4, the same data for Hispanic households. This information is presented together in order to compare the degree to which minority or ethnic households are impacted by housing need.

Black non-Hispanic lower income renters numbered 4,080 and accounted for 57% of all black non-Hispanic renter households in the County outside of the City in 2000. By comparison, white non-Hispanic lower income renters numbered 5,244 and represented 48% of all white non-Hispanic renters, while lower income Hispanic renters numbered 1,239 and comprised 64% of all Hispanic renters.

**Table 2
Housing Needs of Low and Moderate Income
Black Non-Hispanic Households (HUD Table 1C)
(Cumberland County Outside of Fayetteville)**

Income Category by Housing Problem	Renters				Owners				Total Households
	Elderly	All Families	All Others	Total Renters	Elderly	All Families	All Others	Total Owners	
0 - 30% of MFI	107	850	335	1,292	244	415	152	811	2,103
% with Any Housing Problem	61%	77%	49%	68%	68%	84%	77%	78%	72%
>30 - 50% of MFI	26	720	269	1,015	184	568	190	942	1,957
% with Any Housing Problem	31%	70%	84%	73%	52%	82%	77%	75%	74%
>50 - 80% of MFI	48	1,343	382	1,773	163	998	201	1,362	3,135
% with Any Housing Problem	21%	48%	43%	46%	45%	70%	64%	66%	55%
>80% of MFI	72	2,290	657	3,019	486	5,528	818	6,832	9,851
% with Any Housing Problem	0%	9%	9%	9%	17%	16%	24%	17%	0.147
Total	253	5,203	1,643	7,099	1,077	7,509	1,361	9,947	17,046
% with Any Housing Problem	33%	39%	37%	38%	39%	32%	43%	34%	36%

Source: HUD CHAS Table 1C

Renter Households

White non-Hispanic households accounted for the largest group of lower income renters at 5,244, while black non-Hispanics numbered 4,080 and Hispanics 1,239. Overall, white non-Hispanic renter households experienced housing problems at rates lower than blacks and Hispanics, the latter being the severely impacted with housing problems.

Extremely Low Income (0-30% of MFI)

Hispanic households comprised the smallest group (138 households) but experienced the highest rates of housing problems at 76% in this income category. The rate among black non-Hispanics was 68% and for white non-Hispanics, it 63%.

Very Low Income (>30-50% of MFI)

Black non-Hispanic households had the highest rate of housing problems at 73%, surpassing the rate among extremely low-income renters. The rates among white non-Hispanic and Hispanic households were significantly lower than among extremely low-income households of the same race and ethnicity.

Low Income (>50-80% of MFI)

White non-Hispanic households were the largest group (2,742) and had the lowest rate of housing problems (27%). Black non-Hispanics numbered 1,773 and had a rate of housing problems of 46% while Hispanics numbered 748 and experienced problems at a rate of 36%.

Table 3
Housing Needs of Low and Moderate Income
White Non-Hispanic Households (HUD Table 1C)
(Cumberland County Outside of Fayetteville)

Income Category by Housing Problem	Renters				Owners				Total Households
	Elderly	All Families	All Others	Total Renters	Elderly	All Families	All Others	Total Owners	
0 - 30% of MFI	294	666	328	1,288	541	424	245	1,210	2,498
% with Any Housing Problem	60%	60%	72%	63%	66%	73%	69%	69%	66%
>30 - 50% of MFI	151	790	273	1,214	662	569	251	1,482	2,696
% with Any Housing Problem	56%	49%	69%	54%	40%	75%	69%	58%	57%
>50 - 80% of MFI	161	2,062	519	2,742	859	1,871	420	3,150	5,892
% with Any Housing Problem	31%	27%	25%	27%	35%	62%	49%	53%	41%
>80% of MFI	204	4,157	1,209	5,570	2,982	13,663	2,101	18,746	24,316
% with Any Housing Problem	2%	7%	8%	7%	9%	13%	25%	14%	0.121
Total	810	7,675	2,329	10,814	5,044	16,527	3,017	24,588	35,402
% with Any Housing Problem	39%	21%	29%	24%	23%	22%	36%	24%	24%

Source: HUD CHAS Table 1C

Table 4
Housing Needs of Low and Moderate Income
Hispanic Households (HUD Table 1C)
(Cumberland County Outside of Fayetteville)

Income Category by Housing Problem	Renters				Owners				Total Households
	Elderly	All Families	All Others	Total Renters	Elderly	All Families	All Others	Total Owners	
0 - 30% of MFI	0	99	39	138	14	42	4	60	198
% with Any Housing Problem	n/a	82%	62%	76%	100%	100%	100%	100%	83%
>30 - 50% of MFI	0	286	67	353	24	62	4	90	443
% with Any Housing Problem	n/a	50%	88%	57%	100%	94%	0%	91%	64%
>50 - 80% of MFI	10	635	103	748	8	207	28	243	991
% with Any Housing Problem	0%	38%	29%	36%	50%	68%	100%	71%	45%
>80% of MFI	0	537	144	681	55	921	66	1,042	1,723
% with Any Housing Problem	n/a	24%	7%	20%	18%	19%	27%	20%	20%
Total	10	1,557	353	1,920	101	1,232	102	1,435	3,355
% with Any Housing Problem	0%	38%	35%	37%	52%	34%	49%	36%	37%

Source: HUD CHAS Table 1C

Owners

White non-Hispanic households accounted for the largest group of lower income owners at 5,482, while black non-Hispanics numbered 3,115 and Hispanics only 393. Overall, white non-Hispanic homeowners experienced housing problems at rates only slightly lower than blacks and Hispanics, the latter being the severely impacted with housing problems.

Extremely Low Income (0-30% of MFI)

Hispanic households struggled the hardest to maintain homeownership with 100% of all 60 households in this income group experiencing housing problems. Seventy-eight percent (78%) of black non-Hispanic households experienced problems, while 69% of white non-Hispanic households had housing problems.

Very Low Income (>30-50% of MFI)

Hispanic households in this income group only fared slightly better than extremely low-income Hispanic households: 91% of the 90 homeowners had housing problems. The rate among black non-Hispanics was 75% and 69% for white non-Hispanics.

Low Income (>50-80% of MFI)

Of the 243 Hispanic homeowners, 71% had housing problems compared to 66% of black non-Hispanics and 53% of white non-Hispanics.

Finding of Disproportionate Need by Racial or Ethnic Group

Hispanic households accounted for 5.9% of total households and 4% of all homeowner households in Cumberland County outside of Fayetteville in 2000. They also represented 4% of all lower income homeowners. Among renters, extremely low income Hispanic family renters reported a rate of housing problems at 82%, which is twelve percentage points higher than the rate of housing problems experienced by all family renter households in this same income category (70%). "All other" very low-income households also had a disproportionate housing need (88%) when compared to the same household type and income group in the County (77%).

Among homeowners, all extremely low-income Hispanic household types were disproportionately impacted with housing problems. Elderly, family and all other household types were impacted at 100% compared to 66%, 77% and 72%, respectively, for the County. Very low-income Hispanic homeowners were similarly affected with the exception of all other households. One hundred percent of elderly households and 94% of family households were

impacted compared to 43% and 79%, respectively, for the County. Among low-income homeowners, the elderly and all other household types were disproportionately impacted at 50% and 100%, respectively, compared to 34% and 57%, respectively, for the County.

Black non-Hispanic households accounted for 37.5% of total households and 28% of all homeowner households in the County outside of the City in 2000. They represented 35% of all lower income homeowners. Rates of housing problems ranged from 66% to 78% for these households. While the percentages of black non-Hispanic households with housing problems were lower than for Hispanic households, the actual number of black non-Hispanic households affected were much higher.

Among renters, 70% of very low-income family households had housing problems compared to 58% for the County. For low income renters, 48% of black non-Hispanic families and 43% of all other non-Hispanic households had housing problems compared to 58% and 33%, respectively, for the County.

Among owners, only low income black non-Hispanic households were disproportionately affected (45%) when compared to the same household and income type in the County (34%).

(To determine the rate of housing problems experienced by all family households within the same income category, the rates of small families and large families were calculated as one household type.)

Homeless Needs 91.205 (c)

8. Homeless Needs— The jurisdiction must provide a concise summary of the nature and extent of homelessness in the jurisdiction, (including rural homelessness and chronic 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.

Response:

The following provides a description of the nature and extent of homelessness in Cumberland County. Data is provided for the County as a whole since homelessness is addressed on a county-wide basis through the Fayetteville / Cumberland County Continuum of Care Planning Council (COCCPC). The COCCPC is the lead entity for combining the efforts of a diverse group of stakeholders who are committed to ending homelessness in the community by providing homeless men, women and children with coordinated services and housing options.

Needs of Sheltered and Unsheltered Homeless

Section 103 of the Stewart B. McKinney Homeless Assistance Act of 1987 defines "homeless" or "homeless individuals" to include:

- An individual who lacks a fixed, regular, and adequate night-time residence; and
- An individual who has a primary night-time residence that is
- A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill);

- An institution that provides a temporary residence for individuals intended to be institutionalized; or
- A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

The needs of the homeless are divided into Sheltered and Unsheltered Homeless, Persons Threatened with Homelessness and Subpopulations of Homelessness. HUD mandates that each continuum of care conduct a point in time count of the homeless individuals in its community on an annual basis. Based on the 2010 Point in Time (PiT) Survey (conducted January 27, 2010) by COCPC, 1,033 homeless individuals were identified in the community. However, it should be noted that the (PiT) Survey is only a snapshot of homeless persons identified during a 24 hour period and the numbers identified are attributed to the extent of volunteers available to conduct the count. The results of 2010 PiT are shown on the following table:

2010 Point in Time Survey Results – Fayetteville/ Cumberland County CoC					
		Sheltered		Unsheltered	Total
		Emergency	Transitional		
Homeless Population	Homeless Individuals	72	6	460	538
	Homeless Families w/ Children	13	44	88	145
	Persons in Homeless Families w/Children	40	176	279	495
	Total Homeless Persons	112	182	739	1033*
Homeless Subpopulations	Chronically Homeless	4	2	28	32
	Severely Mentally Ill	1	5	12	18
	Chronic Substance Abuse	2	6	118	126
	Veterans	1	1	51	53
	Persons with HIV/AIDS	0	1	9	10
	Victims of Domestic Violence	11	13	27	51
	Youth (Under 18 years of age)	0	0	0	0

* Sum of homeless individuals and persons in homeless families with children

***Also refer to the CPMP Tool Homeless Needs Table at Appendix C.**

9. Describe, to the extent information is available, 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.

Response:

No specific information is available to quantify homelessness by racial and ethnic group nor the population of persons threatened with homelessness in Fayetteville and Cumberland County. However, certain characteristics describe those most likely to face homelessness.

People without adequate and stable income will be continually at risk of a housing crisis. The majority of jobs now require moderate- to long-term training. Even entry-level positions are more technical than in previous times with widespread use of computer and telecommunication technology. Service and clerical jobs have replaced lower-skilled manufacturing and production jobs. These jobs often pay wages insufficient to support a family.

- Education and training are important to the labor force to sustain employment in decent paying jobs. The 2006 - 2008 Census Estimates reported that 20,785 persons age 25 and over in the County (12,180 for the City) had not finished high school. Persons without a high school diploma represent 11% of the population age 25 and over. People with no or minimum job skills are at risk of repeated housing crises.
- Children in single parent households are at risk of experiencing a housing crisis if they are poor. Women have historically earned less than men, making children in female-headed households the most vulnerable. The 2006 - 2008 Census Estimates reported 16,375 female-headed households with children younger than 18 years of age in Cumberland County (10,618 residing in the City of Fayetteville). Of these, 7,140 (4,343 in Fayetteville) were living below the poverty level.
- Cost burden, particularly among households whose income is less than 80% of the AMFI, is a factor in analyzing the risk of homelessness. When households pay higher proportions of their incomes for housing, they are forced to sacrifice other basic necessities such as food, clothing, and health care. The 2009 CHAS Data identified a total of 11,515 lower income households (80% AMFI or less) in the City and County that were cost burdened and paying more than 30% of their income on housing costs. Of these, 6,810 (59%) were extremely cost burdened and paid 50% or more of their income for housing.
- Others are at risk of becoming homeless include the following:
 - Persons leaving institutions;
 - Households with incomes less than 30% of the AMFI;
 - Victims of domestic violence;
 - Special needs populations (persons with HIV/AIDS, disabilities, drug and alcohol addiction);
 - People who are doubling-up, which is often identified by overcrowding;
 - Large families who are low income; and
 - Residents of rooming houses.

Non-homeless Special Needs 91.205 (d) including HOPWA

10. *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, victims of domestic violence, public housing residents, and any other categories the jurisdiction may specify and describe their supportive housing needs. The jurisdiction can use the CPMP Tool Non-Homeless Special Needs Table of their Consolidated Plan to help identify these needs.*

Response:

Elderly and Frail Elderly Persons

A frail elderly person is defined as a person who has one or more limitations of activities of daily living (ADLs) and is a person who may need assistance. Elderly persons may need housing assistance for two reasons – financial and supportive. Supportive housing is needed when an elderly person is both frail and low income, since the housing assistance offers

services to compensate for the frailty in addition to financial assistance. By this definition, only the frail elderly require supportive housing.

Since 2000, the number of citizens over the age of 65 in Cumberland County has increased from 20,395 to 28,140 according to the 2006 – 2008 Census Estimates, an increase of 38%. Elderly households represent 20.2% of all households. In 2000 there were 7,164 elderly households in Cumberland County, of which 4,384 households, or 61.2%, were low-income. The table below provides an overview of renter and owner elderly households.

Elderly and Elderly Low-Income Households (2009)⁵					
	All Households			Low-Income Households	
	Total	Elderly	Percent of Total	Elderly	Percent Low-Income
Renters	48,920	3,585	7.3%	1,990	55.5%
Owners	68,595	20,240	29.5%	3,600	17.8%
Total	117,515	23,825	20.2%	5,590	23.5%

The majority of elderly renter-occupied households are low-income. Of the 20,240 elderly owner-occupied housing, 3,600 (or 17.8%) are low-income and 55.5% or about two-thirds of renters are low-income.

The 2008 Census Estimates do not report on disabilities, the 2000 Census reports that of the 28,140 elderly individuals living within Cumberland County:

- 11,266 reported that they had a disability.
- 1,230 (24%) of those elderly with a disability reported that they had a self-care disability that limited their ability to dress, bathe, or get around inside their home without assistance.
- 2,344 (46%) of the elderly with a disability reported that their disability limited their ability to go outside their home alone to shop or visit a doctor’s office.
- 1,261 (13%) of all elderly persons were living below the poverty level; 866 (17%) of all elderly persons with a disability had income levels below poverty.

The tables below list services and housing that are available for the elderly:

Services for the Elderly	
Coordinating Council on Older Adults	Referral and services for elderly population to include: in-home aides, housing repairs, home delivered meals, telephone reassurance, elderly nutrition sites, & liquid supplements.
Mid-Carolina Council on Governments – Area Council on Aging	Referral and services for elderly population to include: Adult Day Care, Adult Day Health Care, Care Management, Congregate Meals, Family Caregiver Support Program, Health Promotion, Home Delivered Meals, Housing and Home Improvement, Information and Case Assistance, Information and Referral, In-Home Aide, Legal Services, Long Term Care Ombudsman, Senior Centers, Senior Games, General Transportation and Medical Transportation.

⁵ *Comprehensive Housing Affordability (CHAS) Data Report, 2009*, U.S. Department of Housing and Urban Development, www.huduser.org.

Services for the Elderly	
Cumberland County Community Transportation Program	Medical transportation
Bethel Adult Day Health Center Cape Fear Adult Day Health Center Southern Hospitality ADC	Day health center
City of Fayetteville Senior Center Hope Mills Senior Center Spring Lake Senior Center	Recreation and services (disease prevention – Spring Lake)
Cumberland County Department of Social Services	In home level 1, 2, & 3 personal care
Legal Aid of NC	Legal services

Housing for the Elderly

Property	Bedroom Size	Number of Units
BUNCE MANOR 3450 Denise Place Fayetteville, NC 28314-0429 910-867-2463	1 & 2	48
EDWARDS PLACE 311 Moore ST FAYETTEVILLE, NC 28301-4949 Phone: 910-678-9916	1	16
HAYMOUNT MANOR 2040 Elvira Street Fayetteville, NC 28303-4801 Phone: 910-323-9094	1 & 2	48
HICKORY HILL APARTMENTS 3006 Hickory Hill Rd Fayetteville, NC 28301-2518 Phone: 910-488-1242	1	76
J.D. FULLER PLACE 2808 Kingdom Way Fayetteville, NC 28301-3391 Phone: 910-630-1402	1	47
LEGION MANOR 651 Seth Way Hope Mills, NC 28348-9084 (910) 426-1160	1 & 2	44
PINERIDGE MANOR 3200 Big Pine Dr Hope Mills, NC 28348-3227 910-630-6200	1 & 2	60
VILLAGE AT NORTHGATE 200 Block of Eunice Drive Fayetteville, NC 28311 910-884-3000	1	43
Total Units		382

Persons with Disabilities

Persons with mental illness, disabilities and substance abuse problems need an array of services. Their housing requires a design that ensures residents maximum independence in the least restrictive setting, including independent single or shared living quarters in communities, with or without onsite support. Options include:

- Living with family or friends with adequate support and/or respite services
- Small, home-like facilities in local communities close to families and friends, with the goal of moving to a less structured living arrangement when clinically appropriate

Residential placements need to provide the equipment and supplies necessary to assist in successful, long-term housing stability. Admission to state or private hospitals, mental

retardation centers, state schools or alcohol and drug abuse treatment centers must not be considered permanent or long-term residential options.

