

Consolidated Plan

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Acronyms

ADDI – American Dream Downpayment Initiative

AI – Analysis of Impediments to Fair Housing Choice

CAA – Community Action Agency

CDA – Community Development Administration

CDBG – Community Development Block Grant Program

CITC – Community Investment Tax Credit

CSBG – Community Services Block Grant Program

DBED – Department of Business and Economic Development

DHCD – Department of Housing and Community Development

DHMH – Department of Health and Mental Hygiene

DHR – Department of Human Resources

DNR – Division of Neighborhood Revitalization

DSELP – Downpayment and Settlement Expense Loan Program

EHRP – Elderly Rental Housing Program

ELI – Extremely Low-Income (earning less than 30% of area median income)

ESG – Emergency Shelter Grants Program

FHA – Federal Housing Administration

GHFP – Group Home Financing Program

HMDA – Home Mortgage Disclosure Act

HMIS – Homeless Management Information System

HOME – HOME Investment Partnerships Program

HOPWA – Housing Opportunities for Persons With AIDS

HOPE (I-VI) – Housing Opportunities for Persons Everywhere Program(s)

HPC – Housing Policy Commission

HUD – U.S. Department of Housing and Urban Development

IPP – Indoor Plumbing Program

LIHTC – Low-Income Housing Tax Credit Program

LI – Low-income (earning more than 50% but less than 80% of area median income)

MAHT – Maryland Affordable Housing Trust

MCHR – Maryland Commission on Human Relations

MDE – Maryland Department of the Environment

MDoA – Maryland Department of Aging

MDoD – Maryland Department of Disabilities

MDOT – Maryland Department of Transportation

MDP – Maryland Department of Planning

MF-Bond – Multi-Family Bond Program

MHF – Maryland Housing Fund

MHFP – Maryland Home Financing Program

MHRP – Maryland Housing Rehabilitation Program

MHT – Maryland Historic Trust
MMP – Maryland Mortgage Program

NR – Division of Neighborhood Revitalization

PFA – Priority Funding Area
PHA – Public Housing Authority
PRHP – Partnership Rental Housing Program

RAP – Rental Allowance Program
RELAP – Residential Lead Paint Abatement Program
RHPP – Rental Housing Production Program

Section 202 – Supportive Elderly Housing Program under Section 202 of the Federal Code

Section 8 -- a Tenant based rental assistance program targeted toward service very low-income households

Section 811 – Supportive Housing Program for persons with disabilities under Section 811 of the Federal Code

SHOP – Special Housing Opportunities Program

SHP – Supportive Housing Program

SHPR – Supportive Housing Program Renewal

SPC – Shelter Plus Care

SRO – Single Room Occupancy

STHGP – Shelter and Transitional Housing Facilities Grant Program

STAR – Special Targeted Applicant Rehabilitation Program

USDA – U.S. Department of Agriculture

VLI – Very Low-income (earning more than 30% but less than 50% of area median income)

WAP – Weatherization Assistance Program

INTRODUCTION

Maryland's Consolidated Plan

The State of Maryland has undertaken a major planning initiative called the Consolidated Plan. The Consolidated Plan is a planning tool required by the U.S. Department of Housing and Urban Development (HUD) that guides the use of federal, and to a lesser extent State, housing and community development funds. HUD has established three basic goals for the Consolidated Plan. The goals are:

- **Goal 1. To provide decent housing**
- **Goal 2. To provide a suitable living environment, and**
- **Goal 3. To expand economic opportunities.**

Goal 1 includes: Assisting homeless persons to obtain housing, retaining the affordable housing stock, increasing the availability of permanent housing that is affordable to low-income Americans without discrimination, improving access to housing credit, and increasing supportive housing that includes structural features and services to enable persons with special needs to live in dignity.

Goal 2 includes: Improving the safety and livability of neighborhoods, increasing access to quality facilities and services, reducing the isolation of income groups within areas by de-concentrating housing opportunities and revitalizing deteriorating neighborhoods, restoring, enhancing and preserving natural and physical features of special value for historic, architectural, or aesthetic reasons, and conserving energy resources.

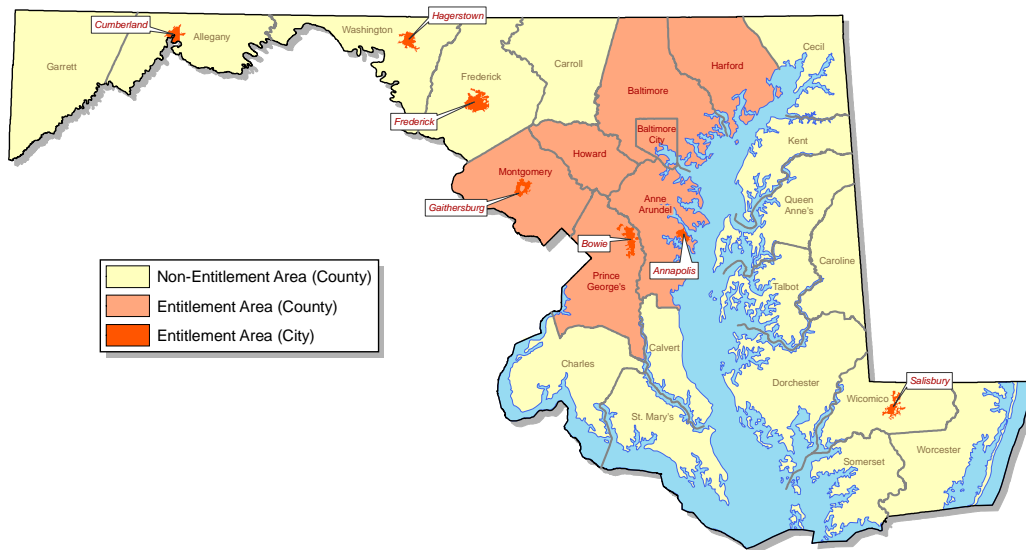
Goal 3 includes: Creating jobs accessible to low-income persons, providing access to credit for community development that promotes long-term economic and social viability, and empowering low-income persons to achieve self-sufficiency in federally-assisted and public housing.

Efforts to achieve each of these goals must primarily benefit low-income persons. The Consolidated Plan must be developed in accordance with the following statutory goals: Elimination of slums and blight, elimination of conditions that are detrimental to health, safety and public welfare, conservation and expansion of the nation's housing stock, expansion and improvement of the quantity and quality of community services, better utilization of land and other natural resources, reduction of the isolation of income groups within communities and geographic areas, restoration and preservation of properties of special value, alleviation of physical and economic distress, and conservation of the nation's scarce energy resources.

It should be noted that the State's Consolidated Plan primarily focuses on the State's **non-entitlement** jurisdictions. The non-entitlement jurisdictions are areas, primarily rural, which do not receive direct allocations of Community Development Block Grant (CDBG), HOME Investment Partnerships Program (HOME), Emergency Shelter Grants (ESG) and Housing Opportunities for Persons With AIDS (HOPWA) funds directly from HUD. Rather, the State administers these funds on their behalf. The State's entitlement jurisdictions which are NOT covered by the State's Plan – because they receive direct funding from HUD - are Anne Arundel, Baltimore, Harford, Howard, Montgomery and Prince George's Counties, and the Cities

of Annapolis, Baltimore, Bowie, Cumberland, Frederick, Hagerstown and Salisbury. All other areas in the State fall under the State's Consolidated Plan. The map below shows the State's entitlement and non entitlement jurisdictions.

Maryland's Non-Entitlement and Entitlement Areas by Jurisdiction
2004



It should be noted, however, that because all of the State's own housing, community development, and economic development programs are operated on a Statewide basis, and that some federal programs (such as Federal Low-Income Housing Tax Credits) are also funded on a Statewide basis, there is some discussion of these areas as well.

What is Consolidated?

The Consolidated Plan is called the Consolidated Plan because it combines all of the planning and application requirements of HUD's four main formula programs into a single Plan. The four formula programs covered by the Plan are the:

- **Community Development Block Grants (CDBG) Program**
- **HOME Investments Partnership Program (HOME)**
- **Emergency Shelter Grants (ESG) Program, and the**
- **Housing Opportunities for Persons With AIDS (HOPWA) Program**

The planning and application requirements that are consolidated include the Consolidated Housing Affordability Strategy (CHAS), the HOME program description, the CDBG final statement, the ESG application, the non-Housing Community Development Plan, and the HOPWA application.

There are also other funds under other programs covered by the Consolidated Plan. These funds are obtained through competitions, and, depending upon the program, can either be used either Statewide or only in certain jurisdictions depending upon the requirements of the program. The main competitive programs that fall under the Consolidated Plan include:

- **Assisted Living Conversation Program for Eligible Multifamily Projects**
- **Brownfields Economic Development Initiative**
- **Healthy Homes and Lead Hazard Control Programs**
- **HOPE I through VI Programs**
- **Housing Choice Voucher Family Self-Sufficiency (FSS) Program Coordinators**
- **Housing Counseling Programs**
- **John Heinz Neighborhood Development Program**
- **Low-Income Housing Preservation Program**
- **Public Housing Family Self Sufficiency**
- **Resident Opportunity and Self-Sufficiency (ROSS) Program**
- **Revitalization of Severely Distressed Public Housing Program**
- **Rural Housing and Economic Development Program**
- **Section 8 Moderate Rehabilitation Single Room Occupancy Housing (SRO) Program**
- **Shelter Plus Care Program**
- **Supportive Housing for the Elderly (Section 202) Program**
- **Supportive Housing for Persons with Disabilities (Section 811) Program**
- **Supportive Housing Program and**
- **Youthbuild, among others.**

This Plan covers funds received under the above programs for federal fiscal years (FFY) 2005 through 2009. Annual updates will be made each year to the Plan during this five year period to: 1) set annual goals for housing, economic, and community development activities, and 2) make any necessary adjustments to policies or objectives because of changes in federal and State programs, or because of changes in needs.

Eligible applicants vary from program to program, with some programs open to virtually any housing provider, while others are limited only to non-profit agencies, others only to public housing authorities, etc. Regardless of who applies for assistance, applications under these programs must be certified as being consistent with the Consolidated Plan at the appropriate level.

State agencies, as well as many non-profit corporations, public housing authorities and others have successfully competed for funding under these competitive programs in the past. The State strongly supports applications for any activities under these programs, or any other programs, which carry out the goals of the Consolidated Plan. In addition, it should be noted that while not directly covered by the Consolidated Plan, HUD's funding allocations for the Section 8 Voucher Program is to be made in a way that enables participating jurisdictions to carry out their own Consolidated Plans. Also, Public Housing Authorities (PHAs) must prepare their own PHA Plans which also must be consistent with the Consolidated Plan.

