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**Management Needs**

**U.S. Department of Housing**

OMB Approval No. 2577-0157

(exp. **3/31/2017**)

**Assessment**

**and Urban Development**

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

HA Name

Original

Revision Number

General Description of Management Needs

Urgency of

Need (1- 5)

Preliminary Estimated HA-Wide Cost

Source(s) of Information

Page

of

□

form **HUD-52833** (1/2014)

|  |  |
| --- | --- |
| Total Preliminary Estimated HA-Wide Cost | $ |
| Date Assessment Prepared |   |

Public reporting burden for this collection of information is estimated to average 13 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

This collection of information requires that each eligible applicant submit comprehensive plan information to HUD every six years in order to receive its annual formula grant. This information will be used by HUD to determine whether the comprehensive plan/annual submission meets statutory and regulatory requirements for the annual formula grant. Responses to the collection are required by Section 14(e)(1)(B) of the U.S. Housing Act of 1937, as amended. The information requested does not lend itself to confidentiality.

**Instructions for Preparation of Form HUD-52833, Management Needs Assessment**

**Report Submission:** Prepare one form HUD-52833 for the entire HA and submit to HUD as part of the submission of the original Comprehensive Plan in the first year of participation in the Compre-hensive Grant Program (CGP) and every sixth year when a complete revision of the management needs assessment is required. On an as-needed basis, submit a revised form whenever management needs have significantly changed since the last needs assessment and the HA wishes to include those needs in the Five-Year Action Plan.

In addition, at the HA’s option, include other management and operations needs identified through a self-assessment or identified under the PHMAP for PHAs, but not set forth in an MOA or IP.

Describe the needs in broad categories, such as rent collection, preventive maintenance, security, etc. Enter all broad categories of needs without regard to the availability and/or source of funds.

**Heading Instructions:**

**HA Name.** Enter the HA Name.

If there are no current needs and the HA does not anticipate any management needs within the next five years, enter a statement to that effect in this section. Such a statement does not preclude the HA from amending the needs assessment at any time within the five-year period if unforeseen needs arise or from identifying new needs which have occurred when the needs assessment is revised every sixth year.

**Original or Revision Number.** Self-explanatory. Every sixth year a new original is prepared.

**Column Instructions:**

**General Description of Management Needs.** Enter a general description of all unfunded and no cost improvements needed to upgrade the management and operation of the HA and of each viable development so that decent, safe and sanitary living conditions will be provided. Enter only management improvements that are eligible for CGP funding, including any management needs anticipated over the next five years.

**Urgency of Need.** For each broad category of need identified under the General Description of Management Needs, enter a number that corresponds to the relative urgency of the need, with “1” reflecting the most urgent need and “5” reflecting the least urgent need.

**Preliminary Estimated HA-Wide Cost.** Enter the preliminary estimated HA-wide cost for each broad category of need described in the General Description of Management Needs.

**Do not enter any management improvements already funded by CIAP or other sources which the HA plans to complete. How-ever, enter management improvements currently funded under CIAP where the HA plans to reprogram CIAP funds for other work under the CGP.**

**Total Preliminary Estimated HA-Wide Cost.** Enter the total pre-liminary estimated cost for the broad categories listed in the General Description on Management Needs.

**Date Assessment Prepared.** Self-explanatory.

Identify all current needs related to the mandatory areas set forth in the CGP Guidebook 7485.3, as revised. To the extent that any of these needs are addressed in an existing document, cross-refer-

**Source(s) of Information.** Identify the source(s) of information used to develop the General Description of Management Needs. Retain such information in HA files (1) as supporting documentation for the needs assessment, (2) for post-review by HUD, or (3) for submission to HUD upon request.

ence that document. For PHAs, an existing document includes a Memorandum of Agreement (MOA) developed in accordance with the provisions of the Public Housing Management Assessment Program (PHMAP) or an Improvement Plan (IP). For example, "improve rent collection, see MOA." If a particular work category is

targeted to a specific development, enter the development number in parentheses.

form **HUD-52833** (1/2014)