The 2000 Census reported on non-institutionalized disabled persons, age five and over. The enumeration excludes institutionalized disabled persons, which consists of persons under formally authorized, supervised care or custody in institutions. The Census specifies that a disability is a long-lasting physical, mental, or emotional condition that can make it difficult for a person to do activities such as walking, climbing stairs, dressing, bathing, learning, or remembering. This condition can also impede a person from being able to go outside the home alone or to work at a job or business.

- The 2000 Census reported that there were 139,497 non-institutionalized persons age 5 and over in Cumberland County outside of Fayetteville. Of these, 29,320 (21%) reported a disability.
- There were 10,127 working age persons between the ages of 16 to 64 with a disability who were unemployed.
- 4,742 (16%) of the 52,909 disabled persons were living below poverty.

The disabled population in the County can be divided into three categories: mentally disabled, developmentally disabled, and physically disabled.

Mentally Ill

Those individuals experiencing severe and persistent mental illness are often financially impoverished due to the long-term debilitating nature of the illness. The majority of these individuals receive their sole source of income from financial assistance programs—Social Security Disability Insurance or Social Security Income. The housing needs for this population are similar to other low-income individuals. However, because of this limited income, many of these individuals may live in either unsafe or substandard housing. The citizens need case management, support services and outpatient treatment services to monitor and treat their mental illness. Agencies that provide behavioral and/or psychiatric care include the following:⁶

- Alternative Care Treatment Systems, Inc.
- Cumberland County Mental Health Association
- Cumberland County Mental Health Center
- Envisions of Life, LLC
- Peterkin & Associates, Inc.

Severe mental illness includes the diagnoses of psychoses and major affective disorders such as bipolar and major depression. The condition must be chronic (i.e. existing for at least one year) to meet the HUD definition for a disability.

The 2000 Census reported on the non-institutionalized population with a mental disability. The Census defines mental disability as an emotional condition that makes it difficult to learn, remember, or concentrate.

- There were 7,111 non-institutionalized persons age 5 and over with a mental disability, which is equivalent to 5.1% of the 139,497 non-institutionalized persons age 5 and over in the County outside of the City.
- 1,698 (24%) of persons with mental disabilities were children between the ages of 5 and 15.

⁶ Extended Care Information Network (www.extendedcare.com)

- 4,015 (56%) were working-age adults between the ages of 16 and 64.
- 1,398 (20%) were elderly individuals age 65 and over.

Alcohol and Substance Abusers

The majority of people who suffer from any form of alcohol or substance abuse maintain jobs and homes at the beginning stages of their problem. However, as the problem progresses, the ability to maintain a well-functioning lifestyle diminishes. This problem touches every income and racial group, but is found to be most prevalent among the lowest income groups. Preventive programs incorporated into housing services provided to low-income persons are necessary to address this problem.

The National Institute of Alcohol Abuse and Alcoholism estimates the number of men with drinking problems at 14% to 16%, and the number of women with similar problems at 6%. No similar statistics exist for abuse of other drugs. However, the National Institute of Alcohol Abuse and Alcoholism estimates that one-third or more of the clients in publicly funded residential group programs are homeless most of the year before entering treatment.

Drug Addiction/Recovery	
Hope Harbor Christian Mission	Recovering substance abuse - men only
Myrover Reese Fellowship Homes Inc.	A residential home for males who are alcoholics or chemically dependent.
The Oxford House - Elder	shared living for substance abusers for men.
The Oxford House - Haymount	shared living for substance abusers for men.
Stedman Recovery House	Offers emergency shelter and food assistance
The Oxford House - Sandlewood	shared living for substance abusers for men.
The Oxford House - Stedman	shared living for substance abusers for men.
The Oxford House - Lyon Road	shared living for substance abusers for women.
Roxie Avenue Center	Crisis Services / Detox
Cape Fear Intergroup Association	Alcoholics Anonymous
Cumberland County Local Management Entity (Mental Health) sponsored groups: Central Group AFG Courageous Steppers (ALATEEN) Helping Hands Hope Mills AFG New Beginnings You Are Not Alone AFG Serenity Seekers AFG New Beginnings AFG	AL-ANON / ALATEEN

Persons with HIV/AIDS

According to the most recent quarterly update of the North Carolina HIV/STD Surveillance Report, Cumberland County had 73 reported cases of HIV disease in 2009, which represents 4% (1,769) of all the cases reported in North Carolina. With 50 cases reported in 2004, Cumberland County showed a marked decrease in the number of AIDS cases—down from 84 reported cases in 2008 and 51 reported cases in 2007. The following are agencies that provide services to residents with HIV/AIDS:

Reported Cases of HIV/AIDS in Cumberland County⁷		
Year	HIV	AIDS
2007	108	51
2008	167	84
2009	73	50

⁷ North Carolina Department of Health and Human Services, HIV/STD Prevention & Care Branch, North Carolina HIV/STD Quarterly Surveillance Report, Volume 2004, Number 4

Case Management Services

Better Home Health Care, Inc.	Borderbelt AIDS Resources Team (BART)
B.R.O.N. Community Development Corp., Inc.	Cape Fear Regional Bureau for Community Action
Cape Fear Valley Medical Center	Carolina Eastern Health Services, Inc.
Community Alternative Housing, Inc	Community Home Care & Hospice
Home Caregivers	Migrant Benevolent Association
Partners In Health Management of Cumberland County, Inc.	Reaching Out to Cultures and Communities (R.O.C.C.), Inc.
Tri-County Community Health Center	Trust The Process, Inc.

While prevention, medical and support services are available to people with HIV/AIDS, there is a greater need for permanent supportive housing. Other types of housing assistance needed include rental assistance and transitional supportive housing for patients leaving institutions of physical health or incarceration.

The housing needs of people living with HIV and AIDS are diverse. Housing programs targeting the population need to be flexible enough to address a wide range of needs and problems. Programs should focus on helping people with HIV and AIDS to stay in their own homes. Housing programs may need to find ways to address underlying causes and related problems such as alcohol and drug services, mental health services, benefits counseling, and public transportation.

Housing programs for persons with HIV and AIDS should include the following:

- Direct financial or in-kind assistance to clients, specifically rental and mortgage assistance.
- Direct services, specifically case management and in-home services.
- A flexible indirect assistance component that provides a pool of funds to address multiple housing concerns such as utility assistance, home improvements and renovations.

HIV/Aids housing services available are funded through the Dogwood Consortium. Currently the Dogwood Consortium offers a tenant based rental assistance program to assist those affected with the disease with rental costs. Community Alternatives Housing Inc. also provides assistance through the operation of a HOPWA funded community family care home.

*Please also refer to the CPMP Tool Non-homeless Special Needs at Appendix C.

Lead-based Paint 91.205 (e)

11. 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.

***This number can also be provided on the CPMP Tool Housing Needs Table.**

RESPONSE: According to HUD, lead paint is typically found in homes that were constructed prior to 1978. Since 27% of the housing inventory in the County outside of the City was built prior to 1980, the probability of finding lead paint in existing residential units is very high.

The following table provides estimates of the number of occupied housing units (renter and owner) that are suspected of containing lead based paint.

More than one in three renter units (38%) located in the County outside of the City are suspected of containing lead based paint. The incidence among owner units is closer to one in four units (27%).

HUD’s final rule on lead-based paint, effective September 15, 2000, has not significantly impacted the County’s housing programs. There has not been a trend of increasing rehabilitation costs required per unit for rehabilitation activities due to lead-based pain. The County will continue to comply with HUD regulations concerning lead-based paint testing, abatement, and education.

While the prevalence of lead-based paint hazards varies by region, housing unit age and household income among other factors,⁸ the national percentages of lead-based paint in occupied housing were applied to the number of housing units in Cumberland County to estimate the percentage of housing units that could contain hazards.⁹

Estimated Incidence of Lead-Based Paint in Housing Stock, 2009 (Cumberland County Outside of Fayetteville)						
Year Built	Owner Units (Estimated)			Renter Units (estimated)		
	Total Units	% with LBP	Units with LBP	Total Units	% with LBP	Units with LBP
1980-Present	34,820	x 0 =	0	25,590	x 0 =	0
1960-1979	26,150	x 0.62 =	16,213	16,265	x 0.62 =	10,084
1940-1959	6,295	x 0.80 =	5,036	5,245	x 0.80 =	4,196
Before 1940	1,330	x 0.90 =	1,197	1,820	x 0.90 =	1,638
Total	68,595		22,446	48,920		15,918

Based on these estimates, as many as 38,364 occupied housing units in Cumberland County could contain lead-based paint. Of these units with lead-based paint, 22,446 are owner-occupied and 15,918 are occupied by renters. Up to 5,276 houses may have deteriorated lead-based paint.

****Please also refer to the CPMP Tool Housing Needs Table.***

Lead-Based Paint Hazard Reduction

The federal Residential Lead-Based Paint Hazard Reduction Act of 1992 (Title X of the Housing and Community Development Act of 1992) amends the Lead-Based Paint Poisoning Prevention Act of 1971, which is the law covering lead-based paint in federally funded housing. These laws and subsequent regulations issued by the U.S. Department of Housing and Urban Development protect young children from lead-based paint hazards in housing that is financially assisted or being sold by the federal government.

⁸ David E. Jacobs, Robert P. Clickner, Joey Y. Zhou, Susan M. Viet, David A. Marker, John W. Rogers, Darryl C. Zeldin, Pamela Broene and Warren Friedman, "The Prevalence of Lead-Based Paint Hazards in U.S. Housing," *Environmental Health Perspectives*, Volume 110, Number 10, (October 2002).

⁹ For example, the national study conducted in 2000 indicated that 50% of housing units built before 1980 contained lead-based paint. By multiplying the number of housing units in Cumberland County built before 1980 by 50% provides an estimate of the number of housing units in Cumberland County that contain lead-based paint (24,245 x 50% = 12,058).

In Cumberland County, evaluations of the prevalence of lead-based paint in housing units are conducted by project and lead abatement is prescribed for all dwellings targeted for rehabilitation. In addition, all assisted housing tenants are informed of the hazards of lead-based paint. The Cumberland County Health Department provides ongoing consultation to local housing staff.

HOUSING MARKET ANALYSIS

Housing Market Analysis 91.210

12. 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.

RESPONSE: The 2006-2008 ACS Estimates calculate 81,836 total housing units for an increase of 13.7% over the 2000 Census. The most common type of housing in City of Fayetteville is single-family detached units. In the more densely populated areas of Fayetteville, there are a larger number of multi-family units. Within the City and County, mobile homes make up a significant portion of the housing stock, comprising 12.9% of the total housing units.

The 2006-2008 ACS estimates there are 9,887 vacant units, for a total of 12% of the total housing market. This is up 43% from 2000 where the vacancy rate was 9.3%.

There are 41,409 owner-occupied housing units in Fayetteville, accounting for 60.1% of the 71,949 occupied units. This reflects an increase over the 2000 rate of 53.3%.

The median value of owner-occupied housing in Fayetteville is \$112,000, an increase of 28.4% over the median value of \$87,200 in 2000. Housing values in Fayetteville continue to rise and the Fayetteville Association of Realtors reports that the average sales price for an existing home in 2009 for was \$156,251. The average sales price for a newly constructed unit in 2009 was \$200,999. The Association reports that existing homes were purchased for an average sales price of \$130,673.

The City of Fayetteville has 30,540 renter-occupied units. The FY 2010 Cumberland County Fair Market Rent as determined by HUD is:

- Efficiency: \$580
- One-Bedroom: \$627
- Two-Bedroom: \$700
- Three-Bedroom: \$994
- Four-Bedroom: \$1,176

The tables on the next few pages provide a detailed overview on housing occupancy, tenure, median value, and median gross rent in Cumberland County according the 2008 Census Estimates.

Cumberland County Housing Profile Highlights

	Cumberland County	Fayetteville	Eastover	Falcon	Godwin	Hope Mills	Linden	Spring Lake	Stedman	Wade
Total housing units	134,716	81,836	621	102	43	4,497	58	3,623	286	220
Occupied housing units	118,846	71,949	566	84	38	4,112	51	3,109	261	196
Owner-occupied housing units	71,506	41,409	422	62	32	2,713	45	1,113	209	133
Renter-occupied housing units	47,340	30,540	144	22	6	1,399	6	1,996	52	63
Vacant housing units	15,870	9,887	55	18	5	385	7	514	25	24
Housing units with a mortgage	52,989	31,010	180	30	17	2,302	27	793	126	20
Housing units without a mortgage	18,517	10,399	92	16	11	227	10	190	43	59
Occupied units paying rent	43,203	29,320		25	4	1,366	6	1,981	43	54
Affordability Snapshot										
Median value of home [in dollar	\$111,600	\$112,000	\$97,300	\$108,300	\$72,500	\$85,100	\$86,100	\$77,200	\$72,000	\$65,600
Median of selected monthly owner costs										
With a mortgage [dollars]	\$1,176	\$1,178	\$845	\$950	\$690	\$881	\$890	\$843	\$838	\$675
Not mortgaged [dollars]	\$369	\$390	\$229	\$275	\$319	\$271	\$275	\$285	\$263	\$188
Median family income - monthly	\$4,402	\$4,261	\$4,052	\$3,208	\$3,507	\$3,739	\$4,063	\$2,358	\$3,943	\$2,083
Selected monthly owner costs as a % of household income										
Less than 20.0 percent	20,371	11,768	182	22	13	888	16	355	107	42
20.0 to 24.9 percent	8,288	4,648	12	6	3	624	4	147	29	7
25.0 to 29.9 percent	6,244	3,261	24	6	4	225	7	119	7	16
30.0 to 34.9 percent	3,934	2,739	6		4	213	3	76	4	
35.0 percent or more	13,856	8,477	42	10	4	568	7	264	22	14
Gross Rent										
Less than \$200	1,059	930				39		27		
\$200 to \$299	615	489	6			30		115	3	13
\$300 to \$499	5,441	3,370	58	10		344	4	751	24	18
\$500 to \$749	14,928	10,113	6	6		718		738	13	6
\$750 to \$999	15,227	10,181	20		2	157		189		2
\$1,000 or more	6712	4,237				19		9		
<i>No cash rent</i>	3,358	1,220	2	9	2	59	2	152	3	15
Gross Rent as a % of household income										
15.0 to 19.9 percent	12,603	4,122	57	3		515	4	552	27	17
20.0 to 24.9 percent	5,361	4,262		6	2	201		209	2	6
25.0 to 29.9 percent	4,467	3,966	7	3		74		226	2	6
30.0 to 34.9 percent	4,423	2,730				137		135		
35.0 percent or more	16,349	10,847	26	4		371		631	9	10

Cumberland County Selected Housing Characteristics

	Cumberland County	Fayetteville	Eastover	Falcon	Godwin	Hope Mills	Linden	Spring Lake	Stedman	Wade
Units in structure										
1-unit, detached	87,384	54,975	411	85	37	3,383	56	1,876	223	147
1-unit, attached	5,405	2,160	0	3	0	124	0	184	3	2
2 units	2,939	2,098	0	3	0	108	2	126	9	0
3 or 4 units	6,083	4,730	0	0	0	363	0	286	4	0
5 to 9 units	7,725	6,623	0	0	0	172	0	354	0	0
10 to 19 units	4,201	3,564	0	0	0	9	0	50	0	0
20 or more units	3,542	3,190	0	0	0	8	0	39	0	0
Mobile home	17,401	4,496	219	29	10	325	7	766	45	64
Year Structure Built										
Built 2005 or later	7,253	3,131	0	0	0	0	0	0	0	0
Built 2000 to 2004	13,067	5,771	0	0	0	0	0	0	0	0
Built 1990 to 1999	26,550	13,396	109	19	10	1,471	6	904	36	43
Built 1980 to 1989	23,620	15,611	169	21	5	791	8	873	65	22
Built 1970 to 1979	26,270	16,813	87	32	3	1,344	15	875	63	23
Built 1969 or earlier	37,956	27,114	265	48	29	886	34	1,037	120	125
Rooms										
1 room	1,167	554	0	0	0	0	0	28	0	0
2 rooms	2,076	1,510	11	0	2	51	2	269	0	0
3 rooms	9,147	5,832	67	3	0	294	2	389	0	8
4 rooms	22,371	14,439	153	14	8	747	10	990	33	50
5 rooms	33,838	19,591	179	37	10	1,585	23	1,006	87	76
6 rooms	28,922	16,966	111	14	6	1,102	7	531	64	45
7 rooms	18,680	11,231	87	27	12	398	9	232	63	16
8 rooms	11,238	6,987	8	12	7	165	7	196	19	14
9 or more rooms	7,277	4,726	14	13	2	150	5	48	18	4
Occupants per room										
1 or less	116,561	70,831	547	92	38	4,022	50	2,900	238	189
1.01 to 1.5	1,969	869	13	0	2	80		180	8	4
1.51 or more	316	249	7	0	0	21	0	54	0	0
Selected Characteristics										
Lacking complete plumbing facilities	349	204	6	0	0	17	0	59	0	0
Lacking complete kitchen facilities	400	156	0	0	0	12	0	36	0	0
No telephone service available	5,088	3,296	51	0	2	23	2	176	3	11
Value										
Less than \$50,000	6,139	2,385	18	6	9	111	3	85	17	26
\$50,000 to \$99,999	24,787	15,266	128	15	10	1,664	23	781	115	42
\$100,000 to \$149,999	18,383	11,810	106	14	5	586	8	110	33	8
\$150,000 to \$199,999	11,114	6,339	8	9	2	133	3	7	2	0
\$200,000 to \$299,999	7,176	3,154	12	2	2	28	0	0	2	3
\$300,000 to \$499,999	2,942	1,833	0	0	0	7	0	0	0	0
\$500,000 to \$999,999	756	483	0	0	0	0	0	0	0	0

The Table below shows housing tenure in Fayetteville in 2000 by race of the household and for Hispanic households.