The Five Year Plan and the Annual Action Plan

This document contains two planning elements. The first element is a "big picture" five-year overall planning strategy. This "big picture" strategy was developed using surveys, public comments, public hearings, census data, information from the Governor's Housing Policy Commission, meetings with interested parties such as homeless providers and health agencies, and information from other State agencies. It sets the State's broad goals, such as revitalizing communities or providing housing for low-income persons. The second element is called the one-year Annual Action Plan, which starts on page 131. This element is much more detailed, and covers the specific actions the State plans to take in the next year to help meet its five-year goals. For example, while the five-year Plan states we will provide homeownership opportunities, the Annual Action Plan will specify the number of units to be produced during the coming year. Because it only covers a one-year period, this document is updated annually, with new goals so that eventually we reach the overall "big picture" goals laid out in the five-year Plan.

The Consolidated Plan Development Process

The Maryland Department of Housing and Community Development (DHCD) is the State's lead agency for developing Maryland's Consolidated Plan. DHCD conducted extensive citizen participation and out reach efforts when developing the Plan, as detailed below.

Consultation With Other State Agencies

While DHCD was designated the lead agency in developing the Consolidated Plan, it worked in consultation with other State agencies, local governments, non-profit organizations, profit-motivated housing sponsors, and other groups and individuals interested in housing, community development, and economic development policy in Maryland. It also followed an approved Citizen Participation Plan that was designed to involve as many citizens as possible into the plan development process.

State agencies other than DHCD which provided input into the Consolidated Plan included the Department of Health and Mental Hygiene (DHMH), Department of Human Resources (DHR), Maryland Department of Aging (MDoA), Maryland Department of the Environment (MDE) Maryland Department of Planning (MDP), Maryland Department of Disabilities (MDoD) and the Maryland Commission on Human Relations (NCHR).

DHMH's AIDS Administration had primary responsibility for developing the State's HOPWA policies, and its Alcohol and Drug Abuse, Developmental Disabilities, and Mental Hygiene Administrations helped developed strategies for the disabled. DHR has primary responsibility for helping the homeless in Maryland, and had major input into that section of the Plan, as did DHMH as many homeless persons have disabilities. MDE's primary focus with DHCD was working on lead paint abatement issues, while MDoA focused on the needs of the elderly and frail elderly. Census materials and data were provided by MDP, and DBED primarily focused on economic issues, especially in regard to the CDBG program where it is allocated part of the State's CDBG funds. The primary focus of the MHRC was on fair housing issues, including assisting in updating the State's Analysis of Impediments to Fair Housing Choice, and the

MDoD provided information and input in assisting persons with disabilities with housing opportunities.

Citizen Participation Efforts

DHCD undertook numerous efforts to gain citizen participation in the preparing the Plan. These included conducting needs surveys, holding numerous public hearings, participating in open meetings (such as local continuum of care meetings, HIV/AIDS provider meetings, and qualified allocation plan hearings), mass mailings, newspaper notices and advertisements, and using information from other open forums (such as the Governor's Housing Policy Commission) to gain public input into determine the housing, community development, and economic development needs in the State, and to develop strategies for addressing the identified needs.

Surveys

DHCD conducted two needs surveys when developing the Consolidated Plan. One of these surveys focused on Housing and Homeless needs, and the other focused on Community Development and Economic Development needs. These surveys were done on line, with letters sent to approximately 1,100 persons and organizations with a stake in the development of the Plan, including all chief elected officials at the County and municipal level, all the State's Public Housing Authorities, all of the chief county housing contacts, all for-profit and non-profit developers on DHCD's mailing lists, all of the State's Community Action Agencies, all of the service providers and/or advocacy organizations on DHCD's mailing lists, including organizations advocating for or providing services to persons who were homeless, persons with HIV/AIDS, persons with disabilities, or low-income persons in general, and all individuals who had contacted DHCD with an interest in the Consolidated Plan. A total of 198 people visited the Community and Economic Development Needs Survey, and 206 people visited the Housing and Homeless needs survey. Not all persons who visited the surveys filled them out, and some persons only filled them out in part. However, they provided valuable insight on what people felt were important in terms of housing and community needs. Copies of the surveys can be found in **Appendix I**.

Open Meetings

DHCD also participated in a number of open meetings, using information gathered there to help develop the Consolidated Plan. These included broad-based meetings, such as those held by the Governor's Housing Policy Commission, as well as more "issue focused" meetings including meetings held on helping persons with HIV/AIDS or the homeless.

The Governor's Housing Policy Commission (HPC) was convened under the leadership of Governor Robert L. Ehrlich. The purpose of the Commission was to make recommendations to the Governor for specific and measurable actions that could be taken to increase and preserve quality affordable housing in all Maryland communities to meet the needs, as well as the dreams, of working families, individuals with disabilities, the homeless and the elderly. Five subcommittees assisted the Commission to accomplish the duties of the Executive Order. More than 95 at-large members, in addition to Commissioners, participated in the subcommittee meetings, which were on Affordable Housing, Senior Housing Issues, Affordable and Accessible Housing for Individuals with Disabilities, Land Use and Planning and Community Revitalization.

The Commission met for over a year, holding numerous public hearings, and making the minutes of its subcommittee meetings, which were also public, available on DHCD's website.

As noted above, a number of open meetings were also held regarding specific issues important to the development of the Consolidated Plan as well. One of the primary ones was all-day session on how the State would administer the HOPWA program in the rural jurisdictions. Rural service providers were brought together from all over the State to help develop policy on the use of HOPWA funds, as well as Ryan White and other HIV/AIDS funds that fell under the State HOPWA program. They reached a consensus that HOPWA funds would be focused almost exclusively on housing, while service funding would be switched to Ryan White, as shown in the discussion on the HOPWA program in the Annual Action Plan.

Other open meetings focused on the homeless. These meetings were hosted by the Department of Human Resources or local continuums of care. DHR is under mandate to develop a 10-year plan to end homelessness in Maryland. That Plan is due in 2006. In the interim, DHCD staff attended these meetings to help develop policies to assist homeless persons, both in the development of that Plan, as well as in the Consolidated Plan.

Public Hearings

A total of 8 public hearings were held specifically on the Plan in communities located throughout the State. All of the public hearings were held in sites accessible to the handicapped. The first four hearings were held before a draft of the Plan was written, so that suggestions, comments and recommendations could be made early in the planning process. The hearings were held at the following dates, times, and places: Wednesday, February 2, 2005 at 1:30 p.m. at the Denton Community Center in Denton; Thursday, February 3, 2005 at the Fairview Branch Library in Owings; Friday, February 4, 2005 at 1:30 p.m. at the Allegany County Office Complex in Cumberland and Monday, February 7, 2005 at 7:00 p.m. at the Maryland Department of Housing and Community Development in Crownsville. The second set of hearings, held after the draft Plan had been issued, were held on the following days, time and places: Tuesday, April 19, 2005 at 7:00 p.m. at the Maryland Department of Housing and Community Development in Crownsville; Wednesday, April 20, 2005 at 1:30 p.m. at the Denton Community Center in Denton; Thursday, April 21, 2005 at 10:30 a.m. at the Fairview Branch Library in Owings, and Friday, April 22, 2005 at 1:30 p.m. at the Allegany County Office Complex in Cumberland

All notices of public hearings and the comment period were published in newspapers throughout the State, including Baltimore Sun, Baltimore Afro-American, Daily Mail (Hagerstown), Capital Gazette (Annapolis), Star Democrat (Easton), Dorchester Star, Caroline Times-Record, Kent County News, Bay Times, and Record Observer. In addition, DHCD sent out a mass mailing to nonprofit and for-profit housing developers, municipal and county executives, public housing authorities, community action agencies, advocacy organizations, AIDS/HIV organizations, and local housing and community development contacts, among others, to apprise them of the upcoming hearings and encourage their participation at the hearings and in the development of the new Plan.

Copies of the Consolidated Plan in all its stages were mailed to Maryland's regional libraries, including the Enoch Pratt Free Library in Baltimore, the Blackwell Library in Salisbury, the Washington County Free Library in Hagerstown, the Lewis J. Ort Library in Frostburg, the

Frederick Douglas Library in Princess Anne, and the Southern Maryland Regional Library in Charlotte Hall. As the State's regional lending libraries, these libraries made the Plan available to other public libraries throughout Maryland. In addition, a large print version of the Plan was provided to the Maryland Library for the Blind and Physically Handicapped. The draft Plan was also made available on DHCD's website for downloading, and free copies of the draft Plan were also provided to persons who requested one.

Media Participation

In addition to the above newspaper notices, the State made additional efforts to broaden citizen participation by issuing press releases to over 200 news organizations. These organizations included newspapers, radio, and television stations. The press releases included information on the Consolidated Plan public hearings, the availability of the Plan for public comment, and the priorities for housing, economic development, and community development assistance.

Internet Availability

Comments on the draft five-year Plan were also taken via e-mail for those who wished to respond using that format. As noted above, DHCD posted the draft Plan, and will post the final Plan, on the Internet. In future years DHCD plans to post the draft and final Annual Updates to our website to give persons the opportunity to review and comment on the draft Plan through the Internet if they so choose.

HOUSING AND HOMELESS NEEDS ASSESSMENT

Introduction

This section of the Consolidated Plan has **four parts** all focusing on the State's estimated housing needs.

The **first part** discusses the estimate of the significant current needs for housing assistance by income and family status. Information is provided separately for extremely low-income, low-income, moderate-income, and middle-income families and households by tenure type (renter/owner) and for different family categories (such as large families and single persons). It describes the extent to which cost burden and severe cost burden are being experienced by extremely low-, low-, moderate-, and middle-income renters and owners. It also describes the extent that any racial or ethnic group has disproportionately greater need for housing than any group as a whole.

In the **second part** of this section of the Consolidated Plan, there is a discussion of the nature and extent of homelessness, broken down between the sheltered and unsheltered homeless. This discussion includes information on sub-populations of the homeless, including severely mentally ill homeless, alcohol/drug addicted homeless, homeless persons who are severely mentally ill *and* have an alcohol or drug addiction, homeless persons fleeing domestic violence, homeless youth, and homeless persons diagnosed with AIDS and related diseases. This section also includes information on the needs of persons threatened with homelessness.

The **third part** of this section of the Consolidated Plan is a discussion of the special needs population, including persons who are the frail elderly and the disabled. Frail elderly persons are persons who are 85 or older with functional disabilities related to mobility or personal care. Disabled persons include those with developmental disabilities, physical disabilities, mental illness, alcohol or drug additions, or who are HIV positive or are living with AIDS. The discussion looks at both those who do not require supportive housing, and those who do.