- White households and Native American households own their housing units at a higher rate than all households in Cumberland County. Minorities other than Native Americans, own their units at lower rates than all households in Cumberland County.
- Minority households in Fayetteville have lower rates of home ownership than minority households in the County. In fact, the minority households outside the City have rates of home ownership that are higher than minority households State-wide.
- The rate of home ownership among minority households in the City are lower than the rate of home ownership by minority households State-wide.

Housing Occupancy & Tenure – 2000

	City of Fayetteville				Co. Outside City				Cumberland Co.	North Carolina
	Owner Occupied		Renter Occupied		Owner Occupied		Renter Occupied			
	Total	%	Total	%	Total	%	Total	%	% Owner-Occupied	% Owner-Occupied
White	15,581	60.6	10,121	39.4	25,298	68.7	11,528	31.3	65.4	75.1
Black	8,731	45.1	10,632	54.9	10,128	58.2	7,270	41.8	51.3	52.6
Am. Ind., Eskimo	302	54.4	253	45.6	852	72.7	320	27.3	66.8	69.6
Asian, Pacific Islander	485	53.7	419	46.3	518	60.9	333	39.1	57.2	50.9
Other Race	342	33.1	691	66.9	671	41.4	948	58.6	36.1	29.2
Two or More Races	368	42.1	507	57.9	472	44.5	588	55.5	6.7	46.0
Total	25,809	53.3	22,623	46.7	37,939	64.4	20,987	35.6	59.9	69.4
Hispanic Origin Any Race	902	38.5	1,442	61.5	1,513	43.6	1,956	56.4	41.5	31.5

Source: U.S. Bureau of the Census

Housing for those with Special Needs (developmentally or physically disabled)

Property	Bedroom Size	Property	Bedroom Size
ABILITIES @BARTON'S LANDING 683 Bartons Landing Pl Fayetteville, NC 28314-1012 Phone: 910-826-4699	2	ARC/HDS CUMBERLAND CO GROUP HOME #2 224 RANDOLPH AVE FAYETTEVILLE, NC 28311-2743 Phone: 910-822-5551	1
ABILITIES @CUMBERLAND TOWERS 2520 Cumberland Creek Dr. Fayetteville, NC 28306	1	ARC/HDS CUMBERLAND CO. GH #7 250 PRINCE CHARLES DR FAYETTEVILLE, NC 28311-0834 Phone: 910-630-2331	
ARC/HDS CUMBERLAND CO GH #1 635 DASHLAND DR FAYETTEVILLE, NC 28303-3317 Phone: 910-868-6208	1	BRIARCLIFF CONDOS 1800 Tryon Drive Fayetteville, NC 28303 Phone: 910-826-4699	2
ARC/HDS CUMBERLAND CO GH #3 323 SINCLAIR CIR FAYETTEVILLE, NC 28301-7668 Phone: 910-485-4487	1	CAC OF CUMBERLAND CO.#1 3410 MIRACLE LN FAYETTEVILLE, NC 28301-3216 Phone: 910-822-8513	1
ARC/HDS CUMBERLAND CO GH #4 1533 MINTZ AVE FAYETTEVILLE, NC 28303-3036 Phone: 910-822-8758	1	CAC OF CUMBERLAND CO.#2 1132 Camden RD FAYETTEVILLE, NC 28306-1778 Phone: 910-485-4979	1

Property	Bedroom Size
ARC/HDS CUMBERLAND CO GH #6 2001 SOUTHERN AVE FAYETTEVILLE, NC 28306-1757 Phone: 910-486-4021	1

Property	Bedroom Size
ARC/HDS CUMBERLAND CO GH #5 5713 NEWTON ST HOPE MILLS, NC 28348-1801 Phone: 9104250791	1

HIV/AIDS housing services available are funded through the Dogwood Consortium. Currently the Dogwood Consortium offers a tenant based rental assistance program to assist those affected with the disease with rental costs. Community Alternatives Housing Inc. also provides assistance through the operation of a HOPWA funded community family care home.

Housing Units

According to the 2000 Census, the total number of housing units in Cumberland County was 118,425 (53,565 in Fayetteville), with 51,927 (48,414 in Fayetteville) owner-occupied homes for a median value of \$88,800. During the period 2000 to 2008, the total number of housing units increased 13.8% to 134,716 (81,836 in Fayetteville) with 71,506 (41,409 in Fayetteville) owner-occupied units for a median value of \$111,600.

In 2000, owner-occupied housing in Cumberland County represented 43.8% of total housing units. This increased to 53.1% of total housing units in 2008, signaling a trend away from renting towards homeownership.¹⁰

At 64.9%, single-family detached housing units represent the majority of the owner-occupied housing stock in Cumberland County. The number of single-family in 2000 was 64.8%; virtually unchanged Owner-occupied housing has increased 32.4% (6,452 units) between 2000 and 2008. The largest increases were seen in the percentage of three- or four-unit housing (124.4%), one-unit detached (39.4%), five or more units (27.9%) and one-unit attached (24.4%).

Housing Type		2000		2008		Change	
		Number	Percent	Number	Percent	Number	Percent
Total Housing Units	1 Unit (detached)	76,784	64.8%	87,384	64.9%	10,600	13.8%
	1 Unit (attached)	4,755	4.0%	5,405	4.0%	650	13.7%
	2 Units	3,162	2.7%	2,939	2.2%	-223	-7.1%
	3 or 4 Units	5,579	4.7%	6,083	4.5%	504	9.0%
	5 or more Units	11,840	9.9%	15,468	11.4%	3,628	32.2%
	Mobile Home or Trailer	16,264	13.7%	17,401	12.9%	1,137	7.0%
	Other	41	0.0%	36	0.0%	-5	-12.2%
	Total	118,425	100.0%	134,716	100.0%	6,452	13.8%

Age of Housing

Most of the occupied housing in Fayetteville (40.1%) was built between 1980 and 1999. Almost 11.5% of the occupied housing (13,285 units) was built between since 2000. Only 12.5% of the housing stock is much older with 14,690 units built prior to 1960; with less than 25% of those built before 1940.

¹⁰ 2000 Census & 2008 Census Estimates, U.S. Census Bureau, www.factfinder.census.gov.

According to the data, rental housing is older than owner-occupied housing; with 14.4% of renter-occupied housing built before 1960 compared to 11.0% of owner-occupied housing. The median year that owner-occupied housing was built is 1971; the median year that rental housing was built is 1969.

Age of Housing Stock By Tenure¹¹				
Year Built	Owner-Occupied		Renter Occupied	
	Units	Percent	Units	Percent
2000 or Later	7,545	11.0%	5,740	11.7%
1980 to 1999	27,275	39.8%	19,850	40.6%
1960 to 1979	26,150	38.1%	16,265	33.2%
1940 to 1959	6,295	9.2%	5,245	10.7%
1939 to Earlier	1,330	1.9%	1,820	3.7%
Total	68,595	100.0%	48,920	100.0%

**Owner Occupied
Housing Costs**

MLS Total Statistics by Year (1998 – 2009)¹²

Closed	1998	1999	2000	2001
Total Closed - Existing	2285	2325	2309	2685
Total Value	\$231,846,463	\$232,555,545	\$225,461,610	\$264,117,804
Average Price	\$101,465	\$100,024	\$97,645	\$98,478
Total Closed - New	1021	954	835	1067
Total Value	\$108,542,762	\$109,351,053	\$101,382,657	\$135,776,652
Average Price	\$106,310	\$114,624	\$121,416	\$127,251
Total Listings Closed	3306	3279	3144	3752
Total Value	\$ 340,389,225	\$ 341,906,598	\$ 326,844,267	\$ 399,894,456

Closed	2002	2003	2004	2005
Total Closed - Existing	3061	3552	4763	4914
Total Value	\$298,637,473	\$359,757,470	\$472,488,226	\$526,475,505
Average Price	\$97,562	\$101,283	\$99,200	\$106,493
Total Closed - New	1217	1562	1756	2417
Total Value	\$162,254,612	\$230,485,347	\$290,210,096	\$434,844,972
Average Price	\$133,323	\$147,558	\$165,268	\$179,353
Total Listings Closed	4278	5114	6519	7331
Total Value	\$ 460,892,085	\$590,242,817	\$762,698,322	\$961,320,477

Closed	2006	2007	2008	2009
Total Closed - Existing	5708	4893	4553	3,820
Total Value	\$673,819,969	\$612,269,226	\$588,374,827	\$499,955,921
Average Price	\$117,504	\$124,547	\$127,629	\$130,185
Total Closed - New	2702	2307	2063	2,166
Total Value	\$528,453,337	\$480,027,489	\$429,361,175	\$435,364,635
Average Price	\$195,557	\$207,591	\$207,113	\$200,718
Total Listings Closed	8410	7200	6570	5,986
Total Value	\$ 1,202,273,306	\$ 1,092,296,715	\$ 1,017,736,002	\$935,320,556

¹¹ U.S. Department of Commerce, Bureau of the Census (Census 2000 Summary File 3)

¹² *MLS Statistics by Year*, Fayetteville Regional Association of Realtors, <http://www.fayettevillencrealtors.com>.

Average and median sales prices of both new and existing homes in Fayetteville for 2009 exceeded \$130,000. The average existing home sales price in 2009 was \$130,185 (28% increase from 1998) while new homes averaged \$200,718, a huge increase of 88.8% over 1998 sales prices.

Absorption Rates March 1, 2009 - February 28, 2010
New Construction

Price Range	# Active Listings	# Closed Last 12 Months	12 Month Average Closed Per Month	Available # Months Supply
<74,999	0	1	0.08	0.00
\$75,000-99,999	0	0	0.00	0.00
\$100,000-124,999	42	47	3.92	10.72
\$125,000-149,999	140	220	18.33	7.64
\$150,000-174,999	275	516	43.00	6.40
\$175,000-199,999	281	456	38.00	7.39
\$200,000-224,999	208	350	29.17	7.13
\$225,000-249,999	171	206	17.17	9.96
\$250,000-299,999	131	173	14.42	9.09
\$300,000-349,999	50	69	5.75	8.70
\$350,000-399,999	23	39	3.25	7.08
\$400,000-499,999	18	12	1.00	18.00
\$500,000-749,999	11	9	0.75	14.67
\$750,000-999,999	4	0	0.00	4.00
\$1,000,000 and up	1	0	0.00	1.00
Totals	1,355	2,098	174.83	7.75

Existing Homes

Price Range	# Active Listings	# Closed Last 12 Months	12 Month Average Closed Per Month	Available # Months Supply
<74,999	417	811	67.58	6.17
\$75,000-99,999	420	536	44.67	9.40
\$100,000-124,999	353	589	49.08	7.19
\$125,000-149,999	434	563	46.92	9.25
\$150,000-174,999	306	389	32.42	9.44
\$175,000-199,999	294	268	22.33	13.16
\$200,000-224,999	155	146	12.17	12.74
\$225,000-249,999	142	117	9.75	14.56
\$250,000-299,999	193	136	11.33	17.03
\$300,000-349,999	74	50	4.17	17.76
\$350,000-399,999	74	41	3.42	21.66
\$400,000-499,999	63	30	2.50	25.20
\$500,000-749,999	52	7	0.58	89.14
\$750,000-999,999	23	2	0.17	138.00
\$1,000,000 and up	12	0	0.00	12.00
Totals	3,012	3,685	307.08	9.81

Rental Housing

Rental units consist of a combination of single-family homes (attached or detached), various types of small complexes (one to four units) and larger apartment developments (five or more units). Census statistics classify all occupied units which are not owner occupied, whether they are rented for cash rent or occupied without payment of cash rent, as renter-occupied.

Single unit detached homes account for the majority of rental housing. Mobile homes accounted for the 2nd largest unit of the renter-occupied housing in Cumberland County.

Units by Rent Amount (2008) ¹³		
Amount of Rent	Rent	
	Units	Percent
Less than \$200	1,059	2.2%
\$200 to \$299	615	1.3%
\$300 to \$499	5,441	11.5%
\$500 to \$749	14,928	31.5%
\$750 to \$999	15,227	32.2%
\$1,000 to \$1,499	6,409	13.5%
\$1,500 or More	303	0.7%
No Cash Rent	3,358	7.1%

As shown in the table to the right, gross rents (rent plus utility expenses) range between \$500 and \$999 for most of the rental housing (63.7%) in Cumberland County. Less than one-quarter of all rental units (15%) have gross rents below \$500. The median gross rent for 2008 was \$749.

The Fair Market Rents (FMRs) for Cumberland County¹⁴ have increased on average 2% per year since 2000. The table below provides the FMRs by number of bedrooms for the last 10 years.

Fair Market Rents ¹⁵					
Year	Number of Bedrooms				
	Zero	One	Two	Three	Four
2000	\$376	\$427	\$479	\$663	\$788
2001	\$382	\$434	\$487	\$674	\$801
2002	\$393	\$447	\$501	\$694	\$824
2003	\$403	\$458	\$513	\$711	\$845
2004	\$404	\$460	\$515	\$713	\$848
2005	\$476	\$509	\$574	\$820	\$965
2006	\$487	\$526	\$588	\$835	\$988
2007	\$507	\$548	\$612	\$869	\$1,028
2008	\$546	\$591	\$660	\$937	\$1,109
2009	\$561	\$607	\$678	\$963	\$1,139
2010	\$580	\$627	\$700	\$994	\$1,176

13. Provide an estimate; to the extent information is available, of the number of vacant or abandoned buildings and whether units in these buildings are suitable for rehabilitation.

RESPONSE:

There is insufficient data to determine the availability of vacant or abandoned buildings; however, should units be identified, we will evaluate the feasibility of the project for rehabilitation to meet any of the affordable housing needs that have been identified.

¹³ U.S. Department of Commerce, Bureau of the Census (Census 2008 Estimate)

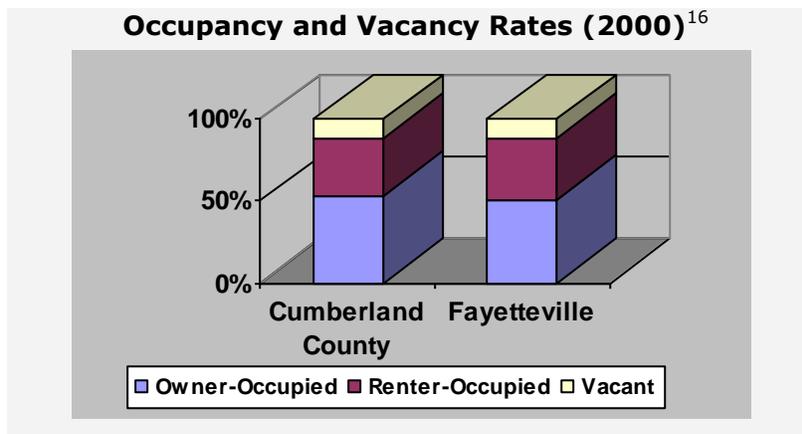
¹⁴ Cumberland County is part of the Fayetteville, North Carolina Metropolitan Statistical Area (MSA)

¹⁵ U.S. Department of Housing and Urban Development, Policy Development and Research (Data Sets: Fair Market Rents)

Below is data on vacancy rates for owner and rental units that may be feasible for assistance through our rental rehabilitation program, or the homeowner rehabilitation program if the house has been vacated due to the fact that it is not habitable.

Vacancy Rates

Even though the vacancy rate dropped from 12.8% in 2000 to 11.9% in 2008, the total number of vacant units rose significantly. Vacant rentals increased 1% while For Sale vacancies actually decreased by 27.6%, Rental housing, with a vacancy rate of 44.4% in 2000, has more unoccupied units than owner-occupied housing, which has a vacancy rate of only 2.7%. The percentage of vacant units for sale has fallen from 15.9% of all vacant housing in 2000 to 8.0% in 2009 (see table below) while the total number of vacant rental units has remained about the same at 4,965 in 2009.



The vacancy rates for both owner- and renter-occupied housing are in line with the North Carolina state average. Both the County and State have higher For Rent vacancies compared to nation, but the For Sale vacancies are significantly lower.

Vacancy Status by Year						
	2000 ¹⁷		2009 ¹⁸		Change	
	Number	Percent	Number	Percent	Number	Percent
For sale only	1,760	15.9%	1,275	8.0%	-485	-27.6%
For rent	4,914	44.4%	4,965	31.3%	51	1.0%
For seasonal, recreational, or occasional use	299	2.7%	N/A	N/A	N/A	N/A
Other Vacancies	4,094	37%	9,630	60.7%	5,536	135.2%
Homeowner Vacancy Rate	XX	XX%	XX	XX%	XX	XX%
Rental Vacancy Rate	XX	XX%	XX	XX%	XX	XX%
Total	11,067	100%	15,870	100%	4,803	43.3%

¹⁶ 2008 Census Estimates, U.S. Census Bureau, www.factfinder.census.gov.

¹⁷ 2000 Census, U.S. Census Bureau, www.factfinder.census.gov.

¹⁸ 2009 CHAS Data Set, Table 14A, U.S. Department of Housing and Urban Development, www.huduser.org.

Public and Assisted Housing 91.210 (b)

14. 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,**
- **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).**

Response:

Public or assisted housing was created by the Congress of the United States in 1937. Its purpose was to provide decent, safe, sanitary and affordable housing to families unable to pay market rate rents. The assistance was to be temporary in nature, and structured to allow residents to move in, move up and move out. Today, there are approximately 1.5 million U.S. households residing in public housing units, managed and maintained by over 3000 local housing authorities and funded on an annual basis by Congress. The funds are distributed by the Department of Housing and Urban Development (HUD) who also provides technical assistance and oversees compliance governed by the authority of Federal law and regulations. The Section 8 Housing Choice Voucher Program is the federal government’s program for assisting very low-income families to include elderly and disabled individuals with renting decent, safe, sanitary and affordable housing in the community.

Fayetteville Metropolitan Housing Authority

The Fayetteville Metropolitan Housing Authority administers the Public Housing Units and Voucher Program locally. As a part of the consultation process, Community Development staff met with the Fayetteville Metropolitan Housing Authority (FMHA) on February 15, 2010. During this meeting, needs were discussed in the following areas:

- Public Housing Units – The Fayetteville Metropolitan Housing Authority owns and manages 1,045 public housing units including 921 units in 12 developments and 124 scattered site single-family units. Thirty-eight units are completely Section 504 compliant. There are approximately 391 persons on the waiting list for public housing units. There is not a separate waiting list for disabled applicants. Each applicant’s needs are assessed at the time of final approval. The waiting time for public housing units currently takes about 6-8 months. As shown in the table below, all 12 developments are located in the City of Fayetteville.

Inventory of Public Housing – 2009

Development	Census Tract	Total Units
Grove View Terrace Apts. (I & II)	1	212
Delona Gardens Apts.	2	55*
Campbell Terrace Apts.	2	194*
Point Place Apts.	2	52
Stanton Arms Apts.	4	52
Holland Homes	6	60
Murchison Townhouse Apts.	10	60
Blueberry Place Apts.	12	48

Development	Census Tract	Total Units
Melvin Place Apts.	12	58
McNeill Apts.	18	50
Lewis Heights Apts.	23	48
Hillside Manor Apts.	25.01	32
Scattered site single-family units	scattered	124
Total		1,045

Source: Fayetteville Metropolitan Housing Authority

*These units are slated for revitalization as a part of the HOPE VI project.

Of the 921 public housing units located at the 12 developments, 731 [79%] are located in low income census tracts [CTs] and 413 [56.5%] are located in census tracts with minority concentrations. The following table shows that about one-third of the public housing units are located in CT 2 and 23% are located in CT 1. CT 2 contains a concentration of minority households, a majority of the households are low income, 71% of the households are female headed, and about 70% of the family households have children. In CT 1, the majority of the households are low income, 57% of the households are female headed, and 61% of the population age five and over has a disability.

- Section 8 Vouchers – Participants of the Section 8 Leased Housing Program are allowed to find and lease privately owned single-family homes, apartments and manufactured homes. The participants possessing a Housing Choice Voucher are allowed to choose any housing that meets the Program requirements if the owner agrees to participate. The Fayetteville Metropolitan Housing Authority issues a Voucher to an eligible applicant and the family then locates suitable housing. All units must meet housing quality standards set by HUD regulations and the Housing Authority’s policies. The Voucher holder’s portion of rent is determined by their income. Once all Program requirements and regulations are met, the Housing Authority pays a subsidy directly to the owner/landlord/agent on behalf of the low-income family. This subsidy is the difference between the actual rent charged by the landlord and the amount paid by the participants. FMHA currently has 1,769 vouchers. However, it is estimated that this figure will be reduced in future years due to funding reductions. There are currently 722 persons on the Section 8 waiting list; therefore, FMHA is not accepting new applicants at this time. However, community will receive 20 additional Section 8 vouchers specifically for veterans.
- Scattered Site Housing – FMHA also owns 124 scattered site housing units that are not Section 8 voucher units. Residents must be in good standing for a least 1 year before approved for scattered site housing. Rent is structured on a flat rate based on bedroom size. These residents are often good candidates for homeownership.
- Physical Condition of Units – The physical condition of the FMHA units all meet housing quality standards. The FMHA has been considered a high performing housing authority for the last 15 years.
- Restoration and Revitalization - The Fayetteville Metropolitan Housing Authority was awarded a \$20,000,000 HOPE VI grant to revitalize the Old Wilmington Road area by replacing 249 existing distressed public housing units and obsolete infrastructure with 747 new mixed-income rental units (550) and homeownership dwellings (105), and providing 72 new housing units for disadvantaged persons at seven scattered sites. The City of Fayetteville has committed to \$10,616,876 in financial support towards the

revitalization project. Cumberland County has committed to \$4,000,000 in financial support toward community infrastructure.

- **Homeless Preference** – There is currently no emergency housing or a preference for the homeless. Homeless individuals are worked into the system just as other citizens needing housing. Obstacles to assisting homeless individuals include:
 - Failure to have proper identification documents and birth certificates in order to apply for housing;
 - Criminal history such as felonies or current drug abuse prohibit their entry (per HUD mandates); and
 - Need for continued case management to help resolve issues that resulted in homelessness. Often those same issues lead to their eviction. All residents evicted are referred to Legal Aide for consultation.

North Carolina Indian Housing Authority

The North Carolina Indian Housing Authority owns and manages 92 public housing units at Eagles Nest Apartments, which is located in CT 14, within the city limits of Fayetteville

15. 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).

Response:

In addition to the public housing units described above, the jurisdiction also has available non-public “assisted rental housing.” The North Carolina Housing Finance Agency has identified 1,320 units developed with the use of Low Income Housing Tax Credits [LIHTC]. The US Department of Agriculture Rural Development reports that there are four multi-family housing developments with 275 apartments in Cumberland County.

Inventory of Assisted Rental Housing – 2010

Development	Census Tract	Total Units	Funding	Income Target	Type of Housing
City of Fayetteville					
Adams Court Apartments	8	40	LIHTC	60% & below ¹	Elderly
Haymount Manor Apartments	9	48	LIHTC	60% & below ¹	Elderly
Rosehill Gardens	12	100	LIHTC	60% & below ¹	Family
Eastside Green I	14	60	LIHTC	60% & below ¹	Family
Eastside Green II	14	48	LIHTC	60% & below ¹	Family
Blanton Green Apartments	23	48	LIHTC	60% & below ¹	Family
Blanton Green Apartments II	23	48	LIHTC	60% & below ¹	Family
Blanton Green Apartments III	23	36	LIHTC	60% & below ¹	Family
Rosehill West Apartments	24	76	LIHTC	60% & below ¹	Family
Longview Apartments	25.02	48	LIHTC	60% & below ¹	Family
Bunce Green Apartments	33.02	80	LIHTC	60% & below ¹	Family
Bunce Manor Apartments	33.02	48	LIHTC	60% & below ¹	Family
Maple Ridge I	33.07	48	LIHTC	60% & below ¹	Family
Maple Ridge III	33.07	80	LIHTC	60% & below ¹	Family
Total		856			

¹Aarea media income

Inventory of Assisted Rental Housing – 2010

Development	Census Tract	Total Units	Funding	Income Target	
Cumberland County outside City					
Legion Manor Apartments	16.01	44	LIHTC	50-60% ¹	Family
Pine Chase	16.01	32	LIHTC	50-60% ¹	Family
Pineridge Manor	16.01	60	LIHTC	50-60% ¹	Elderly
Legion Crossing	16.0	48	LIHTC	50-60% ¹	Elderly
Southview Green Apartments	16.02	72	LIHTC	50-60% ¹	Family
Southview Villas	16.02	64	LIHTC	50-60% ¹	Family
Crosswinds Green	16.02	48	LIHTC	50-60% ¹	Family
Crosswinds Green II	16.02	48	LIHTC	50-60% ¹	Family
Golfview Apartments	16.02	48	LIHTC	50-60% ¹	Family
Fairview Forest	31	41	USDA	50-60% ¹	Family
Fairview Forest II	31	48	USDA	50-60% ¹	Family
Village Green I	31	120	USDA	50-60% ¹	Family
Village Green II	31	66	USDA	50-60% ¹	Family
Spring Lake Green	712	48	LIHTC	50-60% ¹	Family
Total		739			

Source: North Carolina Housing Finance Agency/USDA, Rural Development

Of the 856 assisted rental-housing units in the City of Fayetteville, only Rosehill Apartments (100 units) is located within a low income (64% AMI) and high minority (71%) census tract. Of the 739 assisted rental housing units in the County outside of the City, the new Spring Lake Green Apartments (48 units) is located within a low-mod income census tract (81% AMI).

Cumberland County has facilitated the development of the other assisted rental units by establishing policies in their HUD *Consolidated Plan – FY 2005-2010* and through providing certifications of consistency with their *Consolidated Plan*. The goal is to prevent developing high concentration areas of low income households, many of whom are members of protected classes.

Other private assisted housing developments are listed on the following table. Other than 249 public housing units identified in question 14 above that will be lost as a part of the HOPE VI revitalization of the Old Wilmington Road community, it is estimated that none of the units identified will be lost during the next consolidated planning period.

The table on the next page lists private assisted housing developments in Cumberland County.

Private Assisted Housing Developments

Property	Bedroom Size	Number of Units
COLONY PLACE APARTMENTS 1 EMERSON AVE FAYETTEVILLE, NC 28306-2061 Phone: 910-486-6034	2 & 3	100
FAYETTEVILLE GARDENS 2927 Gordon Way Fayetteville, NC 28303-5485 Phone: 910-483-0274	1, 2, 3 & 4	100
MOUNT SINAI HOMES 703 BLUE ST FAYETTEVILLE, NC 28301-4525 Phone: 910-483-8404	1, 2, 3 & 4	99
ROSEHILL GARDEN APARTMENTS 216 TIFFANY CT FAYETTEVILLE, NC 28301-6713 Phone: 910-488-1330	1, 2, 3 & 4	100
TERA GARDENS APARTMENTS 233 LAW RD FAYETTEVILLE, NC 28311-2717 Phone: 910-488-4166	1, 2, & 3	120
TOPEKA HEIGHTS 2909 Dwelle Drive FAYETTEVILLE, NC 28306-3220 Phone: 910424-6415	1, 2, 3 & 4	150
CUMBERLAND GARDENS 812 MCLAMB CT SPRING LAKE, NC 28390-3164 Phone: 9104972948	1, 2, & 3	99
Total Units		768

Homeless Inventory 91.210 (c)

16. 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 or in the CPMP Tool Needs Table. 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. This inventory of facilities should include (to the extent it is available to the jurisdiction) an estimate of the percentage or number of beds and supportive services programs that are serving people that are chronically homeless.

Response:

The needs of the homeless can only be met by having viable agencies and citizen groups available to provide housing and services. The following charts from the 2009 HUD Housing Inventory Charts submitted to HUD on behalf of the COCPC provide an inventory of the current housing available within the continuum of care for the homeless.

2009 HUD Housing Inventory Chart: Emergency Shelter

Program Information			Target Population		HUD Funding Information	All Year-Round Beds/Units			
Organization Name	Program Name	Inventory type	A	B	Does this program receive HUD McKinney-Vento funding?	Beds for HH with Children	Units for HH with Children	Beds for HH w/o Children	Total Year-Round Beds
Care Family Violence Center	Care Center	C	SFHC	DV	Yes	9	3	5	14
City Rescue Mission	City Rescue Mission	N	SF		No	0	0	6	6
Cumberland IHN	CIHN Emergency Shelter	C	HC		Yes	14	4	0	14
Green's Shelter for Women	Green's Shelter for Women	C	SF		No	0	0	10	10
Salvation Army	Salvation Army Shelter	C	SMF+HC		Yes	8	2	48	56
Gospel Services Benevolent Society	Hope Center	U	SM		No	0	0	21	21

2009 HUD Housing Inventory Chart: Transitional Housing

Organization Name	Program Name	Inventory type	A	B	Does this program receive HUD McKinney-Vento funding?	Beds for HH with Children	Units for HH with Children	Beds for HH w/o Children	Total Year-Round Beds
Cumberland County Community Development	Robins Meadow	C	HC		Yes	32	12	0	32
Cumberland IHN	Ashton Woods	C	HC		Yes	80	20	0	80
Salvation Army	Step Up Program	C	SM		Yes	0	0	6	6
Salvation Army	Care Transitional Housing	C	SMF+HC	DV	Yes	33	14	0	33
Save The Babies House of Refuge	Save The Babies House of Refuge	C	SF		No	0	0	10	10

2009 HUD Housing Inventory Chart: Permanent Supportive Housing

Organization Name	Program Name	Inventory type	A	B	Does this program receive HUD McKinney-Vento funding?	Beds for HH with Children	Units for HH with Children	Beds for HH w/o Children	CH Beds	Total Year-Round Beds
Cumberland IHN	Leath Commons	C	HC		Yes	15	5	0	0	15
Cumberland IHN	Genesis Cedric St	U	SMF+HC		No	0	0	0	0	0
Cumberland IHN	Genesis Kincaide 1	N	HC		No	8	2	0	0	8
Cumberland IHN	Genesis Kincaide 2	U	HC		No	0	0	0	0	0
Salvation Army	Bonanza	U	SMF+HC		Yes	0	0	0	0	0

Please also refer to the CPMP Tool Homeless Needs Table at Appendix C.

Special Need Facilities and Services 91.210 (d)

17. Describe, to the extent information is available, the facilities and services that assist persons who are not homeless but require supportive housing, and programs for ensuring persons returning from mental and physical health institutions receive appropriate supportive housing.

Response:

Supportive Housing for Non-Homeless Persons with Special Needs

Supportive housing is defined as living units that provide a planned services component with access to a range of services identified as necessary for the residents to achieve personal goals.

In Cumberland County, the following services are available to assist those with special needs.

Services for Special Needs Population (developmental and physically disabled)

Agency	Service
The ARC of Cumberland County	Education and resources
The Autism Society of Cumberland County	Parent education, support and referral, conference scholarships, summer day camp, teacher grants, and family outings
Cumberland County Department of Public Health	Children’s health to include immunizations, vision, hearing, etc; dental services from birth to 14 years of age, and adult health clinic for adults with Medicare, Medicaid or without insurance
Children’s Developmental Services Agency	Early intervention services for children with developmental delays
Community Alternatives Program (CAP) for persons with Mental Retardation / Developmental Disability (MR/DD) or Disabled Adults (DA)	Community and home based services to enable individuals to remain in home
Easter Seals UCP – Spainhour Center	Developmental day center services for children birth through five years old
Cumberland County Schools Exceptional Children’s Program	Specialized instruction in typical school environment
Cumberland County Mental Health Local Management Entity	Provides comprehensive treatment, case management, and manages therapeutic foster homes for county residents.

The table on the next page lists housing that is available within Cumberland County for those with special needs.

Housing for those with Special Needs (developmentally or physically disabled)

Property	Bedroom Size	Property	Bedroom Size
ABILITIES @BARTON'S LANDING 683 Bartons Landing Pl Fayetteville, NC 28314-1012 Phone: 910-826-4699	2	ARC/HDS CUMBERLAND CO GROUP HOME #2 224 RANDOLPH AVE FAYETTEVILLE, NC 28311-2743 Phone: 910-822-5551	1
ABILITIES @CUMBERLAND TOWERS 2520 Cumberland Creek Dr. Fayetteville, NC 28306	1	ARC/HDS CUMBERLAND CO. GH #7 250 PRINCE CHARLES DR FAYETTEVILLE, NC 28311-0834 Phone: 910-630-2331	
ARC/HDS CUMBERLAND CO GH #1 635 DASHLAND DR FAYETTEVILLE, NC 28303-3317 Phone: 910-868-6208	1	BRIARCLIFF CONDOS 1800 Tryon Drive Fayetteville, NC 28303 Phone: 910-826-4699	2
ARC/HDS CUMBERLAND CO GH #3 323 SINCLAIR CIR FAYETTEVILLE, NC 28301-7668 Phone: 910-485-4487	1	CAC OF CUMBERLAND CO.#1 3410 MIRACLE LN FAYETTEVILLE, NC 28301-3216 Phone: 910-822-8513	1
ARC/HDS CUMBERLAND CO GH #4 1533 MINTZ AVE FAYETTEVILLE, NC 28303-3036 Phone: 910-822-8758	1	CAC OF CUMBERLAND CO.#2 1132 Camden RD FAYETTEVILLE, NC 28306-1778 Phone: 910-485-4979	1
ARC/HDS CUMBERLAND CO GH #6 2001 SOUTHERN AVE FAYETTEVILLE, NC 28306-1757 Phone: 910-486-4021	1	ARC/HDS CUMBERLAND CO GH #5 5713 NEWTON ST HOPE MILLS, NC 28348-1801 Phone: 9104250791	1

Also refer to the response to question 10 above for a description of housing/services available for the elderly and those with HIV/Aids.

Barriers to Affordable Housing 91.210 (e)

18. 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.

Response:

Expanding Affordable Housing Choices

Although Cumberland County has relatively low-cost housing, not all groups benefit. Much of the housing for sale, even at the lower end, is priced beyond the means of lower-income families. While rental housing is less expensive, the majority of multi-family housing consists of smaller one- and two- bedroom units.

Historically, the region has had a sufficient stock of single-family home rentals, but where larger households have difficulties is locating housing with three or more bedrooms. The cost to rent these larger single family homes can be expected to increase beyond the reach of many low-income minority households. In fact,

according to the 2008 Census Estimates, 48% of all renters pay 30% or more of their incomes on rent alone.

Moreover, demographic data show that minority families on average have lower per capita income and larger household sizes in nearly all communities. These families find themselves in a highly competitive market for the few larger rental units available. Poverty rates for single females with children are high across the county.

There is insufficient financing to develop the amount of affordable housing required to address the needs of lower income households as evidenced by the waiting lists for assisted housing, public housing and Section 8 Rental Assistance Program.