Finally, in the **fourth part** of this section of the Consolidated Plan, there is a discussion of lead-based paint hazards, including estimates of the number of housing units occupied by low-income and very low-income families that contain lead paint hazards.

HOUSING NEEDS

The data on housing need in this part of the Consolidated Plan was provided to the State by HUD. The information was developed through special runs of the 2000 census.

It is important to understand when looking at this data that HUD defined housing problems narrowly. HUD data focuses primarily on households with excessive housing costs. Some additional data is provided on housing problem is only that they are living in substandard housing, which includes housing that is overcrowded (more than one person per room) or lacks a complete kitchen or bathroom. However, if a family is, for example, paying both excessive rent and living in overcrowded conditions, their housing problem is only reported as paying excessive rent. The fact that there housing unit is also overcrowded would not be reported. Therefore, when we write "X" percent of low-income households had some sort of housing

problem, we are referring to the problem as defined by HUD, and not all the housing problems a family may actually be facing. In all likelihood, a significant number of housing units where people are paying excessive rent probably have some other housing related condition too, such as overcrowding or lead paint problems (discussed later on in this section). That information was not captured in this data, even though the units where households are paying excessive costs may also be in need of renovation, such as rehabilitation, weatherization assistance, or other repair.

Also, a note on interpreting the data and information below: The discussion focuses on all households with housing problems, and then breaks the discussion down by renter versus owner. The information on persons paying excessive housing costs for these two groups is important, particularly for families who rent, as those families who rent and pay excessive housing costs are the families most subject to possible homelessness. This is especially true for renters who pay more than 50 percent of their income for rent. For this reason, they are the families that HUD considers to have “worst case housing needs”. The numbers are less important for owners, as their excessive “housing costs” (as defined by the census) actually reflect families who are paying not only a first mortgage, but very often tax deductible property taxes, or second mortgages that pay for cars, credit cards, college tuition, etc., as well as utility costs. Mortgage underwriters do not generally provide mortgages that require the payment of more than 28 percent of income, so when the census reports owner-occupied households are paying more than 30 (or 50) percent of their income for “housing costs” what they may really have is a debt problem, not a housing problem. However some of these households may have a legitimate housing problem, which is most likely due to loss of income from changes in their job situation or retirement.

Lastly, the discussion also includes differences in housing problems based on family status as well as between white and black/African-American households. This is done as part of an emphasis on fair housing, to determine if there are substantial differences in housing need based on family makeup or race. (NOTE: DHCD looked at housing needs for other races beside black/African-American as well as people of Hispanic background, but the number of persons of other races/ethnicity in the State’s non-entitlement areas is so small that the numbers were not statistically significant.)

Extremely Low-Income Households

An extremely low-income household is a household earning 30 percent of median income or less. According to 2000 census, there were about 221,056 extremely low-income households in Maryland. Of these, 37,769 live in the State’s non-entitlement jurisdictions. Of these 37,769 households, 69.3 percent had some sort of housing problem. Just over Sixty-seven percent (67.3%) of them paid more than 30 percent of their income for housing, and 47.6% percent paid more than 50 percent of their income for housing.

There was an almost even break between the number of extremely low-income renters and owners in the non-entitlement areas. That is, 18,797 of the households in this group were renters, and 18,972 households lived in owner-occupied housing. For renter occupied households, 68.6 percent of extremely low-income renters had housing problems, with 66.1 percent of them paying more than 30 percent of their income in rent, and 48.1 percent paying more than 50 percent of their income for rent. For owner occupied households, 69.9 percent

had housing problems, with 68.5 percent paying more than 30 percent of income for housing, and 47.1 percent paying more than 50 percent of income for housing.

Extremely Low-Income Renter Households

Elderly Households: Maryland had about 6,000 extremely low-income elderly renter households in its non-entitlement areas in 2000. This is based on 2000 census materials and HUD's definition of elderly households, which are households which are headed by a person aged 62 or older. Just under 60 percent of the elderly renters earning less than 30 percent of median income had some sort of housing problem. About 59 percent paid more than 30 percent of their income for rent, and 39 percent paid more than 50 percent of their income for rent. As noted above, households paying more than 50 percent of their income for rent are considered to face the greatest risk of homelessness. Therefore, the elderly households paying more than 50 percent of their income for rent would be among those households with worst case needs.

Small Households: Based on the 2000 census Maryland had about 6,100 extremely low-income small related renter households in the non-entitlement jurisdictions. HUD defines a small family as a household of 2-4 persons. About Seventy-four percent of these households had housing problems, with about 71 percent of these households pay more than 30 percent of their income for rent, and about 52 percent paying more than 50 percent of their income for rent. This 52 percent of small related renter households earning less than 30 percent of median income and paying more than 50 percent of their income for rent would be among those households with worst case needs.

Large Households: Maryland had about 1,286 large related renter households which have extremely low-incomes in the non-entitlement jurisdictions in the year 2000. HUD defines large families as families of 5 or more persons. Eighty-four percent had housing problems in accordance with HUD's data. About Seventy-seven percent of the State's large related households were paying more than 30 percent of their income for rent, and 51 percent paid more than 50 percent of their income for rent. These households paying more than 50 percent of their income for rent would also be among those households with worst case needs.

Other Households: There are about 5,400 "other" extremely low-income renter households in Maryland. "Other" households include non-elderly single person households, and non-family households. About sixty-nine percent of these households had some sort of housing problem. About sixty-six percent of these households were paying more than 30 percent of their income for rent, and 53 percent were paying more than 50 percent of their income for rent. The 65 percent of "other" extremely low-income households earning less than 30 percent of median income and paying more than 50 percent of their income for rent would be the final group having worst case needs.

Extremely-Low-income Homeowners

Elderly Homeowners: There were about 10,831 extremely low-income elderly homeowner households in Maryland's non-entitlement jurisdictions in 2000. Of these households, HUD's data indicates about 66 percent had some sort of housing problem. About 65 percent of these households were paying more than 30 percent of their income for housing costs, and about 37 percent were paying more than 50 percent of their income for housing costs.

Small Households: There were about 3,972 extremely low-income small homeowner households in Maryland's non-entitlement jurisdictions in 2000. Of these, 76 percent had housing problems. About 75 percent of the households paid more than 30 percent of the income for housing costs, and about 62 percent paid more than 50 percent of their income for housing costs.

Large Households; There were about 957 extremely low-income owner-occupied households in Maryland in the year 2000. About 81 percent of them had housing problems, with about 72 percent of them paying more than 30 percent of income for housing costs, and about 59 percent paying more than 50 percent of their income for housing costs.

All Other Owner Households: There were about 3,212 "other" extremely low-income owner households in Maryland's non-entitlement jurisdictions in 2000. About 74 percent of them had housing problems. About Seventy-two percent of these households paid more than 30 percent of their income in rent, and about 59 percent paid more than 50 percent of their income for housing costs.

Differences by race among extremely low-income households

An analysis of differences in housing problems by race between extremely low-income white and African-American households generally shows that there is not a great deal of difference in need between renters and owners or by age or family status across the State's non-entitlement jurisdictions. This is illustrated in the table below:

Extremely Low-Income Households – Housing Problems by Race								
RENTERS	White Renter Households				Black/African-American Renter Households			
Household Type	Elderly	Family	Other	Total	Elderly	Family	Other	Total
Number of Households	4,687	4,328	4,147	13,162	1,158	2,578	980	4,716
Percent With Housing Problems	57.5	76.1	71.9	68.1	67.0	73.3	61.3	69.3
OWNERS	White Owner Households				Black/African-American Owner Households			
Household Type	Elderly	Family	Other	Total	Elderly	Family	Other	Total
Number of Households	9,338	3,869	2,742	15,949	1,512	828	451	2791
Percent With Housing Problems	66.2	77.3	73.6	70.2	65.4	73.7	70.5	68.7

HUD considers a difference in housing problems by race of more than 10 percent to be significant. In other words, if 40 percent of all white households had housing problems, but 51 percent of black or African-American households had housing problems, then that would be a significant difference in need by race. The one area of significant difference in need by race for

extremely low-income households would be “other” renters, where white renters have a need more than 10 percent greater than black/African-American households. It is unclear why this difference exists. The difference in need between elderly extremely low income renters is near 10 percent, but does not meet that threshold. (NOTE: HUD data regarding housing need by race did not distinguish between small and large families, nor did it go into detail about housing problems in terms of excessive rent.)

Low-Income Households

Maryland had about 207,310 low-income households in 2000. Low-income households are defined as those households earning more than 30 percent of median income, but less than 50 percent of median income. Of these 207,310 households, about 42,376 lived in Maryland's non-entitlement jurisdictions. About 54 percent of these households have housing problems, with about 51 percent paying more than 30 percent of their income for housing, and about 19 percent paying more than 50 percent of their income for housing.

Very Low-Income Renters

Based on 2000 Census figures, Maryland had about 17,013 low-income renter households in the non-entitlement jurisdictions. HUD estimates 59 percent of these households had some sort of housing problem. About 55 percent of them paid more than 30 percent of their income for rent, and 12 percent paid more than 50 percent of their income for rent. Those households paying more than 50 percent of income for rent would be the households with worse-case needs. Below is a discussion of housing problems by family type for low-income renter households:

Elderly Renters: Of the State's elderly low-income renter households (about 3,856 households in the non-entitlement jurisdictions), HUD estimates 52 percent had housing problems. About 50 percent paid more than 30 percent of their income for rent, and about 16 percent paid more than 50 percent of their income for rent.

Small Related Renter Households: Maryland had about 6,852 small related low-income renter households in the State's non-entitlement jurisdictions in 2000. About 59 percent of them had housing problems. About 56 percent of these households paid more than 30 percent of their income for rent, and about 10 percent paid more than 50 percent of their income for rent.

Large Related Renter Households: Maryland's non-entitlement jurisdictions had about 1,667 large related low-income renter households in 2000. HUD estimates about 64 percent had housing problems. About 48 percent of these households paid more than 30 percent of their income for rent, and about 6 percent paid more than 50 percent of their income for rent.

Other Low-Income Renter Households: There were about 4,638 "other" low-income households in Maryland's non-entitlement jurisdictions in 2000. About 62 two percent have some sort of housing problem. Approximately 60 percent of these households paid more than 30 percent of their income for rent, and about 15 percent paid more than 50 percent of their income for rent.

Low-Income Homeowners

Of the State's 25,363 low-income homeowner households in the State's non-entitlement jurisdictions in 2000, about 51 percent had some sort of housing problem. About 49 percent of these households paid more than 30 percent of their income for housing, while an estimated 24 percent paid more than 50 percent of their income for housing.