Home Mortgage Lending Practices

Historically, barriers to Fair Housing Choice have included the practices of the lending community that have denied mortgages to minorities, especially African Americans, at a substantially higher rate than Caucasians. An analysis of Home Mortgage Disposition Act [HMDA] from 2005 through 2008 reveals this trend exists in Cumberland County and the City of Fayetteville.

Since 2005, less than 50% of all African Americans were able to originate a housing loan/mortgage while whites have had closer to 60% of all applications result in loan origination. The table on the next page gives a detailed loan application origination/denial rate by racial group.

Even African Americans in the 120% and high Area Median Income since 2005 haven't had more than 50% of loan applications approved. However, Asians have experienced good loan origination rates with low denial rates.

While there is a clear trend present, it is not, however, possible to determine if the lending sector could be considered an impediment based on HMDA data alone. It is unclear if these minority applicants were denied for authentic economic reasons and merits further study by Cumberland County and the City of Fayetteville.

The table on the next page lists HMDA data statistics.

Table: HMDA Data 2005-2008 by Race

Mortgage/Loan Applications by Race		Apps Received	Loans Originated	Origination Percentage	Apps Approved - Not Accepted	Apps Denied	Denial Percentage	Apps Withdrawn	Files Closed For Incompleteness
2005 Totals	American Indian/Alaska Native	337	128	38.0%	33	120	35.6%	43	13
	Asian	344	215	62.5%	25	54	15.7%	40	10
	Black/African American	8,404	3,554	42.3%	703	2,902	34.5%	994	251
	Nat. Hawaiian/Other Pac. Islander	139	60	43.2%	13	49	35.3%	13	4
	White	12,712	7,524	59.2%	820	2,795	22.0%	1,200	373
	2 or More Minority Races	34	24	70.6%	1	8	23.5%	1	0
	Joint (White/Minority)	454	277	61.0%	20	115	25.3%	34	8
	Race Not Available	5,752	1,640	28.5%	362	2,186	38.0%	945	618
	Hispanic	1,359	704	51.8%	102	381	28.0%	130	42
Totals	28,176	13,422	47.6%	1,977	8,229	29.2%	3,270	1,277	
2006 Totals	American Indian/Alaska Native	317	119	37.5%	23	134	42.3%	30	9
	Asian	418	278	66.5%	26	79	18.9%	24	10
	Black/African American	8,127	3,738	46.0%	643	2,893	35.6%	899	235
	Nat. Hawaiian/Other Pac. Islander	171	78	45.6%	21	57	33.3%	6	9
	White	12,566	7,501	59.7%	913	2,656	21.1%	1,145	278
	2 or More Minority Races	46	16	34.8%	0	25	54.3%	5	0
	Joint (White/Minority)	476	233	48.9%	36	137	28.8%	62	8
	Race Not Available	5,674	2,109	37.2%	437	1,989	35.1%	869	361
	Hispanic	1,529	872	57.0%	126	352	23.0%	129	38
Totals	27,795	14,072	50.6%	2,099	7,970	28.7%	3,040	910	
2007 Totals	American Indian/Alaska Native	267	130	48.7%	25	92	34.5%	19	1
	Asian	361	212	58.7%	32	70	19.4%	34	13
	Black/African American	7,717	3,243	42.0%	640	2,812	36.4%	871	151
	Nat. Hawaiian/Other Pac. Islander	147	60	40.8%	17	57	38.8%	13	0
	White	11,476	6,838	59.6%	883	2,468	21.5%	1,020	267
	2 or More Minority Races	56	23	41.1%	5	19	33.9%	8	1
	Joint (White/Minority)	468	228	48.7%	33	154	32.9%	45	8
	Race Not Available	4,435	1,502	33.9%	432	1,571	35.4%	766	164
	Hispanic	1,458	751	51.5%	125	434	29.8%	129	19
Totals	24,927	12,236	49.1%	2,067	7,243	29.1%	2,776	605	
2008 Totals	American Indian/Alaska Native	224	98	43.8%	11	95	42.4%	17	2
	Asian	308	167	54.2%	22	70	22.7%	46	9
	Black/African American	5,299	2,385	45.0%	371	1,924	36.3%	533	87
	Nat. Hawaiian/Other Pac. Islander	134	65	48.5%	12	40	29.9%	16	3
	White	9,946	6,134	61.7%	528	2,162	21.7%	956	164
	2 or More Minority Races	43	17	39.5%	1	20	46.5%	5	1
	Joint (White/Minority)	359	186	51.8%	25	91	25.3%	47	12
	Race Not Available	2,798	978	35.0%	198	1,113	39.8%	417	90
	Hispanic	1,220	665	54.5%	69	336	27.5%	140	10
Totals	19,111	10,030	52.5%	1,168	5,515	28.9%	2,037	368	

Accessibility to Effective Public Transportation

Public transportation plays a role in expanding the supply of affordable housing to groups in need and others protected under fair housing laws. At issue is the ease with which a citizen can travel from home to work if he/she lives in a lower income area or an area of minority concentration. If public transportation from a lower cost neighborhood is inefficient in providing access to employment centers, that neighborhood becomes inaccessible to those without dependable means of transportation, particularly very low-income residents, the elderly, and persons with disabilities.

While the City of Fayetteville does provide public transportation options through its Fayetteville Area System of Transit (FAST), it does not have adequate service routes to all areas of the City or into areas outside of Fayetteville to the rest of Cumberland County; has limited hours of operation which does not provide assistance for those working 2nd and 3rd shift jobs or on weekends (especially Sunday), and the length of time it takes a citizen to utilize the current bus routes can be quite lengthy according to rider feedback.

The City of Fayetteville and Cumberland County conducted a Fair Housing Survey over 30 days in November and December 2009. The survey was made available to citizens at each of the local libraries and the County Regional Centers. An online version was also available. While the HMDA data seems to reflect a trend in potential discrimination towards minorities, particularly African Americans, 57% of the City of Fayetteville and Cumberland County residents who participated in the Fair Housing Survey stated that they were not aware of any problems faced by minorities in securing a mortgage loan.

Land Use and Zoning

Zoning regulations were examined to determine if the entitlement jurisdiction encourages development and maintenance of affordable housing or imposes barriers to the detriment of affordable housing. Planning tools of interest include inclusionary zoning ordinances and density bonuses.

Land use and zoning regulations are sometimes used to discriminate against people under the guise of preserving "neighborhood character". Zoning and land use policies relating to occupancy restrictions, family definition, and constraints on group homes for persons with disabilities were reviewed for their effect on fair housing choice. The County does not limit the number of occupants in a dwelling beyond the number allowed by the Uniform Housing Code.

The County's definition of family excludes unrelated groups of more than five persons. State statutes that interpret federal disability law give groups of up to six persons the right to live in residential neighborhoods without conditional or special use permits. Furthermore, Fair Housing Law prohibits discrimination on the basis of familial status.

STRATEGIC PLAN

The strategic plan must describe how the jurisdiction plans to provide new or improved availability, affordability, and sustainability of decent housing, a suitable living environment, and economic opportunity, principally for extremely low-, low-income, and moderate-income residents.

General Priority Needs Analysis and Strategies 91.215 (a)

19. In this narrative, describe the reasons for setting priorities for allocating investment among different activities and needs, as identified in tables* prescribed by HUD. 92.215(a) (1)

***If using the CPMP Tool: Complete and submit the CPMP Tool Needs Table.**

Response: In development of the Consolidated Plan, compilation and analysis of statistical data and community input through surveys, community meetings, meetings with elected officials, and meetings with agency providers in the areas of affordable housing and supportive services; fair housing; and homelessness was used to set priorities for allocating investments. The priority needs were established after considering:

- a. Needs identified in the Housing and Market Analysis;
- b. Housing and Homeless Needs Assessment;
- c. Citizen Surveys and Agency Meetings;
- d. Eligibility of Activities that can be funded with federal funds; and
- e. Resources available.

Please also refer to the CPMP Tool Needs Tables at Appendix C.

20. Describe the geographic areas of the jurisdiction (including areas of low income families and/or racial/minority concentration) in which assistance will be directed.

Response: The towns of Eastover, Falcon, Godwin, Hope Mills, Linden, Spring Lake, Stedman, and Wade have all elected to remain parties to Cumberland County's designation as an Urban County. All of the programs described on the following pages, with the exception of certain Public Service Programs and Supportive Housing Program projects (which address the needs of the entire community) will be accomplished in one of these municipalities or the unincorporated areas of the County.

See Appendix D for Maps of the participating jurisdiction, areas of low income and minority concentration as well as other demographic statistics for Cumberland County.

21. If applicable, identify the census tracts for Neighborhood Revitalization Strategy Areas and/or any local targeted areas.

Response: N/A

22. 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)).

Response: Funding is allocated programmatically versus geographically because all programs are offered county-wide (throughout the participating jurisdiction). The priority needs were established after considering:

- a. Needs identified in the Housing and Market Analysis;
- b. Housing and Homeless Needs Assessment;
- c. Citizen Surveys and Agency Meetings;
- d. Eligibility of Activities that could be funded with federal funds; and
- e. Resources available.

23. If appropriate, the jurisdiction should estimate the percentage of funds the jurisdiction plans to dedicate to Neighborhood Revitalization Strategy Areas and/or any local targeted areas.

Response: N/A

24. Identify any obstacles to meeting underserved needs.

Response: The primary obstacle to meeting underserved needs is lack of funding and available resources. Another obstacle to assisting those that are extremely low-income (0-30% of the median income) with affordable housing is financial literacy issues (i.e. credit, budgeting, etc.).

Specific Objectives 91.215 (a) (4)

25. Summarize priorities and specific objectives the jurisdiction intends to initiate and/or complete in accordance with the tables* prescribed by HUD. Outcomes must be categorized as providing either new or improved availability/accessibility, affordability, or sustainability of decent housing, a suitable living environment, and economic opportunity.

Goals and objectives to be carried out during the strategic plan period are indicated by placing a check in the following boxes.

<input type="checkbox"/> Objective Category Decent Housing Which includes:	<input type="checkbox"/> Objective Category: Expanded Economic Opportunities Which includes:	<input type="checkbox"/> Objective Category: Expanded Economic Opportunities Which includes:
<input checked="" type="checkbox"/> assisting homeless persons obtain affordable housing	<input type="checkbox"/> improving the safety and livability of neighborhoods	<input checked="" type="checkbox"/> job creation and retention
<input checked="" type="checkbox"/> assisting persons at risk of becoming homeless	<input type="checkbox"/> eliminating blighting influences and the deterioration of property and facilities	<input type="checkbox"/> establishment, stabilization and expansion of small business (including micro-businesses)
<input checked="" type="checkbox"/> retaining the affordable housing stock	<input type="checkbox"/> increasing the access to quality public and private facilities	<input checked="" type="checkbox"/> the provision of public services concerned with employment
<input checked="" type="checkbox"/> increasing the availability of affordable permanent housing in standard condition to low-income	<input type="checkbox"/> reducing the isolation of income groups within areas through spatial de-concentration of housing	<input checked="" type="checkbox"/> the provision of jobs to low-income persons living in areas affected by those programs and

<input type="checkbox"/>	Objective Category Decent Housing Which includes:	<input type="checkbox"/>	Objective Category: Expanded Economic Opportunities Which includes:	<input type="checkbox"/>	Objective Category: Expanded Economic Opportunities Which includes:
	and moderate-income families, particularly to members of disadvantaged minorities without discrimination on the basis of race, color, religion, sex, national origin, familial status, or disability		opportunities for lower income persons and the revitalization of deteriorating neighborhoods		activities under programs covered by the plan
<input checked="" type="checkbox"/>	increasing the supply of supportive housing which includes structural features and services to enable persons with special needs (including persons with HIV/AIDS) to live in dignity and independence	<input type="checkbox"/>	restoring and preserving properties of special historic, architectural, or aesthetic value	<input checked="" type="checkbox"/>	availability of mortgage financing for low income persons at reasonable rates using non-discriminatory lending practices
<input type="checkbox"/>	providing affordable housing that is accessible to job opportunities	<input type="checkbox"/>	conserving energy resources and use of renewable energy sources	<input checked="" type="checkbox"/>	access to capital and credit for development activities that promote the long-term economic social viability of the community

Response:

In addition to the needs identified in the table below, also refer to the CPMP Tool Summary of Specific Objectives Tables at Appendix C.

Housing Needs – Objective: Decent Housing Priority Need: Affordable Housing	
Goal 1: Increase the availability and accessibility of decent, safe, and affordable housing in Cumberland County.	Objective 1: To rehabilitate 125 owner-occupied units and 20 rental units from 2010 to 2015.
Goal 2: Increase the availability and accessibility of decent, safe, and affordable housing in Cumberland County.	Objective 2: Provide assistance to 75 low/moderate income citizens to become first-time home buyers from 2010 to 2015.
Goal 3: A County in which all rental housing is affordable and in standard condition.	Objective 3: Provide 125 additional standard rental units that are affordable to very low-and-income residents from 2010-2015.
Goal 4: Alleviate lead-based paint hazards in Cumberland County’s housing inventory.	Objective 4: Make available educational literature to at least 500 households that may be potentially affected by lead-based paint from 2010-2015.
Goal 5: To eliminate housing discrimination in Cumberland County.	Objective 5: Increase awareness of fair housing law for 15 providers serving minorities and special populations groups from 2010-2015.

HOUSING

Priority Housing Needs 91.215 (b)

26. Describe the relationship between the allocation priorities and the extent of need given to each category specified in the Housing Needs Table (Table 2A or Needs.xls). These categories correspond with special tabulations of U.S. census data provided by HUD for the preparation of the Consolidated Plan.

Response:

Based on the housing needs analysis demonstrated in the Housing Needs Table, here is a high need identified for renters and owners that demonstrate any housing problem, particularly for those that are 0% - 50% of the area median income. This was considered in establishing a priority need to encompass affordable housing options for both renters and owners. To address such needs, allocation priorities were made in the areas of housing rehabilitation (renters and owners) and housing development to include new construction or rehabilitation of affordable single-family units for homeownership and multi-family rental units. The goal will be to identify projects that will serve those that are in the low to very low income range.

27. 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, particularly among extremely low-income, low-income, and moderate-income households.

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.

Response:

Renter Households

According to the HUD CHAS data, renter households in Cumberland County outside of Fayetteville numbered 20,848 in 2000. Of these, 54% had incomes up to 80% of the MFI. Among all lower income renter households, those with incomes between >50-80% of the MFI were the largest group at 5,601. Among household types, small families were the most numerous (68%).

Extremely Low Income (0-30% of MFI)

Extremely low income households were the second-largest category of renters, accounting for 25% of renters with incomes up to 80% of the MFI. Small families were the largest subcategory and accounted for 52% of this income group, while elderly households accounted for 14%. Large families were the smallest subcategory at 6%. All other household types comprised 28% of all extremely low income renter households.

Overall, 66% of these households reported housing problems. The occurrence of cost burden was slightly lower at 64%, and extreme cost burden was reported by 54% of all extremely low income renter households.

Housing problems reported by renters in this income group were high, ranging from 83% among large families to 60% among all other household types. Similarly, households in this income group reported high rates of cost burden where renters were paying more than 30% of their income toward housing costs. Cost-burdened households ranged from 78% among large families to 59% among all other household types. The rates of households experiencing

extreme cost burden were highest among large families at 63% and lowest among all other household types at 49%.

In summary, large families were the smallest household type (by number) among extremely low income renters but experienced the highest rates of housing problems and cost burden. However, all household types in this income group have significant housing problems with high rates of cost burden and extreme cost burden. Typically, rental assistance is the greatest need among these households, as well as housing rehabilitation of substandard units.

Very Low Income (>30-50% of MFI)

Very low income households accounted for 25% of all lower income renter households and were the smallest income group. Elderly households represented 7% of this income group, large families represented 11%, and all other household types accounted for 24%. Small families were the largest group with 58%.

As a group, these households experienced housing problems at a rate of 62%. Cost burden rates were significantly lower than among extremely low income households: 57% of very low income renter households paid 30% or more of their income on housing costs, while 18% paid 50% or more.

Housing problems reported among the household types within this income group were also lower than among extremely low income renters. The rate of housing problems ranged from 48% among elderly households up to 78% among all other household types. In all categories of housing problems and cost burden, all other household types were the most severely impacted and had the highest rates in this income group. In summary, large families were the smallest household type (by number) among extremely low income renters but experienced the highest rates of housing problems and cost burden. However, all household types in this income group have significant housing problems with high rates of cost burden and extreme cost burden.

Typically, rental assistance is the greatest need among these households, as well as housing rehabilitation of substandard units.

Low Income (>50-80% of MFI)

As the income level rises among renter households, the degree of housing problems and cost burden decrease but at varying rates among the various household types. Low income renters account for 50% of all lower income renters but have lower rates of housing needs than other renters. Of all low income renter households in the County outside of the City, 36% experienced some type of housing problem, 27% experienced cost burden and only 3% of these households were extremely cost burdened.

Housing problems ranged from 25% among elderly households and small families to a high of 37% among small families. Cost burden continued to decline among households in this income group from the higher rates noted in extremely low income and very income renter households. Rates ranged from 18% for large families to a high of 30% for all other household types.

Extreme cost burden remained a problem for some groups, though, ranging from 0% among large families to a high of 12% among elderly households. In summary, housing rehabilitation and rental assistance appear to be significant needs for low income households, but at a lower rate than among extremely low and very low income renter households in Cumberland County outside of Fayetteville.