Elderly Homeowners: There were about 12,421 elderly low-income owner households in Maryland in Maryland's non-entitlement jurisdictions in 2000. About 32 percent had some sort of housing problem. Approximately 31 percent of these households were paying more than 30 percent of their income for housing costs, and 15 percent were paying more than 50 percent of their income for housing costs.

Small Households: There were about 7,631 low-income small homeowner households in Maryland's non-entitlement jurisdictions in 2000. Of these, 67 percent had housing problems. About 66 percent of the households paid more than 30 percent of the income for housing costs, and about 31 percent paid more than 50 percent of their income for housing costs.

Large Households; There were about 2,361 low-income owner-occupied households in Maryland in the year 2000. About 78 percent of them had housing problems, with about 70 percent of them paying more than 30 percent of income for housing costs, and about 33 percent paying more than 50 percent of their income for housing costs.

All Other Owner Households: There were about 2,950 "other" low-income owner households in Maryland in 200. About 65 percent of these households had some sort of housing problem. Approximately 63 percent paid more than 30 percent of their income for housing costs, and 37 percent paid more than 50 percent of their income for housing costs.

Differences by race among extremely low-income households

An analysis of differences in housing problems by race between white and African-American households shows that there is little difference in need between renters and owners, or by age or family status across the State's non-entitlement jurisdictions. This is illustrated in the table below:

Low-Income Households – Housing Problems by Race								
RENTERS	White Renter Households				Black/African-American Renter Households			
Household Type	Elderly	Family	Other	Total	Elderly	Family	Other	Total
Number of Households	3,288	5,631	3,416	12,335	433	2,392	971	3,796
Percent With Housing Problems	51.2	59.4	61.2	57.7	57.7	61.1	64.2	61.5

Low-Income Households – Housing Problems by Race (continued)								
OWNERS	White Owner Households				Black/African-American Owner Households			
	Household Type	Elderly	Family	Other	Total	Elderly	Family	Other
Number of Households	11,273	8,234	2,498	22,005	933	1,523	318	2,834
Percent With Housing Problems	30.7	70.1	63.0	49.1	39.0	65.5	67.3	56.4

There were no significant differences in housing needs by race for low-income households. The one area where a difference starts to become pronounced is with elderly owner-occupied households, however, the difference is less than the ten percent threshold to be considered significant.

Moderate Income Households

Maryland had about 304,113 moderate-income households in 2000. Moderate-income households are defined as those households earning more than 50 percent of median income, but less than 80 percent of median income. Of these 304,113 households, about 64,017 lived in Maryland's non-entitlement jurisdictions. About 40 percent of these households have housing problems, with about 38 percent paying more than 30 percent of their income for housing, and about 9 percent paying more than 50 percent of their income for housing.

Moderate-Income Renters

Based on 2000 Census figures, Maryland had about 19,612 moderate-income renter households in the non-entitlement jurisdictions. HUD estimates 25 percent of these households had some sort of housing problem. About 20 percent of them paid more than 30 percent of their income for rent, and about 2 percent paid more than 50 percent of their income for rent. Below is a discussion of housing problems by family type for moderate-income renter households:

Elderly Renters: Of the State's elderly moderate-income renter households (about 2,784 households in the non-entitlement jurisdictions), HUD estimates 31 percent had housing problems. About 30 percent paid more than 30 percent of their income for rent, and about 6 percent paid more than 50 percent of their income for rent.

Small Related Renter Households: Maryland had about 8,678 small related moderate-income renter households in the State's non-entitlement jurisdictions in 2000. About 21 percent of them had housing problems. About 17 percent of these households paid more than 30 percent of their income for rent, and about 1 percent paid more than 50 percent of their income for rent.

Large Related Renter Households: Maryland's non-entitlement jurisdictions had about 1,929 large related moderate-income renter households in 2000. HUD estimates about 37 percent had housing problems. About 8 percent of these households paid more than 30 percent of their income for rent. According to HUD data, none of these households paid more than 50 percent

of their income for rent.

Other Moderate-Income Renter Households: There were about 6,221 "other" moderate-income renter households in Maryland's non-entitlement jurisdictions in 2000. About 26 percent have some sort of housing problem. Approximately 27 percent of these households paid more than 30 percent of their income for rent, and about 2 percent paid more than 50 percent of their income for rent.

Moderate-Income Homeowners

Of the State's 64,017 moderate-income homeowner households in the State's non-entitlement jurisdictions in 2000, about 35 percent had some sort of housing problem. About 32 percent of these households paid more than 30 percent of their income for housing, while an estimated 7 percent paid more than 50 percent of their income for housing.

Elderly Homeowners: There were about 14,954 elderly moderate-income owner households in Maryland in Maryland's non-entitlement jurisdictions in 2000. About 20 percent had some sort of housing problem. Approximately 20 percent of these households were paying more than 30 percent of their income for housing costs, and 6 percent were paying more than 50 percent of their income for housing costs.

Small Households: There were about 18,801 moderate-income small homeowner households in Maryland's non-entitlement jurisdictions in 2000. Of these, 49 percent had housing problems. About 47 percent of the households paid more than 30 percent of the income for housing costs, and about 11 percent paid more than 50 percent of their income for housing costs.

Large Households; There were about 4,754 moderate-income owner-occupied households in Maryland in the year 2000. About 50 percent of them had housing problems, with about 42 percent of them paying more than 30 percent of income for housing costs, and about 7 percent paying more than 50 percent of their income for housing costs.

All Other Owner Households: There were about 5,896 "other" moderate-income owner households in Maryland in 200. About 52 percent of these households had some sort of housing problem. This was primarily an issue of costs, as about 52 percent paid more than 30 percent of their income for housing costs, and 13 percent paid more than 50 percent of their income for housing costs.

Differences by race among moderate-income households

An analysis of differences in housing problems by race between white and African-American moderate-income households shows that there is generally little difference in need between renters and owners, or by age or family status across the State's non-entitlement jurisdictions, with the exception of elderly households. This is illustrated in the table below:

Moderate-Income Households – Housing Problems by Race								
RENTERS	White Renter Households				Black/African-American Renter Households			
	Elderly	Family	Other	Total	Elderly	Family	Other	Total
Household Type								
Number of Households	2,457	7,973	4,892	15,322	282	2,035	1,102	3,419
Percent With Housing Problems	33.0	22.2	24.5	24.7	15.6	22.0	28.7	23.6
OWNERS	White Owner Households				Black/African-American Owner Households			
	Elderly	Family	Other	Total	Elderly	Family	Other	Total
Household Type								
Number of Households	14,125	20,375	5,285	39,785	799	2,660	533	3,992
Percent With Housing Problems	19.7	48.7	52.1	38.9	26.0	50.6	55.3	46.3

The number of moderate-income white elderly households who are renters and have housing problems is more than double that of black/African-American households. Why housing problems for white elderly rental households of moderate income is higher is unclear, but the difference is significant. Otherwise, for all other breakdowns of renter and owner moderate-income households the difference in housing need by race is quite close, within no significant differences in housing problems.

Middle and Upper Income Households

Maryland had about 1,248,184 middle and upper-income households in 2000. HUD defines Middle-income households are households that earn between 81 and 95 percent of median income. Households earning more than 96 percent of median income fall into HUD's definition of Upper-income households. Of these households, about 264,245 lived in Maryland's non-entitlement jurisdictions. About 10 percent of these households have housing problems, with about 9 percent paying more than 30 percent of their income for housing, and about 1 percent paying more than 50 percent of their income for housing. (NOTE: HUD did not break out data separately for these two income groups in the 2000 census, so they are discussed together.)

Middle and Upper Income Renters

Based on 2000 Census figures, Maryland had about 30,014 middle- and upper-income renter households in the non-entitlement jurisdictions. HUD estimates about 6 percent of these households had some sort of housing problem. About 2 percent of them paid more than 30 percent of their income for rent, but less than 1 percent paid more than 50 percent of their income for rent. Below is a discussion of housing problems by family type for moderate-income renter households:

Elderly Renters: Of the State's elderly middle- and upper-income renter households (about 3,099 households in the non-entitlement jurisdictions), HUD estimates 8 percent had housing problems. About 7 percent paid more than 30 percent of their income for rent, and about 3 percent paid more than 50 percent of their income for rent.

Small Related Renter Households: Maryland had about 17,310 small related middle- and upper-income renter households in the State's non-entitlement jurisdictions in 2000. About 4 percent of them had housing problems. About 1.4 percent of these households paid more than 30 percent of their income for rent, and less than one tenth of 1 percent paid more than 50 percent of their income for rent.

Large Related Renter Households: Maryland's non-entitlement jurisdictions had about 3,273 large related middle- and upper-income renter households in 2000. HUD estimates about 19 percent had housing problems. About 2 percent of these households paid more than 30 percent of their income for rent, and about 1 percent paid more than 50 percent of their income for rent. This means this is the only group by HUD's data that have problems that are primarily related to problems such as overcrowding or physically substandard units rather than rent burdens.

Other Renter Households: There were about 10,332 "other" middle- and upper-income renter households in Maryland's non-entitlement jurisdictions in 2000. About 4 percent had some sort of housing problem. Approximately 2 percent of these households paid more than 30 percent of their income for rent, but less than one tenth of 1 percent paid more than 50 percent of their income for rent.

Middle- and Upper-Income Homeowners

Of the State's 230,232 moderate-income homeowner households in the State's non-entitlement jurisdictions in 2000, about 10 percent had some sort of housing problem. About 9 percent of these households paid more than 30 percent of their income for housing, while an estimated 1 percent paid more than 50 percent of their income for housing.

Elderly Homeowners: There were about 36,342 elderly middle- and upper-income owner households in Maryland in Maryland's non-entitlement jurisdictions in 2000. About 8 percent had some sort of housing problem. These problems were most related to paying excessive rent, as 7.7 percent of these households were paying more than 30 percent of their income for housing costs, and 1.4 percent were paying more than 50 percent of their income for housing costs.

Small Households: There were about 145,099 middle- and upper-income small homeowner households in Maryland's non-entitlement jurisdictions in 2000. Of these, 10.3 percent had housing problems. About 9.8 percent of the households paid more than 30 percent of the income for housing costs, and about nine tenths of one percent paid more than 50 percent of their income for housing costs.

Large Households; There were about 25,371 middle- and upper-income owner-occupied households in Maryland's non-entitlement jurisdictions in the year 2000. About 13.5 percent of them had housing problems, with about 9.2 percent of them paying more than 30 percent of

income for housing costs, and about 7 tenths of one percent paying more than 50 percent of their income for housing costs.