Owners

According to the HUD CHAS data, owner households of any type and income level numbered 37,457 in Cumberland County outside of Fayetteville in 2000. Of these, 9,752 households with incomes up to 80% of the MFI and classified as lower income. This represented 26% of all owner households. Lower income renters outnumbered lower homeowners in the County outside of the City by 14%.

Extremely Low Income (0-30% of MFI)

Extremely low income homeowners were the smallest group of homeowners and accounted for 22% of all lower income owner households. Overall, this income group experienced the greatest degree of housing problems and cost burden than both owner and renter households of higher income groups. Seventy-two percent (72%) of extremely low income owner households had housing problems of one type or another; 71% experienced cost burden; and, another 59% were extremely cost burdened.

Large family households experienced the highest rate of housing problems (83%) even though they constituted the smallest household type (by number) in this income group. Small families follow with 76% and all other household types with 72%. Elderly households had the lowest rate at 66%.

The rate of cost burden among this income group was also quite severe. Rates of cost burden ranged from 75% among small families and large families to a low of 66% for elderly households.

Extreme cost burden for owners in this income group was also very severe with 69% of all large families impacted as well as 52% of all elderly households affected. In summary, the high rates of cost burden on these households will impact their ability to perform routine as well as major maintenance and repairs on their housing units.

Housing rehabilitation funding could assist with the repair and upgrade work, but would not impact the degree of cost burden.

Very Low Income (>30-50% of MFI)

Very low income homeowners accounted for 27% of all lower income homeowners. Overall, this income group was only slightly better off financially than extremely low income homeowners. Housing problems were reported by 64% of all owners. Cost burden was a problem for 64% of owners, while 42% were extremely cost burdened. Housing problems were greatest among large families (96%) and lowest among the elderly (43%). Cost burden was also greatest among large families (88%) and lowest among the elderly (43%). Extreme cost burden ranged from 23% among the elderly up to 58% for all other household types.

Similar to extremely low income homeowners, housing rehabilitation for these households would be beneficial.

Low Income (>50-80%)

Low income owners accounted for 51% of all lower income owners in the County outside of the City, and comprised the largest income category of homeowners. Rates of housing problems and cost burden were lower in this group but still significant. Fifty-seven percent (57%) of the households reported housing problems, 54% were cost burdened and 16% were extremely cost burdened.

Housing problems ranged from 34% for elderly owners up to 70% for large families. The degree of cost burden ranged from 33% for elderly owners up to 61% for small families. The

degree of extreme cost burden ranged from a low of 8% among large families to a high of 26% among all other household types.

Similar to other lower income homeowners, housing rehabilitation for these households would be beneficial.

28. Identify any obstacles to meeting underserved needs.

Response: The primary obstacle to meeting the unmet housing needs is lack of available funding. Also, Cumberland County has a small number of private developers producing affordable housing. We also lack a number of experienced non-profit affordable housing developers. Affordable housing is being developed, but in small numbers in comparison to the need.

Specific Objectives/Affordable Housing 91.215 (b)

Note: Specific affordable housing objectives must specify the number of extremely low-income, low-income, and moderate-income households to whom the jurisdiction will provide affordable housing as defined in 24 CFR 92.252 for rental housing and 24 CFR 92.254 for homeownership. (24 CFR 91.215(b) (2))

29. Identify each specific housing objective by number (DH-1, DH-2, DH-2), proposed accomplishments and outcomes the jurisdiction hopes to achieve in quantitative terms over a specified time period, or in other measurable terms as identified and defined by the jurisdiction.

Response: Based on the Housing Market Analysis and the Housing and Homeless Needs Assessment, the housing priority was determined to be affordable housing options to include housing rehabilitation for renters and owners; affordable mortgage products; availability of affordable units for both renters and owners; and transitional housing. The following goals, objectives and strategies were established to address these needs:

Goal 1: Increase the availability and accessibility of decent, safe, and affordable housing in Cumberland County.

Objective1: To rehabilitate 125 owner-occupied units and 20 rental units from 2010 to 2015.

Strategy 1.1: Provide low interest loans to leverage private investment in rental rehabilitation projects that create affordable housing units.

Strategy 1.2: Provide low interest rehabilitation loans to homeowners (to include refinancing existing mortgages to make the home more affordable).

Strategy 1.3: Provide deferred, forgivable loans to low-income homeowners in need of home repairs.

Strategy 1.4: Perform minor to substantial rehabilitation on houses owned and occupied by low-income persons.

Strategy 1.5: Identify methods of making rehabilitation more affordable while still meeting minimum safety and quality standards.

Goal 2: Increase homeownership opportunities for residents of Cumberland County.

Objective 2: Provide assistance to 75 low/moderate income citizens to become first-time homebuyers from 2010 to 2015.

Strategy 2.1: Acquire and rehabilitate substandard residential property for resale to first-time homebuyers.

Strategy 2.2: Work with for-profit and non-profit developers and CDC's to build infill housing intended for first-time homebuyers.

Strategy 2.3: Provide low-income first-time homebuyers with down payment and closing cost assistance through deferred loans.

Strategy 2.4: Provide low-income first-time homebuyers with GAP financing to make home loans more affordable.

Strategy 2.5: Support the creation of new non-profit groups (particularly Community Housing Development Organizations) that facilitate the development of affordable housing.

Strategy 2.6: Create and encourage lease to own programs that would allow people to transition into homeownership.

Strategy 2.7: Refer prospective homebuyers to financial assistance programs offered by the North Carolina Housing and Finance authority, Fannie Mae, Freddie Mac, and private market lenders.

Strategy 2.8: Partner with non-profit agencies to provide counseling to potential low and moderate income homebuyers on credit repair, budgeting, and other financial issues.

Strategy 2.9: Implement public information activities to promote affordable homeownership opportunities in the County.

Strategy 2.10: Teach potential homeowners about alternative methods of financing and how to purchase a home.

Goal 3: A County in which all rental housing is affordable and in standard condition.

Objective 3: Provide 125 additional standard rental units that are affordable to very low-and-income residents from 2010-2015.

Strategy 3.1: Acquire dilapidated/abandoned housing units in low-income neighborhoods to preserve them for future rehabilitation into standard, affordable rentals.

Strategy 3.2: Acquire vacant lots in low-income neighborhoods for future development of infill affordable housing.

Strategy 3.3: Provide support services, training, funding, and financial incentives to landlords to encourage rehabilitation and maintenance of rental units.

Strategy 3.4: Provide low-interest loans for affordable rental rehabilitation and new construction projects.

Strategy 3.5: Partner with locally based non-profit housing organizations (such as CDC's) to develop and manage standard affordable rental units with 3 or more bedrooms.

Strategy 3.6: Provide financial incentives and low-interest loans for developers to build and manage standard affordable rental units with 3 or more bedrooms.

Housing Goals (specifically homeless needs)

Goal 2: Provide housing options by creating transitional housing beds for the homeless (chronic and/or families). **Goal also addresses 10-Year Plan to End Homelessness Priority 9 (Develop Additional Affordable Housing Options).

Objective 2: Provide **24** additional transitional housing units for homeless veteran households from 2010 -2015 to get them "off the street."

Strategy 2: Provide low interest loans to leverage private investment in housing for homeless individuals and families.

Also refer to Appendix C for the CPMP Tool Summary of Specific Objectives Tables.

30. 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.

Response: CDBG and HOME funds are used in the form of grants, deferred and direct loans to assist in all of our housing programs. Also, by leveraging instead of duplicating the role of private lending institutions, our funds will go further and more low-income families can be served.

Several financing options are available in the public and private sector market places to low-income families to create housing opportunities with affordable terms and flexible underwriting. These options are used in conjunction with our funds in order to maximize the number of low and moderate-income persons served. Some of the primary options are listed below:

- ❖ **Secondary Market Purchasers:** Most private lenders only originate loans that they can sell on the secondary market to purchasers such as Fannie Mae. Fannie Mae has greatly enhanced the opportunities for low-income families to qualify for a home. These guidelines include flexible underwriting ratios, acceptance of non-traditional methods of verifying credit worthiness (rent payments, utility bills, etc.), less cash at loan closing (waive 2-month cash reserve requirement) and acceptance of subsidized second mortgage for purchase assistance or rehabilitation costs. Much of our underwriting criteria for our housing programs are based on these guidelines so that our products can be used with private financing.
- ❖ **FHA, VA:** With insured or guaranteed loans the loan-to-value ratio is higher, 100%, 97% or 95% with no or only a 3% or 5% down payment, respectively, instead of the normal 10% to 20%. Lower down payments allow us to leverage more private dollars using smaller amounts of federal funding.
- ❖ **USDA Rural Development:** This Agency's underwriting standards and procedures are similar in many respects to those used by private lenders. However, because the Agency's mission, in part, is to serve buyers who are unable to obtain private financing, their

underwriting criteria is less stringent than that used by private lenders and Rural Development has the ability to offer subsidies that enhance the applicant's ability to repay. Because Rural Development makes homeownership affordable for lower income persons, our programs partner well with their programs as we address the needs of the target population.

The Department also uses its entitlement dollars when possible to serve as matching funds or local participation funding for other competitive grants.

The County also provides matching contributions from its general fund on federal grants as required.

31. 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.

Response: Although Cumberland County has relatively low-cost housing, not all groups benefit. Much of the housing for sale, even at the lower end, is priced beyond the means of lower-income families. While rental housing is less expensive, the majority of multi-family housing consists of smaller one- and two- bedroom units.

Historically, the region has had a sufficient stock of single-family home rentals, but where larger households have difficulties is locating housing with three or more bedrooms. The cost to rent these larger single family homes can be expected to increase beyond the reach of many low-income minority households. In fact, according to the 2008 Census Estimates, 48% of all renters pay 30% or more of their incomes on rent alone.

Moreover, demographic data show that minority families on average have lower per capita income and larger household sizes in nearly all communities. These families find themselves in a highly competitive market for the few larger rental units available. Poverty rates for single females with children are high across the county.

There is insufficient financing to develop the amount of affordable housing required to address the needs of lower income households as evidenced by the waiting lists for assisted housing, public housing and Section 8 Rental Assistance Program.

As lending criteria has become more stringent and the number of vacant units due to foreclosure has risen, we will focus on making resources available to private and non-profit developers to expand our stock of affordable housing for renters and owners. Through new construction and rehabilitation programs currently offered, we will increase our efforts to target activities and projects that help meet the demand for affordable units, and more particularly look at development of units suitable for larger families.

32. If the jurisdiction intends to use HOME funds for tenant-based rental assistance, specify local market conditions that led to the choice of that option.

Response: N/A

Public Housing Strategy 91.215 (c)

33. 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 lists).

Response:

Fayetteville Metropolitan Housing Authority (FMHA) addresses the needs of extremely low income, low income, and moderate income families residing in Cumberland County through the provision of decent, safe, sanitary and drug-free affordable housing. Toward that end, FMHA maintains an inventory of 796 public housing units and 1,769 Section 8 vouchers. The Housing Authority accepts public housing applications once a week and maintains waiting lists of eligible and qualified applicants for both Section 8 and Public Housing. FMHA provides a suitable living environment that fosters social diversity and promotes self-sufficiency and economic independence for all residents.

34. Describe 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.

Response:

The Fayetteville Metropolitan Housing Authority's 2007 HOPE VI Revitalization Grant will demolish 194 dwelling units, a community center and a day care facility in Campbell Terrace; and 55 dwelling units, a community center and a maintenance facility in Delona Gardens. These units are 65 years old. A total of 747 new mixed income units are planned for construction in the Old Wilmington Road neighborhood, of which 249 will replace one-for-one the units that are demolished. The redevelopment will be financed through a combination of public housing funds (principally, HOPE VI) as well as state and federal Tax Credits, conventional or tax-exempt debt, local contributions, and other Federal funds such as grants from the Federal Home Loan Bank. Once complete, FMHA will consider additional developments for revitalization based on age of units and availability of resources.

35. Describe the public housing agency's strategy for improving the living environment of extremely low-income, low-income, and moderate families residing in public housing.

Response:

FMHA maintains all dwelling units in compliance with Department of Housing and Urban Development regulations. In accordance with its designation as a High Performing Housing Authority, FMHA meets and exceeds HUD standards for the maintenance of housing units. The Housing Authority also encourages residents to take part in the activities it provides that foster self sufficiency and economic independence, including: financial literacy classes, the Family Self Sufficiency program, homeownership programs and Resident Advisory Board activities.

36. 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))).

Response:

During the consolidated planning process, the jurisdiction encourages public housing residents to give input through community needs using the survey tool. The survey was presented to

the Resident Advisory Board and made available to all residents of Public Housing. CCCD will continue to partner with FMHA to implement activities that promote self sufficiency and economic independence, including the promotion of down payment assistance and gap financing through the first-time homebuyers program.

37. 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))

Response:

Not applicable, the local housing authority has been designated as a high performing housing authority for the past 15 years and is not considered "troubled".

HOMELESS

Priority Homeless Needs

***Refer to the Homeless Needs Table 1A in Appendix C.**

38. Describe the jurisdiction's choice of priority needs and allocation priorities, based on reliable data meeting HUD standards and reflecting the required consultation with homeless assistance providers, homeless persons, and other concerned citizens regarding the needs of homeless families with children and individuals.

Response:

Community Development is a vital partner with the Fayetteville / Cumberland County Continuum of Care Planning Council (CoCPC), which is the lead entity responsible for homeless services and planning activities in the community. Community Development's allocation of priority needs to be addressed during the consolidated planning process were based on analysis of:

- The Point in Time Survey (PiT) conducted by the Fayetteville / Cumberland County Continuum of Care Planning Council;
- Homeless Inventory and Gaps Analysis Information submitted as a part of the CoCPC's most recent Exhibit 1 document for the SUPERNOFA Continuum of Care application; and
- Notes obtained during working sessions of the CoCPC Executive/Planning Committee and regular CoCPC quarterly meetings.

Analysis of that data as well as the Gaps Analysis resulted in determination of the following needs:

Homeless Needs Category	Allocation Priority
Emergency Shelter	
○ Households <i>without</i> children – 80 additional beds	H
○ Households <i>with</i> children – 55 additional beds	M
Transitional Housing	
○ Households <i>with</i> children – 232 additional beds	H
○ Households <i>without</i> children – 105 additional beds	H

Permanent Supportive Housing	
o Households <i>without</i> children – 100 additional beds	M
o Households <i>with</i> children – 80 additional beds	M

39. Provide an analysis of how the needs of each category of residents (listed in question #38) provided the basis for determining the relative priority of each priority homeless need category.

Response:

In order to determine the Unmet Need in the area of homeless housings, HUD uses a formula that compares the of number of homeless persons identified on a given day in our community (as identified in the most recent PiT) to the number of homeless facilities currently available to serve the homeless population . Application of that formula resulted in the unmet needs identified in the table below.

2009 HUD Housing Inventory Chart – Unmet Need

All Year-Round Beds/Units			
Beds for Households with Children	Units for Households with Children	Beds for Households without Children	Total Year-Round Beds
Emergency Shelter			
55	15	80	135
Transitional Housing			
232	58	105	337
Safe Haven			
0	0	50	50
Permanent Supportive Housing			
80	20	100	180

*See question 38 for priority’s established

40. Provide a brief narrative addressing gaps in services and housing for the sheltered and unsheltered chronic homeless. 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.

Response:

Review of the Homeless Inventory Charts on page 50, indicates that the community has a total of 6 emergency shelters, 6 transitional housing programs, and 5 permanent supportive housing programs. While chronically homeless individuals can access any of the housing or support service programs available if they meet the entrance criteria, the community is sorely lacking any facilities that serve exclusively the chronically homeless.

Homeless Strategy 91.215 (d)

Homelessness

41. 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.

Response:

The County will continue to partner with the COCP, the City of Fayetteville and other community agencies to implement the community's 10 Year Plan to End Homelessness (The 10-Year Plan). The 10 Year Plan, adopted by the Board of County Commissioners October 20, 2008, addresses the following the 10 priority areas:

- **Priority 1: Community Awareness and Education Campaign**
Goal: To change the face of homelessness in the community from that of the panhandler on the street to a more sympathetic icon that brings citizens into the support network.
- **Priority 2: Lobby Congress for special appropriations to assist homeless veterans (and the homeless population in general)**
Goal: To have dedicated funding by Congress for homeless assistance to veterans (and other homeless populations) added to the City and County legislative agenda.
- **Priority 3: Identify additional funding sources for local programs**
Goal: Increase available funding for local homeless service/housing providers
- **Priority 4: Create a day resource center**
Goal: Provide opportunity for homeless to access needed services and avoid duplication of effort.
- **Priority 5: Establish Childcare Subsidy for Homeless Families**
Goal: Provide opportunity for homeless families to obtain employment.
- **Priority 6: Additional Shelter Space**
Goal: Provide additional shelter to eliminate the number of homeless who spend nights on the street.
- **Priority 7: Transportation**
Goal: Increase transportation options for the homeless.
- **Priority 8: Family Reunification Program**
Goal: To reunite homeless individuals with family in a permanent housing situation.
- **Priority 9: Development of Additional Affordable Housing Options**
Goals:
 - Provide housing options by creating new permanent housing beds for the homeless (chronic and/or families).
 - Increase the percentage of homeless persons remaining in permanent housing over six months.
 - Increase the percentage of homeless persons moving from transitional housing to permanent housing.
 - Provide the homeless with needed supportive services to remain in permanent housing (such as obtaining employment, education, etc.).
- **Priority 10: Outreach Network**
Goal: Expand outreach network to coordinate annual outreach efforts currently being undertaken.

Priority Need to be Addressed: Homeless Services

CCCD will undertake the following actions to address the homeless from 2010-2015:

Priority 3: Identify additional funding sources for local programs

Goal: Increase available funding for local homeless service/housing providers

Objective: Provide financial stability for local homeless initiatives in order to eliminate potential gaps in services by at least 25% of the Public Services annual allocation from 2010 – 2015.

Strategy: During the Request for Proposal period for the Public Service Program, have funding set-aside specifically to serve applications geared towards the homeless population.

Priority 9: Development of Additional Affordable Housing Options

Goals:

- 1) Provide housing options by creating new permanent housing beds for the homeless (chronic and/or families).
- 2) Increase the percentage of homeless persons remaining in permanent housing over six months.

Objectives:

- 1) Provide 24 additional permanent housing units for homeless veteran households from 2010 -2015 to get them “off the street.”
- 2) Provide the 24 homeless veteran households with needed supportive services to remain in permanent housing (such as obtaining employment, education, etc.) from 2010-2015.

Strategy 1: During the Request for Proposal period for the Affordable Housing Program, seek viable housing developers to construct housing units for homeless veterans.

42. Describe the jurisdiction’s strategy for helping extremely low- and low-income individuals and families who are at imminent risk of becoming homeless.

Response:

Community Development will meet the needs of those at risk of becoming homeless by continuing its partnership with the local Continuum of Care Planning Council and 10 Year Plan to End Homelessness Steering Committee to development concrete strategies to assist those that are in need. While Community Development has not set-aside specific funding to address this issue, it will continue to serve as a referral source to those programs in the community that provide direct financial assistance such as:

- Cumberland County Department of Social Services;
- The Salvation Army; and
- City of Fayetteville’s Homeless and Rapid Re-housing Program.

Chronic Homelessness

- 43. *Describe the jurisdiction’s strategy for eliminating chronic homelessness. 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 in Exhibit***

1 of the Continuum of Care (CoC) application and any other strategy or plan to eliminate chronic homelessness.

Response:

Community Development will continue to serve a vital role on the Fayetteville / Cumberland County 10 Year Plan to End Homelessness Steering Committee. As such, the department will commit staff time and resources, whenever possible toward implementation of the goals and priorities identified in the community's 10 year Plan (see the response to Homeless questions above).

44. Describe the efforts to increase coordination between housing providers, health, and service agencies in addressing the needs of persons that are chronically homeless. (91.215(I))

Response:

As a member of the both the CoCPC and 10 Year Plan Steering Committee, Community Development will continue to encourage partnerships and participation between community agencies whenever possible.

Homelessness Prevention

45. Describe the jurisdiction's strategy to help prevent homelessness for individuals and families with children who are at imminent risk of becoming homeless.

Response:

See response to question #42 above.

Institutional Structure

46. Briefly describe the institutional structure, including private industry, non-profit organizations, and public institutions, through which the jurisdiction will carry out its homelessness strategy.

Response:

Community Development carry out its homelessness strategy through continued coordination and partnership with the Fayetteville Cumberland County Continuum of Care Planning Council and the 10 Year Plan to End Homelessness Steering Committee. Both groups include membership from government, nonprofit and private agencies as indicated below:

Discharge Coordination Policy

47. 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.

Response:

As a member of the Fayetteville – Cumberland County Continuum of Care, Community Development will the local Discharge Planning Policy as shown at Appendix I.

Specific Objectives/Homeless (91.215)

48. Identify specific objectives that the jurisdiction intends to initiate and/or complete in accordance with the tables* prescribed by HUD, and 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. For each specific objective, identify proposed accomplishments and outcomes the jurisdiction hopes to achieve in quantitative terms over a specified time period (one, two, three or more years) or in other measurable terms as defined by the jurisdiction. Complete and submit the CPMP Tool Summaries of Specific Objectives Tables.

Response:

Community Development will meet the following objectives during the 2010-2015 consolidated planning period:

Priority 3: Identify additional funding sources for local programs

Goal: Increase available funding for local homeless service/housing providers

Objective: Provide financial stability for local homeless initiatives in order to eliminate potential gaps in services by at least 25% of the Public Services annual allocation from 2010 – 2015.

Strategy: During the Request for Proposal period for the Public Service Program, have funding set-aside specifically to serve applications geared towards the homeless population.

Priority 9: Development of Additional Affordable Housing Options

Goals:

1. Provide housing options by creating new transitional housing beds for the homeless (chronic and/or families).
2. Increase the percentage of homeless persons remaining in permanent housing over six months.

Objectives:

1. Provide 24 additional permanent housing units for homeless veteran households from 2010 -2015 to get them “off the street.”
2. Provide the 24 homeless veteran households with needed supportive services to remain in permanent housing (such as obtaining employment, education, etc.) from 2010-2015.

Strategy 1: During the Request for Proposal period for the Affordable Housing Program, seek viable housing developers to construct housing units for homeless veterans.

Also refer to CPMP Tool Summaries of Specific Objectives Tables at Appendix C.

NON-HOMELESS SPECIAL NEEDS

***Refer to CPMP Tool's Non-Homeless Special Needs Table.**

Priority Non-Homeless Needs 91.215 (e)

49. Identify the priority housing and supportive service needs of persons who are not homeless but may or may not 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.

Response:

Refer to Appendix C for Non-homeless Special Needs Table.

50. Describe the basis for assigning the priority given to each category of priority needs.

Response:

Priority needs in this area were based on citizen input and agency surveys received during the consolidated planning process. Refer to Appendix E for survey results.

51. Identify any obstacles to meeting underserved needs.

Response:

The primary obstacles to meeting underserved needs in this area are lack of financial resources and viable agencies to carry out programs to meet identified needs.

52. 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.

Response:

Refer to response under question #17 above.

53. 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.

Response:

Not applicable – Community Development does not intend to provide tenant based rental assistance as a strategy to address the needs of special population groups.

Specific Special Needs Objectives 91.215 (e)

54. Identify each specific objective developed to address a priority need by number and contain proposed accomplishments and outcomes the jurisdiction expects to achieve in quantitative terms through related activities over a specified time period (i.e. one, two, three or more years), or in other measurable terms as identified and defined by the jurisdiction.

The jurisdiction may satisfy this requirement by using Table 1C or, if using the CPMP Tool, the Projects.xls worksheets

Response:

Refer to Appendix B for project worksheets.

55. 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.

Response:

Community Development will use CDBG funds to meet the special population needs.

COMMUNITY DEVELOPMENT

Priority Community Development Needs 91.215 (f)

*Refers to Table 2B or to the Community Development Table in the Needs.xls workbook

56. Identify the jurisdiction's priority non-housing community development needs eligible for assistance by CDBG eligibility category specified in the Community Development Needs Table* – i.e., public facilities, public improvements, public services and economic development.

Response:

Refer to Community Development Needs at Appendix C.

57. Describe the basis for assigning the priority given to each category of priority needs provided on Table 2B or the Community Development Table in the CPMP Tool's Needs.xls worksheet.

Response:

Priority needs in this area were based on citizen input and agency surveys received during the consolidated planning process. Refer to Appendix E for survey results.

58. Identify any obstacles to meeting underserved needs.

Response: The primary obstacles to meeting underserved needs in this area are lack of financial resources and viable agencies to carry out programs to meet identified needs.

Specific Community Development Objectives

59. 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.

Complete and submit the CPMP Tool Summaries of Specific Objectives Tables.

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. 24 CFR 91.215(a)(4)

Response:

Based on citizen input, agency surveys, and the mandatory consultations, some of the major non-housing community development concerns identified were employment services/job training and water & sewer improvements. Also refer to the CPMP Tool Summaries of Specific Objectives Tables at Appendix C.

Community Development/Public Facilities Objectives

Response: Not applicable.

Community Development/Public Improvements Objectives

Goal 1: To make public water and sewer facilities available to low to moderate income neighborhoods located within our participating jurisdiction.

Objective 1: Make public water/sewer available to 3 low to moderate income neighborhoods from 2010-2015.

Strategy 1: Coordinate with the Cumberland County Public Utilities Department to provide funding when feasible for water/sewer improvements.

Community Development/Public Services Objectives

Goal 1: Maximize use, coordination, and delivery of human services.

Objective 1: Work with human services agencies to maximize use, coordination and delivery of human services for 5000 residents, with a priority given to agencies providing health care services and services to the homeless from 2010-2015.

Strategy 1: Give priority funding to agencies proposing projects that address health care needs and services to the homeless.

Strategy 2: Support projects which identify gaps in services or barriers to existing services and who convert these problems to positive solutions.

Community Development/Economic Development Objectives

Goal 1: Improve self-sufficiency for Cumberland County residents by increasing the number of new private sector full time permanent jobs, available to, or taken by, low and moderate income persons.

Objective 1: Creation of 25 new full-time permanent jobs for low/moderate residents of Cumberland County from 2010-2015.

Strategy 1: Give priority to businesses that create jobs with wages that lift people out of poverty and create jobs at entry level wages which have a definite plan for employee advancement.

Objective 2: Assist 25 individuals with job training or enhanced job skills from 2010 -2015.

Strategy 1: Partner with area colleges/universities, Workforce Development, and local non-profit organizations to provide job skills courses and other services needed to obtain employment.

Neighborhood Revitalization Strategy Areas 91.215(g)

60. *If the jurisdiction has one or more approved Neighborhood Revitalization Strategy Areas, the jurisdiction must provide, with the submission of a new Consolidated Plan, either: the prior HUD-approved strategy, or strategies, with a statement that there has been no change in the strategy (in which case, HUD approval for the existing strategy is not needed a second time) or submit a new or amended neighborhood revitalization strategy, or strategies, (for which separate HUD approval would be required).*

Response:

Not applicable – Community Development does not have any Neighborhood Revitalization Strategy Areas.

Barriers to Affordable Housing 91.215 (h)

61. *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.*

Response: The County has taken actions over the years to increase the supply of affordable housing through our various housing program; however, further steps are needed to develop more subsidized housing. We will continue to utilize HUD grants to further fund new and existing housing development and rehabilitation projects, especially affordable rental units. Another approach to address the issue of available affordable housing is to study and evaluate the potential use of inclusionary zoning and density bonuses. Researching successful efforts made in other jurisdictions across the country will be considered.

Lead-based Paint 91.215 (i)

62. *Describe the jurisdiction’s plan to evaluate and reduce lead-based paint hazards and describe how lead based paint hazards will be integrated into housing policies and programs, and how the plan for the reduction of lead-based hazards is related to the extent of lead poisoning and hazards.*

Response:

The following actions will be taken to evaluate and reduce lead-based paint hazards:

- Develop and run periodic public service announcements to make households with children under seven aware that they may qualify for funding to assist with lead-based paint abatement;
- Ensure that all households applying for funds from Community Development’s Housing

Rehabilitation, Emergency Repair, or First-Time Home Buyer's Programs are given brochures on the hazards of lead-based paint;

- Ensure that all units repaired and/or acquired under the First Time Home Buyers, Rental Rehabilitation, Homeowner Rehabilitation, Emergency Repair, and Purchase/Rehab/Resale are tested according to HUD standards; and
- Conduct workshops for new contractors so that they are trained to perform lead hazard control work as required by the Lead Safe Housing Rules.

Antipoverty Strategy 91.215 (j)

63. 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).

Response:

The long-term solution to poverty is a complex one and requires us to wrestle with social and economic issues that have persisted for decades. There is a need to alleviate the problem of excessive rent burdens for the poor by providing an increased number of available, decent, safe, and affordable housing units. Job training must be provided for skills improvement, social services with a caring heart, better education, and comprehensive health care for the indigent, and more economic opportunities for people who live in Cumberland County. All of these must be components of comprehensive community planning and economic development.

Where possible, Community Development will partner with other County social and human service agencies to provide affordable housing assistance. The primary relationship is that of a referral nature. The goals, programs, and policies that have been put into place target populations that are served by the Department of Social Services, Mental Health, the Health Department, etc.

More specifically:

- The affordable housing goals established to create new units for the low-income, elderly and disabled are aimed at bringing people out of impoverished living conditions.
- The goals set forth for housing rehabilitation help preserve existing affordable housing units.
- The provision of down payment assistance helps low-income families accumulate wealth.
- Proposed water and sewer improvements also improve living conditions for low-income families who must abandon their homes (or continue to live in substandard conditions) because they do not have potable water and/or failed septic systems.

Also, the goal to create new jobs that pay a living wage is a means of improving quality of life for those living in poverty.

64. 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.

Response:

The strategies identified in the housing/affordable housing, public facilities, and economic development programs will have a quantifiable impact that shows great

strides towards lessening the number of families we have living at the poverty level. Through these programs and our partnerships with other agencies, our goal is to assist approximately 300 households to improve their current living conditions.

Institutional Structure 91.215 (k)

65. Provide a concise summary of the institutional structure through which the jurisdiction will carry out its consolidated plan, including private industry, non-profit organizations, community and faith-based organizations, and public institutions.

Response:

Cumberland County is governed by a seven member Board of Commissioners with the day-to-day operation overseen by the County Management style of government. The Community Development Department is delegated the responsibility of administering the resources to implement the strategies and activities identified in the Consolidated Plan. Although the majority of the plan activities will be directly administered by the Community Development Department, collaboration will also be sought with local non-profits to implement programs to address homeless and community development needs.

Cumberland County, as specified in this plan, subcontracts with area non-profit organizations, serves as lead entity for certain Supportive Housing Program grants, and is represented on various boards and committees that undertake some of the program aspects of this plan. As funds are limited and as program source guidelines dictate, networking by the County is vital to the depth and effectiveness of executing overall housing and community development strategies.

66. Provide an assessment of the strengths and gaps in the delivery system.

Response:

Cumberland County strives to offer the best programs possible for low and moderate-income citizens in our community. We will continue to evaluate the effectiveness of our programs in meeting the needs of our citizens.

Strengths

One of our Department's strengths is our Public Services Program. Through this program we are able to use a small amount of set-aside funds and reach a large population. Our working relationships with sub-recipients are good and, through technical assistance provided by staff, they have come to understand our program and its goals and mission. Cumberland County is also a very active member of the local Continuum of Care process (the Continuum of Care Planning Council) and administers four Supportive Housing Grants.

Cumberland County continues to make great strides in the area of affordable housing development. Through partnerships with our Community Housing Development Organizations (CHDOs) and local developers, more affordable housing units, rental and homeownership, are being made available. These are successful partnerships that we hope to continue. An Affordable Housing Request for Proposals process was adopted as a means of ensuring that Cumberland County funds the best affordable housing projects with the investment of HOME and CDBG funds.

GAPS in Delivery System

One area of underserved needs in our community lies in the public services/homeless services arena. As the community loses jobs with plant closings and layoffs resulting in a rise in unemployment, the number of individuals/families needing assistance in the area of human services has risen. Through the funding of non-profit public service agencies, we will continue to strive to meet the underserved needs in our community. Though CDBG funds are limited for these types of activities, we will continue to commit at the maximum level allowable.

67. Describe efforts to enhance coordination with private industry, businesses, developers, and social service agencies, particularly with regard to the development of the jurisdiction’s economic development strategy. (91.215(I))

Response: Marketing and program outreach is also an area in which we continue to make improvements. Our department has relied heavily on word-of-mouth referrals, but we realize that we must put forth more effort in reaching our citizenry. Due to the limited availability of marketing funds, we will continue to use public service announcements; community events, mailings, door hangers, and some paid advertising to increase community awareness. We are also considering less traditional advertising for our department such as billboard advertising.

As of February 2010, the unemployment rate for the Fayetteville, NC Metropolitan Statistical Area (MSA) was 9.9%, less than the national average of 10.1%, with Fayetteville locking in an unemployment rate of only 8.0%.

The chart below compares Fayetteville’s unemployment rates with the County on a monthly basis since January 2009. As shown, Fayetteville has a much lower unemployment rate, showing economic stability and strength in the City during the current economic situation.

The table below lists the most recent labor statistics for the Fayetteville/ Cumberland County area.

Fayetteville, NC 2009 – February 2010 – Labor Force Statistics							
	Jan-09	Feb-09	Mar-09	Apr-09	May-09	June-09	July-09
Labor Force	74,098	74,512	74,161	74,952	75,162	76,263	75,107
Employed	68,923	68,848	68,975	70,021	69,638	70,520	69,453
Unemployed	5,175	5,664	5,186	4,931	5,524	5,743	5,654
Rate %	7.0	7.6	7.0	6.6	7.3	7.5	7.5
	Aug-09	Sept-09	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10
Labor Force	74,355	75,127	75,897	75,815	74,872	76,661	76,879
Employed	68,998	69,720	70,558	70,371	69,564	70,624	70,762
Unemployed	5,357	5,339	5,339	5,444	5,308	6,037	6,117
Rate %	7.2	7.2	7.0	7.2	7.1	7.9	8.0

Cumberland County, NC 2009 – February 2010 Labor Force Statistics							
	Jan-09	Feb-09	Mar-09	Apr-09	May-09	June-09	July-09
Labor Force	130,436	131,284	130,942	131,899	132,325	134,368	132,495
Employed	118,842	118,712	118,931	120,735	120,074	121,595	119,756
Unemployed	11,594	12,572	12,011	11,164	12,251	12,773	12,739
Rate %	8.9	9.6	9.2	8.5	9.3	9.5	9.6
	Aug-09	Sept-09	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10
Labor Force	131,081	132,300	133,834	133,607	132,354	136,026	136,275
Employed	118,970	120,215	121,660	121,339	119,946	122,594	122,834
Unemployed	12,111	12,085	12,174	12,331	12,408	13,432	13,441
Rate %	9.2	9.1	9.1	9.2	9.4	9.9	9.9

Source: www.ncesc.com

As employment services /job training is identified as one of our priority needs, our goal is to improve self-sufficiency for Cumberland County Residents by increasing the number of new private sector full-time jobs, available to, or filled by, low and moderate income persons. Through partnerships with private and nonprofit agencies, we will offer public services programs for employment services/job skills training/professional development. And through economic development programs low interest loans are available for businesses that create new full-time permanent jobs for low income persons.