All Other Owner Households: There were about 23,420 "other" middle- and upper-income owner households in Maryland in 2000. About 17.7 percent of these households had some sort of housing problem. This was primarily an issue of costs, as about 17.3 percent paid more than 30 percent of their income for housing costs, and 2 percent paid more than 50 percent of their income for housing costs.

Differences by race among middle- and upper-income households

An analysis of differences in housing problems by race between middle- and upper-income white and black/African-American households shows that black/African-American households shows that there is no significant difference in households with problems by race. This is illustrated in the table below:

Middle- and Upper-Income Households – Housing Problems by Race								
RENTERS	White Renter Households				Black/African-American Renter Households			
Household Type	Elderly	Family	Other	Total	Elderly	Family	Other	Total
Number of Households	2,737	16,708	8,896	28,341	273	3,018	1,008	4,299
Percent With Housing Problems	8.4	4.5	3.5	4.6	2.9	11.5	5.7	9.6
OWNERS	White Owner Households				Black/African-American Owner Households			
Household Type	Elderly	Family	Other	Total	Elderly	Family	Other	Total
Number of Households	34,537	155,510	21,167	211,214	1,449	10,799	1,778	14,026
Percent With Housing Problems	7.8	10.4	17.3	10.7	13.0	14.1	21.9	15.0

Five-Year Projections

As part of the development of the Consolidated Plan, HUD asked the State to provide five year projections for housing need for renter- and owner-occupied households.

No hard data on projected housing need in Maryland exists. Working from population information from the Maryland Department of Planning, the only solution the State could develop to project need was to multiply known need (based on 2000 census data) by the State's rate of population growth for 2005 and 2010. This would provide a "best guess" of projected housing needs through 2010.

The table below, based on the 2000 census, provides estimated need in 2005 projected through the year 2010. It uses the "best guess" approach and was calculated by multiplying the 2000

Census/CHAS data provided by HUD against the State's projected population growth of 5.93 percent between 2000 and 2005, and a projected growth rate of 10.57 percent between 2000 and 2010.

Projected Number of Households With Housing Problems In Maryland's Non-entitlement Jurisdictions, 2000-2010					
TENURE TYPE	HH TYPE	HOUSING PROBLEM	2000 (Actual)	2005 (projected)	2010 (projected)
RENTERS	Small Related	Cost Burden>30%	9,330	10,519	10,980
		Cost Burden>50%	3,894	4,100	4,306
		Substandard	1,012	1,073	1,119
	Large Related	Cost Burden>30%	2,014	2,134	2,227
		Cost Burden>50%	791	833	875
		Substandard	1460	1546	1614
	Elderly	Cost Burden>30%	6,487	6,872	7,173
		Cost Burden>50%	3,228	3,399	3,669
		Substandard	205	217	226
	All Others	Cost Burden>30%	7,978	8,451	8,821
		Cost Burden>50%	3,697	3,892	4,087
		Substandard	665	704	735
OWNERS	Cost Burden>30%	65,708	69,605	72,654	
	Cost Burden>50%	21,690	22,840	23,983	
	Substandard	3,509	3,717	3,880	

Cost Burden >30% means households paying more than 30 percent of their income in rent.

Cost Burden>50% means households paying more than 50 percent of their income in rent.

Substandard housing means housing that is substandard only. Substandard housing is housing that is overcrowded (more than one person per room) or has an incomplete kitchen or bathroom.

NEEDS ASSESSMENT - PART II

HOMELESS NEEDS

This part of the Consolidated Plan has three sub-parts dealing with homelessness. Sub-part one describes the needs of the sheltered and unsheltered homeless, the nature and extent of homelessness, the need for facilities and services for homeless individuals and homeless families with children, and to the extent available, information on homelessness by race and ethnic group. Sub-part two discusses sub-populations of the homeless, including persons who are (a) severely mentally ill only, (b) alcohol/other drug addicted only, (c) severely mentally ill and alcohol or other drug addicted, (d) fleeing domestic violence, (e) homeless youth, and (f) diagnosed with AIDS or related diseases. Sub-part three describes the needs and characters of low-income individuals and families with children, especially those with incomes below 30 percent of median income, who are currently housed but at risk of becoming homeless.

Counting the number of people who are homeless is a difficult task. Sociologists and statisticians use many methods to measure homelessness. Because of the difficulty in counting the entire homeless population, the Consolidated Plan uses a combination of statistical studies and information from the Department of Human Resources (DHR), the State's lead agency for solving homelessness, to try to obtain an understanding of homelessness in Maryland. Some of the statistical studies are old, however they are the best available. The information from the DHR is more recent. However, this information only reflects the number of persons who are homeless and were served by the shelter system.

An assumption inherent in DHR's shelter survey is that duplication exists in the number of people served by shelters. If a person or family stays in more than one shelter in a year, they will be counted by each shelter. There exists no workable way to remove this duplication. However, if a person or family stays in the same shelter in January, and then returns in September, that person or family is counted only once.

Based on the most recent non-duplicative study of homelessness we have in Maryland (undertaken in 1992 – a study was taken by DHR earlier this year, for which results are still being compiled for incorporation into their 10 year Plan to end homelessness), approximately 27,561 persons in Maryland were homeless for at some point during the year. This number was obtained by using a count of homeless children made by the Maryland State Department of Education (MSDE), formulas prepared by the Urban Institute, and information from a study by Johns Hopkins University.

Based on the Hopkins study (and national studies), homeless children represent about 32 percent of all the homeless in Maryland. Using that ratio, there are about 22,591 sheltered homeless in Maryland. According to the Urban Institute, the unsheltered homeless account for about 22 percent of all the homeless. Therefore, multiplying the sheltered homeless by 22 percent, there are about 4,950 unsheltered homeless in Maryland, or a total of about 27,561 homeless people in Maryland.

Studies by the Urban Institute allow us to make estimates of the number of homeless persons with severe mental illness (only), alcohol or other drug abuse problems (only), or who have both mental illness and alcohol or other drug abuse problems. In addition,

the Urban Institute has also done estimates on the number of persons who are homeless due to domestic violence, are homeless youth, or who have AIDS/HIV and related diseases. The table below provides a profile of the homeless in Maryland:

State of Maryland Estimated Homeless Population			
Homeless Population	Sheltered	Unsheltered	Total
Number of Homeless Families	3,343	735	4,079
Number of Persons in Homeless Families	9,262	2,038	11,300
Youth (17 years or younger)			
Youth (17 years or younger)	7,234	0	7,234
Adult (18 years and older)			
Adult (18 years and older)	15,357	4,970	20,327
Total	22,581	4,970	27,561
Sub-populations of homeless persons with severe needs related to:	Percent Sheltered	Percent Unsheltered	
Severe Mental Illness (SMI) only	12%	8%	
Alcohol/other drug abuse only	19%	34%	
SMI & Alcohol/other drug abuse	8%	13%	
Domestic violence	13%	0%	
Homeless youth	1%	1%	
AIDS/related disease	15%	15%	

More recently, the Department of Human Resources collected homeless data for State Fiscal Year (SFY) 2003 from all known providers of homeless services. Each year from 99 to 100 percent of all providers respond to DHR's data collection survey. The data results included the number of people receiving shelter, either through emergency shelter, transitional housing or motel placements. Based on that survey, 45,560 people were served in shelter programs in Maryland, which includes some duplication as homeless persons may have used multiple shelters during the course of the year.

The number of people served in FY 2003 represents a 14% decrease from those served in FY 2002. However, the DHR survey also showed that 47,190 persons were turned away from shelter at some point, an increase of 14% over the previous year. Further, some shelters do not collect information on turnaways. It is also unknown how many people turned away could not find shelter at all, or found assistance at other facilities.

The State has more transitional housing beds for the homeless than shelter beds. In FY 2003, the State had 2,486 shelter beds, and 2,739 transitional housing beds. (An additional 435 beds were undesignated as emergency or transitional beds). DHR reports that this represents a reduction in beds from FY 2002, as eleven shelters closed between 2002 and 2003. The average stay in an emergency shelter was 33 days, and the average stay in transitional housing was 121 days.

Sheltered Homeless

The information below is from DHR's 2003 report on homelessness in Maryland. Not all shelters provide demographic information on the complete range of demographic data

for homeless persons, so the numbers do not match between age, gender, ethnicity, and family status. Nonetheless, the study provides a good profile of the sheltered homeless in Maryland.

Race/Ethnicity of Sheltered Homeless

Overall, the majority of sheltered homeless persons were primarily African-American. In the State's non-entitlement jurisdictions, the homeless were primarily white. Hispanics made up a relatively small number of homeless persons overall, except in Kent, Talbot and Montgomery Counties, where the Hispanic homeless population was about 14 percent of the homeless population overall. In Kent and Talbot County this is probably due to the presence of agricultural workers, while in Montgomery County it is somewhat more reflective of the changing demographics of that jurisdiction.

Department of Human Resources Ethnicity of Homeless Persons - SFY 2003					
Jurisdiction	White	African-American	Hispanic	Other	Unknown
Allegany	372	43	7	18	0
Anne Arundel	490	525	28	34	11
Baltimore City	3,284	18,556	415	176	467
Baltimore County	418	1,056	41	22	1
Calvert	199	109	9	11	26
Caroline	54	20	2	5	0
Carroll	332	67	11	5	2
Cecil	276	76	14	2	47
Charles	312	491	18	24	0
Dorchester	62	73	6	1	0
Frederick	704	407	90	14	149
Garrett	138	1	1	0	0
Harford	323	218	25	38	7
Howard	206	455	28	24	0
Kent	5	5	2	0	0
Montgomery	718	2,484	580	163	209
Prince George's	215	1,768	84	54	0
Queen Anne's	0	0	0	0	0
Saint Mary's	234	316	7	7	0
Somerset	11	7	0	0	0
Talbot	9	15	4	0	0
Washington	1,571	768	59	6	75
Wicomico	191	167	28	3	0
Worcester	240	182	3	4	0
TOTAL	10,364	27,809	1,462	611	994
Non-Entitlements Only	4,710	2,747	261	100	299

Family Demographics of Sheltered Homeless

The Familial status of homeless persons also differs between urban areas and rural areas. Overall, about 69 percent of all homeless are individuals. However, in the non-entitlement areas, there is almost a 50-50 split between homeless individuals and persons in families.

Department of Human Resources Family Status of Homeless Persons – SFY 2003				
Jurisdiction	Individuals	Family Members	% Individuals	% Family Members
Allegany	233	207	52.95%	47.05%
Anne Arundel	429	751	36.36%	63.64%
Baltimore City	21,321	2,455	89.67%	10.33%
Baltimore County	492	987	33.27%	66.73%
Calvert	168	193	46.54%	53.46%
Caroline	0	81	0.00%	100.00%
Carroll	1,206	189	86.45%	13.55%
Cecil	355	408	46.53%	53.47%
Charles	214	631	25.33%	74.67%
Dorchester	110	32	77.46%	22.54%
Frederick	652	717	47.63%	52.37%
Garrett	46	66	41.07%	58.93%
Harford	672	463	59.21%	40.79%
Howard	100	613	14.03%	85.97%
Kent	8	4	66.67%	33.33%
Montgomery	1,857	2,487	42.75%	57.25%
Prince George's	776	1,081	41.79%	58.21%
Queen Anne's	0	0	0.00%	na
Saint Mary's	204	360	36.17%	63.83%
Somerset	9	9	50.00%	50.00%
Talbot	43	23	65.15%	34.85%
Washington	1,042	1,437	42.03%	57.97%
Wicomico	499	574	46.51%	53.49%
Worcester	328	101	76.46%	23.54%
TOTAL	30,764	13,869	68.93%	31.07%
Non-Entitlements Only	5,117	5,032	50.42%	49.58%

Age of Homeless Persons

Similar to the differences found between urban and non-urban areas for ethnicity and family status, the age of persons who are homeless differs between these areas as well. When all areas of the State are examined, most homeless persons are over 31. However, when only the non-entitlement jurisdictions are examined, the majority of homeless persons are under 30. This is reflective of the fact that there are substantially

more homeless families in the rural areas who have children. The table below shows the age breakdown of homeless persons by county:

Department of Human Resources Age of Homeless Persons – SFY 2003				
Jurisdiction	0-17	18-30	31-60	61+
Allegany	124	97	202	17
Anne Arundel	477	227	459	17
Baltimore City	2,047	3,423	17,275	623
Baltimore County	669	326	493	12
Calvert	119	85	141	10
Caroline	40	26	14	1
Carroll	113	203	525	61
Cecil	227	147	409	20
Charles	394	152	298	6
Dorchester	16	28	93	5
Frederick	408	258	427	18
Garrett	35	28	70	6
Harford	213	180	217	1
Howard	120	281	71	3
Kent	2	2	8	0
Montgomery	1,456	707	1,633	86
Prince George's	962	356	799	15
Queen Anne's	0	0	0	0
Saint Mary's	243	70	234	17
Somerset	4	6	8	0
Talbot	9	18	32	7
Washington	759	574	566	92
Wicomico	196	89	105	5
Worcester	80	90	239	20
TOTAL	8,713	7,373	24,318	1,042
Non-Entitlements Only	2,769	1,873	3,371	285

Gender of Homeless Persons

The majority of homeless persons in Maryland are male, although the percentages vary greatly by County. This may be a reflection of whom shelters serve, rather than who is actually homeless. For example, if a county has more shelters for men than women, their shelter reports will echo who they serve. It is interesting to note, however, that if Baltimore City is taken out of the equation, there is almost an even split between homeless men and women, which would represent 52 and 48 percent of the homeless population respectively.

Department of Human Resources Gender of Homeless Persons – SFY 2003				
Jurisdiction	Men	Women	Percent men	Percent Women
Allegany	212	120	63.86%	36.14%
Anne Arundel	311	392	44.24%	55.76%
Baltimore City	19,578	4,440	81.51%	18.49%
Baltimore County	287	581	33.06%	66.94%
Calvert	92	148	38.33%	61.67%
Caroline	4	37	9.76%	90.24%
Carroll	1,154	125	90.23%	9.77%
Cecil	271	237	53.35%	46.65%
Charles	149	303	32.96%	67.04%
Dorchester	95	31	75.40%	24.60%
Frederick	519	435	54.40%	45.60%
Garrett	59	45	56.73%	43.27%
Harford	466	349	57.18%	42.82%
Howard	115	240	32.39%	67.61%
Kent	4	8	33.33%	66.67%
Montgomery	1,437	1,467	49.48%	50.52%
Prince George's	412	764	35.03%	64.97%
Queen Anne's	0	0	0.00%	na
Saint Mary's	165	167	49.70%	50.30%
Somerset	5	9	35.71%	64.29%
Talbot	15	13	53.57%	46.43%
Washington	1,140	820	58.16%	41.84%
Wicomico	21	178	10.55%	89.45%
Worcester	244	149	62.09%	37.91%
TOTAL	26,755	11,058	70.76%	29.24%
Non-Entitlements Only	4,149	2,825	59.49%	40.51%

Sub-populations -- Sheltered Persons With Special Needs

Obtaining information on homeless persons with special needs -- mental illness, alcohol or other drug addictions, persons fleeing domestic violence, homeless youth, or persons with AIDS or related diseases is extremely difficult. The shelter providers who responded to the Hopkins' study estimated that 12 percent of the homeless population served had a mental illness. The survey also asked about drug addiction, and shelter providers responded that 19 percent of those sheltered had an alcohol or drug addiction. It also asked about domestic violence, and shelter providers responded that 13 percent of the homeless persons in shelters were fleeing domestic violence. These numbers are consistent with the Urban Institute's data on the homeless with special needs. The number of homeless youth (less than one percent) was determined by looking at the population served.

The only two areas the Hopkins study did not ask information about were homeless persons with AIDS or related diseases, and persons who suffered from mental illness

and had a drug or alcohol addiction at the same time. The 15 percent number is based on information provided by the National Commission on AIDS, and is considered by HUD a reputable figure that can be used in Maryland. The eight percent quoted for persons who have both a mental illness and have an alcohol or drug addiction is from the Urban Institute, and is also considered a reputable figure that can be used in Maryland.

More recent estimates on the homeless with special needs come from the Department of Health and Mental Hygiene. The Alcohol and Drug Abuse Administration (ADAA) of the Department of Health and Mental Hygiene provides services to individuals and their families on both an in-patient and outpatient basis. The table below shows the number of persons that were admitted to certified substance abuse programs during State fiscal year 2004 (July 1, 2003-June 30, 2004) that indicated their living situation as homeless.

Department of Health and Mental Hygiene Alcohol and Drug Abuse Administration		
ASAM* Levels of Care	Number of Programs	Number of Clients Admitted During FY 2004 with Living Situation as Homeless
Level I (Outpatient)	238	760
Level I (Medicated Assisted)	46	132
Level II.1 (Intensive Outpatient)	18	1142
Level III.1 (Halfway House)	39	493
Level III.3 (Long Term)	7	243
Level III.5 (Therapeutic Community)	9	66
Level III.7 (Medically Monitored Inpatient – ICF)	20	1126
Detoxification		1059
Total	377	5,021

*ASAM (American Society of Addiction Medicine)

The Developmental Disabilities Administration considers individuals who do not have control over their housing situation, including those who live in supportive housing such as group homes or alternative living units are being at risk of homelessness. Given that, they indicate there are potentially 4,783 individuals receiving services through DDA who are at risk for homelessness. (See the more detailed discussion of housing needs for persons with developmental disabilities in Section III of this part of the Plan.)

The Mental Hygiene Administration (MHA) of DHMH is developing Evidence Based Practice projects in the area of Assertive Community Treatment (ACT). The goal is to provide a team approach to intensive treatment and case management for individuals with severe and persistent mental illness. These individuals may be homeless or living in temporary living situations. Safe, stable and affordable housing is a key component to a successful outcome in this project. (See the more detailed discussion of housing needs for persons with mental illness in Section III of this part of the Plan.)

Unsheltered Homeless

Based on information developed using formulas from the Urban Institute, there are about 4,950 non-sheltered homeless people in Maryland. This is based on 1990 census statistics, and is the best available data we currently have. (The Census Bureau did not collect information on the unsheltered homeless in 2000. DHCD also reviewed the Continuums of Care of homeless services providers to get better data on the homeless, however these primarily focused on persons with chronic homelessness so only estimates for that group were available. A point in time survey conducted by DHR in January 2005 may provide more current information once compilation of the data is completed. However, DHR states compilation of the data is will not be completed before the summer of 2005 at the earliest, after the Consolidated Plan is due to be submitted to HUD.)

Race/Ethnicity of Unsheltered Homeless

The only data we have on ethnicity of the unsheltered homeless is from 1990 census data (again, the Census bureau did not collect this information in Census 2000). Based on the census data, about 62 percent of the unsheltered homeless were African-American. About 35 percent were White, and the remaining three percent Hispanic or "other".

Special Needs of Unsheltered Homeless

There is no data available to Maryland that HUD will accept, other than national data, which looks at non-sheltered homeless persons with special needs.

Based on information compiled by the Urban Institute, eight percent of all non-sheltered homeless persons have a severe mental illness only, 34 percent have an alcohol or other drug addiction, and 13 percent have a severe mental illness and alcohol and drug addiction problem at the same time. The Urban Institute also estimates that less than one percent of all the homeless are runaway youth. The National Commission on AIDS is the source for the 15 percent of homeless persons with AIDS or related diseases, and no known organization keeps statistically correct information on the number of non-sheltered homeless persons who are victims of domestic violence.

Needs of Persons Threatened With Homelessness

Persons threatened with homelessness are generally described as persons or households who earn 30 percent of median income or less and pay more than 50 percent of their income for rent.

As noted earlier, According to the 2000 census, there were about 143,865 extremely low-income renter households in Maryland who earn between 0-30 percent of median income. Fifty-four percent of those households paid more than 50 percent of their income for rent, and 70 percent paid more than 30 percent of their income for rent. In the State's non-entitlement areas, there were 18,797 renters in this income group, 48 percent of whom paid more than 50% of their income in rent and 66 percent who paid more than 30 percent of their income in rent.

Of those 18,797 households, about 7,400 are family households with children present. About 6,101 of these family households were small families (two to four people), and about 1,286 households were large families (five or more people). An estimated 51.6 percent of small family households were paying more than 50 percent of their income for rent, and about 51.2 percent of the large family households were paying more than 50 percent of their income for rent. These are the families most at risk of becoming homeless.

Housing Needs - Part III

PERSONS WITH SPECIAL NEEDS

The special needs population consists of persons with severe mental illness, persons who are developmentally disabled, persons who are physically disabled, persons with alcohol and other drug addictions, persons with AIDS and related diseases, and the frail elderly.

People with disabilities are among the poorest residents in Maryland. According to the Social Security Administration 75,443 people with disabilities in Maryland received SSI as their primary income source in 2003. People receiving SSI currently receive \$6,984 annual income, which places them at 15% of median income in Maryland. According to the National Low-Income Housing Coalition's report Priced Out, the housing wage in Maryland was \$14.10 per hour in 2002. According to the report, a person would need to spend 134.5% of their SSI income to afford a one bedroom unit in Maryland.

People receiving SSI do not represent the whole picture, however. Hundreds of people with disabilities receive Medicaid, but not SSI. These individuals also fall into the below poverty level income category. Finally, working people with disabilities also fall into low income groups.