Coordination 91.215 (I)

68. Describe the efforts to enhance coordination between public and assisted housing providers and governmental health, mental health, and service agencies.

Response:

During the consolidated planning process, Community Development ensured coordination with public and assisted housing providers and governmental health, mental health, and service agencies by consulting with each during the consultation process. Also refer to the consultation section beginning on page 4 for further information on the coordination process.

69. Describe efforts in addressing the needs of persons that are chronically homeless with respect to the preparation of the homeless strategy.

Response:

During the consolidated planning process, Community Development addressed the needs of chronically homeless persons in its homeless strategy through coordination with the 10 Year Plan Steering Committee and Continuum of Care Planning Council during the consultation process. Refer to page 4 for further information on the homeless strategy.

70. Describe the means of cooperation and coordination among the state and any units of general local government in the metropolitan area in the implementation of the plan.

Response:

During the co during the consolidated planning process, Community Development ensured coordination with other units of local government by consulting with each during the consultation process. Also refer to the consultation section beginning on page 4 for further information on the coordination process..

71. Describe efforts to enhance coordination with private industry, businesses, developers, and social service agencies, particularly with regard to the development of the jurisdiction's economic development strategy.

Response:

During the consolidated planning process, Community Development ensured coordination with private industry, businesses, developers, and social services agencies by consulting with each during the consultation process. Also refer to the consultation section beginning on page 4 for further information on the coordination process.

72. Describe the jurisdiction's efforts to coordinate its housing strategy with local and regional transportation planning strategies to ensure to the extent practicable that residents of affordable housing have access to public transportation.

Response:

During the consolidated planning process, Community Development ensured coordination with local transportation planning strategies by consulting with each during the consultation process. Also refer to the consultation section beginning on page 4 for further information on the coordination process.

Monitoring 91.230

73. 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.

Response:

The County of Cumberland will continue to improve its established monitoring system of CDBG, HOME, and SHP housing and community development activities to ensure both short-term and long-term contract and regulatory compliance. Monitoring is the responsibility of the Cumberland County Community Development Department.

Subrecipient Projects:

Monitoring of sub-recipient projects has five major components:

- a. Grant Applications: Requests for funding application is made on a standard form and is carefully reviewed and evaluated. Points are given for each of 19 criteria covering community need, program effectiveness, financial record, and capacity. Recommendations for funding are based on evaluation of the above criteria.

- b. Contractual Agreements: Cumberland County Community Development enters into a two-part contractual grant agreement with each sub-recipient. Part I of the agreement describes the tasks to be performed with the grant funds, the results to be achieved, and other conditions specific to the project. Part II lists all Federal standards with which the agency must comply. Each funded activity is assigned to the Compliance Officer. The Compliance Officer conducts pre-monitoring, desk monitoring, and on-site monitoring visits at least once a year to review for contractual and regulatory compliance.
- c. Monitoring Records: For each sub-recipient, the staff maintain monitoring records that include the following:
 - 1) Basic information.
 - 2) Monitoring Plan - A risk assessment is carried out to determine the appropriate frequency of on-site visits, and the areas to be reviewed, including some or all of: financial management, client eligibility, program effectiveness, property, procurement, program income, fair housing and equal opportunity.
 - 3) Sub-recipient training and technical assistance provided.
 - 4) Review of the agency's CPA audit (if required).
 - 5) Quarterly financial reports and monthly draw requests from the sub-recipient.
 - 6) Quarterly programmatic reports.
 - 7) On-site monitoring reports.
 - 8) Correspondence and notes of significant telephone conversations.

On-Site Visits: Staff performs on-site monitoring reviews at least annually, depending on the assessment of risks for non-compliance. Program operations are observed, sub-recipient staff interviewed, client eligibility confirmed, and financial and programmatic reports verified from original documentation.

Long-Term Compliance: Activities involving real property acquisition or improvement require long-term compliance with the original purpose of the federal assistance. Cumberland County Community Development maintains a CDBG Real Property Inventory that is updated annually, and confirms that such property is still being used for the intended purpose. Cumberland County Community Development also carries out an annual review of HOME-assisted rental units, to ensure compliance with Housing Quality Standards, tenant eligibility, and rent ceilings.

The CCCD staff has developed detailed written guidelines for monitoring sub-recipients to ensure more uniform and comprehensive reviews. CCCD monitors the federally funded projects that are implemented by the department through a simple project tracking and management reporting system. This process includes monthly management reports, frequent inter-departmental reports and meetings, and financial reports. Project expenditures are compared with budgets on a monthly basis.

CCCD relies heavily on standard operating procedures that have been designed to be in compliance with federal standards, for example, its purchasing policy. HUD monitoring and CCCD's Single Audit provide annual independent checks on compliance by both CCCD and sub-recipients.

SPECIAL MONITORING FOR PARTICULAR ACTIVITIES

Rehabilitation 24 CFR 570.202 (Eligible Activities)

Review of File Records and Progress

Regulatory Compliance

- Location (census tract, redevelopment area)
- Type of housing (SF/MF), commercial
- Number of units per structure
- Historic preservation
- Lead-based paint (inspection/remediation)
- Household income (L/M benefit)
- Procurement and Bonding
- Labor Standards Review
- Relocation and Real Property Acquisition
- Environmental Review (date/findings)
- Project in Special Flood Hazard Area
- Section 504/ADA compliance

Comparison of Performance Records with Agreement/Application

- Scope of Work (work write-up, plans and specs, and original cost estimate)
- Contract award date, date work began
- Date final inspection; completion notice
- Number of dwelling units completed, comparison with Application/Agreement
- Actual delivery schedule v. Application and Agreement

In-House Cost and Productivity Review

- Method used to assure reasonable costs
- Direct construction costs (per unit)
- Indirect/administrative costs; comparison with cost allocation plan; percent of total
- Costs within 10% of in-house estimate
- Cost per unit v/ Budget

Community Housing Development Organizations 24 CFR Part 92 Subpart G

- o .300 Set-Aside for Community Housing Development Organizations
- o .301 Project-Specific Assistance to Community Housing Development Organizations
- o .302 Housing Education and Organizational Support
- o .303 Tenant Participation Plan

Community Housing Development Organization (CHDO) Monitoring Activities

All CHDOs will be monitored annually for recertification purposes using the following criteria:

- **Non-profit Status** – The CHDO must maintain its status as a non-profit corporation with a 501(c)(3) or 501(c)(4) IRS tax-exempt ruling.
- **Affordable Housing Commitment** – The CHDO must have a stated commitment to the development or affordable housing in the community it serves. The commitment must continue to be in at least one of the following: a) articles of incorporation, b) by-laws of the organization, c) board resolution, or d) charter.
- **Not Controlled by Public or For-profit** – The CHDO must continue to be free of external controls, either from public or for-profit interests.

- **Capacity** – The CHDO must have its own staff and must be capable of engaging in the housing development activity it intends to pursue. The CHDO must currently have adequate capacity or must have demonstrated capacity building activities.
- **Board Composition** – The CHDO’s board structure must continue to reflect the community that it intends to serve and otherwise meet the regulatory requirements of the HOME program.

ON-SITE REVIEWS

Staff will perform on-site monitoring reviews at least annually, depending on the risk assessment for non-compliance. Program operations are observed, CHDO staff interviewed, client eligibility confirmed, and financial and programmatic reports verified from original documentation.

MONITORING CHDO PROJECTS

Eligible CHDO activities include: acquisition and/or rehabilitation of rental housing; new construction of rental housing; acquisition and/or rehabilitation of homebuyer property; new construction of homebuyer property; provide direct homebuyers assistance.

Monitoring activities will be conducted in accordance with Special Monitoring for Particular Activities as outlined in Item G, *Monitoring*, of the Annual Action Plan. Monitoring activities specified for rehabilitation and rental housing projects will be followed. Staff will also ensure that the Uniform Relocation Act and 49 CFR Part 24 are adhered to for acquisition projects. Staff will use the handbook Monitoring HOME Program Performance (HUD-2030-CPD, October 2000) as its primary guide and resource in conducting monitoring for CHDOs and all HOME program projects.

Rental Housing Monitoring Process

Project Eligibility Determination

HOME program staff should determine whether a project is eligible for HOME funding:

- Property type eligibility
- HOME subsidy limits,
- Environmental review, and
- Site and Neighborhood standards (if applicable)

Project Tracking

HOME program staff should track progress through all stages of a project’s development. When a project is in the construction phase, monitoring staff should be reviewing all documents to check the following:

- Subcontractor management and review; and
- Labor standards, Davis-Bacon (if applicable)
- Section 3 (if applicable)
- Compliance with contract deadlines;
- Comparison of payment requests with eligible costs
- Completed items on work item lists or an addendum/change order.

All work should be inspected before a payment is processed. If a project appears to be experiencing difficulties, monitoring staff should perform an on-site visit.

Project Completion Review

When a project is complete, monitoring staff should make an on-site visit to monitor compliance with the following requirements:

- Property standards,
- Only eligible costs have been reimbursed,
- Construction management records,
- Lien waivers from both general contractor and all subcontractors,
- Proper data is collected to prepare women business enterprise and minority business enterprise (WBE/MBE) reports, and
- If match is being provided, the monitor should check that all proper documents have been submitted for review and calculation.

Initial Rent and Occupancy Review

Before a project reaches stabilized occupancy (95 percent or more), monitoring staff must review the Project Compliance Report and conduct an on-site visit to confirm that rent and occupancy standards have been met.

Ongoing Monitoring

Monitoring staff must review annual Project Compliance Reports and perform regular on-site visits throughout the affordability period to ensure continued compliance with:

- Rent and occupancy requirements;
- Property standards;
- Other Federal requirements (fair housing, lead-based paint, affirmative marketing, etc.).

Housing Opportunities for People with AIDS (HOPWA)

***Refers to the HOPWA Table in the Needs.xls workbook.**

- 74. Describe the activities to be undertaken with 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.**
- 75. 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.**
- 76. 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.**
- 77. 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).**
- 78. Provide 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.

- 79. Describe 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.**

Response:

Not applicable – Community Development is not the recipient of HOPWA funds.

Specific HOPWA Objectives

- 80. Identify specific objectives that the jurisdiction intends to initiate and/or complete in accordance with the tables* prescribed by HUD. Complete and submit Table 1C Summary of Specific Objectives or, if using the CPMP Tool, the Summaries.xls worksheets.**

Response: Not applicable.

- 81. 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.**

Response: Not applicable.

OTHER NARRATIVES AND ATTACHMENTS

- 82. Include any Strategic Plan information that was not covered by a narrative in any other section. If optional tables are not used, provide comparable information that is required by consolidated plan regulations.**

Response:

AFFIRMATIVELY FURTHERING FAIR HOUSING CHOICE

The Analysis of Impediments to Fair Housing Choice (AI) was completed in April, 2010 and is available for review in the Cumberland County Community Development Office. The study was a collaborative effort between Cumberland County and the City of Fayetteville Community Development Departments, assisted by a consulting firm, WFN, Inc. The following plan will outline efforts to Affirmatively Further Fair Housing countywide for program years that span 2010-2015.

Geographic Distribution

The Fayetteville-Cumberland County Human Relations Department has made progress in the elimination of housing discrimination, primarily by the expansion of human relations services to extend to all of Cumberland County. This geographic area includes not only the corporate limits of Fayetteville, but also the Towns of Eastover, Falcon, Godwin, Hope Mills, Linden, Spring Lake, Stedman, Wade, and the unincorporated areas of the county.

Citizen Participation

In developing the Consolidated Plan, data was collected through citizen participation. This included: housing and human service providers, housing developers/industry professionals,

and, of course, the general public. Data collection also consisted of a housing needs assessment and fair housing surveys. Citizens were asked to participate in several ways: by completing surveys via internet, completing surveys mailed directly to supportive housing groups and distributed among clientele. Community meetings were also held throughout the county. The focus of the survey was to determine what specific concerns our citizens have on the subject of fair housing.

Strategic Partnerships

The newest challenge in interagency cooperation is the lack of adaptation to departmental structural changes or lack of monetary resources of partnering agencies. In this era of economic uncertainties, it behooves us as an organization to facilitate the needs of partnering organizations, as well as the needs of the community at large, in order to maximize the potential resources we have in reaching those we serve. As we address impediments found in the AI, we will look to evolving our partnerships with grassroots organizations and community agencies. Likewise, the successful partnership between the City and County that resulted in a countywide human relations department should continue. This beneficial partnership is an example of City and County agencies working together to advance our common goal of affirmatively furthering fair housing choice.

Summary of Findings and Fair Housing Action Plan

The Analysis of Impediments revealed the following: The most substantial impediments to Fair Housing Choice in Cumberland County results from a combination of private and public sector deficiencies. Transportation issues, lack of affordable rental housing, and a lack of general education pertaining to citizens' rights as it relates to fair housing law are the overarching impediments.

Results from our citizen participation efforts through the fair housing survey lead to the following conclusions:

1) Cumberland County citizens are not aware of the fair housing law resulting in their ability to exercise their rights under the law.

- 58% of all respondents said they were not familiar with the Fair Housing laws. When asked if they knew how to file a Fair Housing report in Cumberland County, 77% did not know how.

2) There is a lack of available affordable housing units.

- Although Cumberland County has relatively low-cost housing, not all groups benefit. Much of the housing for sale, even at the lower end, is priced beyond the means of lower-income families. While rental housing is less expensive, the majority of multi-family housing consists of smaller one- and two- bedroom units.

3) Current public transportation is inadequate and not easily accessible.

- Of the 108 total respondents, 40% said FAST (Fayetteville Area System of Transit) did not offer easy access to Cumberland County employers, while 42% said they did not know, and only 18% agreed that FAST did provide easy transportation access throughout Cumberland County.

In our commitment to affirmatively further fair housing, Cumberland County Community Development will implement the following actions to address the identified impediments to fair housing choice during the **2010 – 2015** program years.

➤ ***Impediment 1: Lack of awareness of fair housing laws.***

Goal 1: To eliminate housing discrimination in Cumberland.

Objective 1: Increase awareness of fair housing law for **25** housing and service providers serving minorities and special populations groups from 2010-2015.

Strategy 1.1: Use mainstream social networking internet sites to promote fair housing awareness. This will help to create an interactive dialogue on community housing issues.

Strategy 1.2: The Fayetteville-Cumberland Human Relations Department will act as the information clearinghouse to provide citizens direct counsel on housing related concerns as well as connecting citizens with housing resources county-wide.

Strategy 1.3: Broaden distribution points of current fair housing and fair lending literature at public locations and targeted minority populations. Make housing awareness brochures available as downloadable content on City and County websites.

Strategy 1.4: Conduct an annual citizen survey on housing rights issues during the first quarter of each program year to evaluate citizen awareness of fair housing laws and how to report discriminatory practices.

Strategy 1.5: Continue annual workshops on housing awareness and increase equal housing training through agency partners.

Strategy 1.6: Provide annual fair housing training for organizations that receive funding through the Community Development programs.

➤ ***Impediment 2: Lack of affordable housing in Cumberland County.***

Goal 2: Increase the availability and accessibility of decent, safe, and affordable housing in Cumberland.

Objective 2: To provide **125** affordable housing units (homeowner and rental) from 2010-2015.

Strategy 2.1: Provide incentives such as low interest loans to encourage private investment that creates affordable housing units.

Strategy 2.2: Use marketing tools such as: direct mailings, community meetings and notices to partner organizations, which interact with lower income populations to better inform targeted minority groups that may not be aware of existing affordable housing and encourage these groups to apply.

Strategy 2.3: Encourage participation in the development of affordable housing by increasing incentives for nonprofits that are designated CHDO's.

Strategy 2.4: Continue marketing CCCD's Rental Rehab Program to property owners of dilapidated rental housing and potential for-profit and non-profit investors.

➤ ***Impediment 3: Lack of public transportation in rural Cumberland County.***

Goal 3: To increase the availability and accessibility of transportation throughout rural Cumberland County.

Objective 3: Increase awareness of Cumberland County's Rural Transportation Program (RTP) to **25** citizen support agencies from 2010-2015.

Strategy 3: Increase public awareness of Cumberland County's existing rural transportation programs that provide transportation services to citizens 60 and over, the disabled, and the rural general public.

Section 3 Requirements

Cumberland County ensures that it follows the requirements for Section 3 as outlined in our Compliance Guide. Please refer to Appendix I for a copy of Community Development's Compliance Guide to Section 3 Requirements.

83. Section 108 Loan Guarantee

If the jurisdiction has an open Section 108 project, provide a summary of the project. The summary should include the Project Name, a short description of the project and the current status of the project, the amount of the Section 108 loan, whether you have an EDI or BEDI grant and the amount of this grant, the total amount of CDBG assistance provided for the project, the national objective(s) codes for the project, the Matrix Codes, if the activity is complete, if the national objective has been met, the most current number of beneficiaries (jobs created/retained, number of FTE jobs held by/made available to LMI persons, number of housing units assisted, number of units occupied by LMI households, etc.)

Response: Not applicable – Community Development does not have any open Section 108 projects.

84. Regional Connections

Describe how the jurisdiction's strategic plan connects its actions to the larger strategies for the metropolitan region. Does the plan reference the plans of other agencies that have responsibilities for metropolitan transportation, economic development, and workforce investment?

Response:

Refer to the consultation process beginning on page 4 for a description of the consultation process with metropolitan transportation, economic development, and workforce investment agencies.