The Department of Health and Mental Hygiene provides a wide array of services to thousands of Marylanders with disabilities, including persons with mental illness, developmental disabilities and HIV/AIDS. Services are typically provided in institutions, nursing homes, group homes, assisted living facilities, transitional housing sites, service recipient's homes or family homes including foster care.

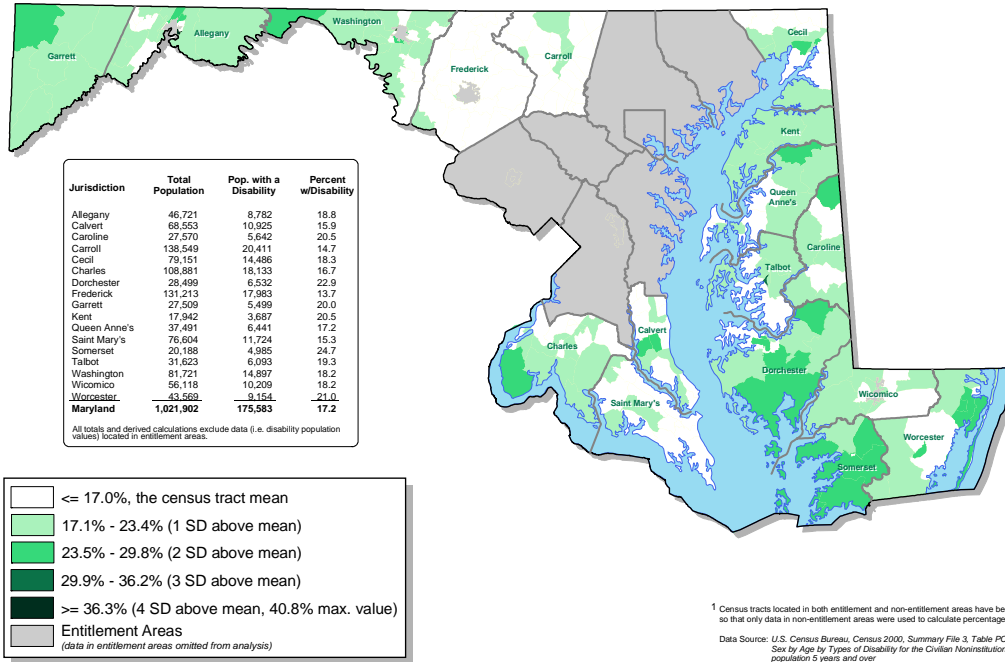
The need for supportive housing for this population is great. Low income people with disabilities have among the most difficult time locating housing that is affordable, which is defined as comprising no more than 30% of monthly income. In addition, people with disabilities may need affordable housing that is also accessible. Creating housing at 30% of average monthly income, combined with government subsidized rental assistance, is critical to meeting the housing needs of people with disabilities.

In describing the need for affordable housing for people with disabilities in Maryland, several sources of demographic information were accessed. These sources included the Social Security Administration, the Technical Assistance Collaborative, the National Low Income Housing Coalition, and the Governor's Commission on Housing Policy typology, which is based on 2000 Census data as well as several other sources.

Maryland's population in 2000 was 5,296,486, and 18% of the Maryland population, or 850,620 age 5 years or older, were identified as having a disability. Disability status is self-identified in the Census. Persons with disabilities fill out their census forms to report if they have physical, sensory, self-care, or mental disabilities. (Mental disabilities are not mental illnesses, rather they are typically learning disabilities such as ADD, problems remembering, etc.) Of the 850,620 persons identified with disabilities in 2000, 175,583 lived in the State's non-entitlement jurisdictions (including those with "mental" disabilities). Of the population whose disability had a significant impact on their physical living conditions, 26,902 persons had a physical disability, 22,646 had a self-care

disability and 13, 658 had a sensory disability. The map below provides information by census tract on where these individuals live:

Percent of Individuals with a Disability by Census Tract¹ for the Total Civilian Noninstitutionalized Population 5 years and over (excluding entitlement areas)



The Department of Health and Mental Hygiene (DHMH) provides a wide variety of services for people with disabilities in Maryland. These services are administered through the Aids Administration, the Developmental Disabilities Administration, and the Mental Hygiene Administration.

PERSONS WITH ALCOHOL AND/OR DRUG ABUSE

The Alcohol and Drug Abuse Administration (ADAA) of DHMH funds and regulates programs for substance abuse research, training, prevention and rehabilitation in cooperation with federal, state and local agencies. ADAA provides ASAM Level of Care through the following levels: Level I (Outpatient), Level I (Medicated Assisted), Level II.I (Intensive Outpatient), Level III.I (Halfway House), Level III.3 (Long Term), Level III.5 (Therapeutic Community), Level III.7 (Medically Monitored Inpatient – ICF), detoxification at all levels of care and prevention. ADAA does not have information on housing needs for persons with Alcohol and/or Drug Abuse except for those who have these problems and are homeless. (That information is addressed in the previous section of the Plan on homeless needs.)

PERSONS WITH HIV/AIDS

The mission of the AIDS Administration of DHMH is to decrease disability and death due to AIDS by reducing HIV and to help Marylanders already infected to live longer and

better lives. This is accomplished by monitoring the spread of the epidemic and its impact on populations within the State, controlling the spread of HIV infection in Maryland, and reducing morbidity and mortality associated with HIV. The Administration consults and coordinates its work with 24 local health departments of part of this effort. There were over 20,000 persons in Maryland living with HIV or AIDS in 2003. The table below shows the number of persons with HIV/AIDS in Maryland by County.

HIV/AIDS in Maryland			
Jurisdiction	Persons with HIV	Persons with AIDS	HIV/AIDS
Allegany	24	21	45
Anne Arundel	281	326	607
Baltimore City	6,583	5,425	12,008
Baltimore County	760	689	1,449
Calvert	34	32	66
Caroline	22	17	39
Carroll	85	31	116
Cecil	30	41	71
Charles	86	75	161
Dorchester	46	46	92
Frederick	88	79	167
Garrett	4	3	7
Harford	111	137	248
Howard	100	119	219
Kent	13	13	26
Montgomery	695	898	1,593
Prince George's	1,501	1,707	3,208
Queen Anne's	12	20	32
Saint Mary's	24	33	57
Somerset	33	16	49
Talbot	19	29	48
Washington	105	79	184
Wicomico	112	76	188
Worcester	37	30	67
Total under State Service Area	439	363	802
TOTAL	10,805	9,942	20,747

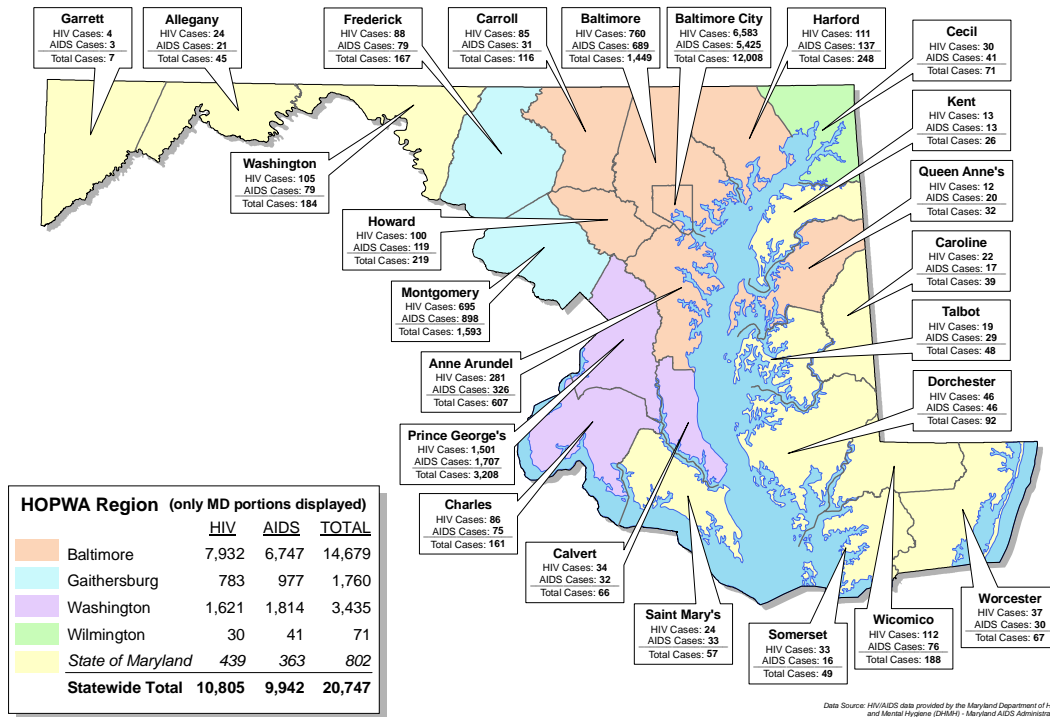
While the number of persons with HIV/AIDS is important, it is also important to know the prevalence rates based on the population. This is because while a jurisdiction has a low number of persons with HIV/AIDS, it may represent a significant proportion of the population. For example, looking at HIV Prevalence by jurisdiction, the top five counties with the highest HIV rates per population in order were Baltimore City, Prince George's County, Dorchester County, Somerset County and Wicomico County. This demonstrates that while the disease is concentrated in urban areas, there are highly disproportionate concentrations of cases in specific urban, suburban, and rural regions of the State. In addition, underserved populations, especially women and minorities, are heavily represented in the rural AIDS cases.

Of the reported cases in rural Maryland, twenty-six percent are women. Sixty-five percent of the cases occur among minorities. In addition, the Eastern Shore counties and St. Mary's County have a large seasonal migrant population. The table below shows HIV and AIDS prevalence rates by County:

HIV Prevalence Rates Based on Population			
Jurisdiction	HIV Prevalence	AIDS Prevalence	HIV/AIDS Prevalence
Allegany	32.0	28.0	60.0
Anne Arundel	57.3	66.5	123.9
Baltimore City	1,010.9	833.1	1,844.1
Baltimore County	100.7	91.3	192.1
Calvert	45.5	42.9	88.5
Caroline	73.8	57.1	130.9
Carroll	56.3	20.5	76.8
Cecil	34.9	47.7	82.6
Charles	71.3	62.2	133.5
Dorchester	149.9	149.9	299.9
Frederick	45.0	40.4	85.5
Garrett	13.4	10.0	23.4
Harford	50.7	62.6	133.4
Howard	40.3	48.0	88.3
Kent	67.7	67.7	135.4
Montgomery	79.5	102.8	182.4
Prince George's	187.2	212.9	400.2
Queen Anne's	29.5	49.3	78.8
Saint Mary's	27.8	38.2	66.1
Somerset	133.3	64.6	198.0
Talbot	56.1	85.7	141.9
Washington	79.5	59.8	139.4
Wicomico	132.3	89.7	222.1
Worcester	79.4	64.4	143.9

Housing assistance for persons with HIV/AIDS is provided based on metropolitan (and non-metropolitan) service areas through the Housing Opportunities With AIDS (HOPWA) program. In Maryland, there are four metropolitan service areas which help provide housing assistance to persons with HIV/AIDS, including the Washington, D.C., which assists persons living in Prince George's, Charles, and Calvert Counties; Baltimore City, which helps persons living in the City as well as Anne Arundel, Baltimore, Carroll, Harford, Howard, and Queen Anne's County's; the City of Gaithersburg, which serves Frederick and Montgomery Counties; and Wilmington, Delaware, which serves Cecil County. The State of Maryland serves the remaining counties, including Allegany, Caroline, Dorchester, Garrett, Kent, Saint Mary's, Somerset, Talbot, Washington, Wicomico, and Worcester. The map below shows HOPWA service areas in Maryland:

HIV/AIDS Cases in 2003 by County Counties shown by HOPWA Region



Data Source: HIV/AIDS data provided by the Maryland Department of Health and Mental Hygiene (DHMH) - Maryland AIDS Administration pub. date: 04/01/2005

A key problem facing rural communities is the lack of affordable housing. Maryland's Rural Housing Opportunities for People With AIDS (HOPWA) Initiative seeks to prevent housing instability in low-income persons with HIV/AIDS in eleven rural counties by combining rental assistance with supportive services, such as case management. However HOPWA formula funds suffice only for tenant-based rental assistance, with PLWHA turning to Ryan White-funded programs for case management and other supportive and medical services.

In order to assess community needs and allocate HOPWA funds across the eligible areas, the program undertook a GIS mapping analysis of eleven rural counties to identify areas that may have unmet need for HIV-related housing assistance.

262 rural HOPWA program participants as of 2003 were analyzed by zip code of residence using HIV/AIDS surveillance data for 2003 and US Census data for 2000. The mapping analysis included the following independent variables, stratified by zip code:

- Median Household Income
- Percent in Poverty
- Percent with Public Assistance Income
- Median Expenses: Mortgage
- Median Expenses: No Mortgage
- Median Rent
- Rent as Percent of Median Household Income
- Percent White
- Percent African-American

- Percent Other Race/Ethnicity
- Percent of Housing Owner Occupied
- Percent of Housing Renter Occupied
- Percent Vacant Housing
- Percent of Vacant Housing up for Rent

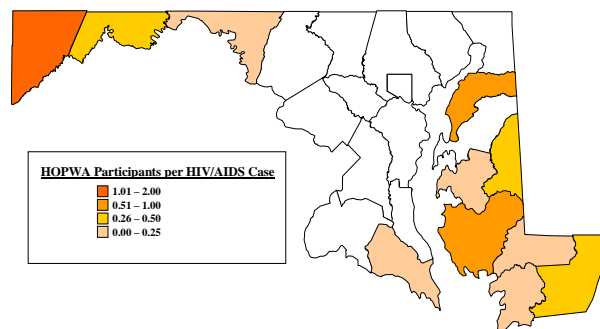
The result of the analysis found that the models do not do a good job of predicting the ratio of HOPWA participants to HIV/AIDS cases. However, other factors can mitigate a need for housing assistance, such as availability of other housing subsidies in that county, such as Section VIII, and/or degree of family-provided housing support for persons living with HIV/AIDS.

The models do a good job of predicting the number of HOPWA participants. Zip codes with higher proportions of African-American residents and/or of renter occupied housing units did have slightly higher numbers of HOPWA program participants. However, the largest predictor of HOPWA participants per county is the number of living HIV/AIDS cases.

Taken together, the findings suggest that HOPWA program participation generally occurs in proportion to the number of cases of HIV/AIDS in a geographic area. Therefore HIV/AIDS prevalence in the participating counties is the best indicator for need for HOPWA services (see table below).

The eleven counties served by the Rural HOPWA Program account for 46% of the State's territory and over 11% of the population, according to the 2000 Census. The Eastern Region (Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, and Worcester Counties) reported 3% of all living cases. The Western Region (Allegany, Frederick, Garrett, and Washington Counties) reported 2% of all living HIV and AIDS cases and the Southern Region (Calvert, Charles, and Saint Mary's Counties) contributed 1% of all living HIV and AIDS cases.

HOPWA Participants per HIV/AIDS Case by County



Rural AIDS Program 5-Year Strategy

Consistent with the three goals of the national HOPWA program, the Maryland Rural HOPWA Program goals are:

- Help clients to maintain housing stability
- Help clients to avoid homelessness
- Improve access to HIV treatment and other healthcare.

Given the limited HOPWA funds, the program's overall objective is to maintain a stable number of households in the HOPWA Program. With attrition, such as when households are successfully moved to a more long-term housing subsidy, such as Section VIII or clients' income increases past the threshold for HOPWA eligibility, new clients will be brought into the program.

There is not sufficient HOPWA funding for short-term rent, mortgage and utility assistance and supportive services. However, close collaboration with Ryan White funded HIV/AIDS programs at the local health departments ensures HOPWA clients access to case management, primary medical care and emergency financial assistance.

PERSONS WITH DEVELOPMENTAL DISABILITIES

A developmental disability is a condition attributable to a mental or physical impairment that results in substantial functional limitations in major life activities and which is likely to continue indefinitely. Examples include autism, blindness, cerebral palsy, deafness epilepsy, mental retardation, and multiple sclerosis.

The mission of the Developmental Disabilities Administration (DDA) is to provide leadership to assure the full participation of individuals with developmental disabilities and their families in all aspects of community life. In addition, DDA's goal is to promote their empowerment to access quality supports and services necessary to foster personal growth, independence and productivity. DDA is committed to enabling all individuals with developmental disabilities to exercise the four principles of self-determination:

- **Freedom** to make choices
- **Authority** over services and support
- **Responsibility** for organizing resources, and
- **Supports** necessary to live in the community.

The DDA provides a coordinated service delivery system so that individuals with developmental disabilities receive appropriate services oriented toward the goal of integration into the community. These services are provided through a combination of four state residential centers (providing services to individuals with mental retardation) and a wide array of community based services delivered primarily through a network of non-profit providers.

The DDA takes the leadership role in building partnerships and trust with families, providers, local and state agencies, and advocates to assure that individuals with developmental disabilities and their families have access to the resources necessary to

foster growth, including those available to the general public. Because of our inherent belief in the rights and dignity of the individual, DDA is committed to:

- The empowerment of all individuals with developmental disabilities and their families to choose the services and supports that meet their needs.
- The integration of individuals with developmental disabilities into community life to foster participation.
- The provision of quality supports, based on consumer satisfaction that maximizes individual growth and development.
- The establishment of a fiscally responsible, flexible service system that makes the best use of the resources that the citizens of Maryland have allocated for serving individuals with developmental disabilities.

An individual is eligible for a full range of services if he/she has a severe chronic disability that:

- Is attributed to a physical or mental impairment, other than the sole diagnosis of mental illness, or to a combination of mental and physical impairments;
- Is manifested before the individual attains the age of 22;
- Is likely to continue indefinitely;
- Results in the inability to live independently without external support or continuing and regular assistance;
- Reflects the need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are planned and coordinated for that individual. (Health General 7-101[e])

An individual is eligible only for support services if he/she has a severe chronic disability that:

- Is attributed to physical or mental impairment, other than the sole diagnosis of mental illness, or to a combination of mental and physical impairments.
- Is likely to continue indefinitely.

Services

The Developmental Disabilities Administration provides a coordinated service delivery system so that individuals with developmental disabilities receive appropriate services oriented toward the goal of integration into the community. This wide array of community based services is delivered primarily through a network of non-profit providers (approximately 22,000 individuals served by more than 170 providers). Services are obtained by contacting one of the regional offices of DDA. Individuals must apply for and be determined eligible for DDA services.

Types of Services:

Respite: Respite services are short-term, temporary care provided to an individual in their home or outside their home designed to give the primary caregiver(s) a break from their care giving duties.

Family Support Services: These services are designed to help families stay together. Families with children with developmental disabilities typically experience emotional, physical and financial demands because the care and attention their children require tends to be intensive and indefinite. Family Support services are flexible and responsive to what the family needs, when they need it.

Residential Services: These are designed to provide a variety of support services to adults with disabilities in their living situation. People are typically supported in a home owned by an agency that provides residential services. Some people live alone and others choose to live with other people to share expenses and/or companionship.

Community Supported Living Arrangements: Community Supported Living Arrangements (CSLA) provide individuals with the support necessary to enable them to live in their own homes, apartments, family homes, or rental units. Community Supported Living Arrangements provide a full range of community based supports, and may utilize friends and neighbors for the delivery of supervision and other necessary interventions.

Individual Support Services: Individual Family Services are support services (other than Residential and Day Habilitation care) for adults living with their families or on their own. Included are respite services, transportation, environmental modifications, adaptive equipment, money management and home skills.

Day Services: Day Services are provided for the following: teaching skills for daily living (Day Habilitation); teaching skills necessary to enter the workforce (Day Vocational); Adult Day Care; and providing supports to individuals that allow them to work successfully in the community (Supported Employment). Day Services also includes resources to assure that consumers with a developmental disability can attend Day Habilitation and Vocational Services programs by providing transportation from their homes to the program site and back home again.

Resource Coordination: Resource Coordination is provided to assist families and individuals with locating and obtaining services to meet their needs and interests.

Behavioral Support: Behavioral Support Services is a set of services to provide support needed to help individuals with severely challenging and disruptive behaviors. The purpose of this service is to prevent the institutionalization of persons with a developmental disability who are already living in the community.

Children's Services; Transitioning Youth Services; Summer Programs: In addition to the above described services, DDA provides services to children, transitioning youth, and for summer programs. For more information regarding these services visit the DDA website at www.ddamaryland.org.

Housing Needs

In defining the need for housing for individuals with a developmental disability, it is necessary to distinguish between existing housing that is controlled by the individual and that which is not under the individual's control. Individuals who receive services in an institution or in a home owned by an agency (Residential Services) do not have

control over their housing. They may not have a choice in where they live and typically need to move if they decide to receive services from a different agency. Individuals in residential services are in need of affordable housing of their own.

According to the DDA, 4,783 individuals with developmental disabilities live in Residential Services facilities, while another 1,464 live in their own residence and receive supportive services from DDA at home.

In addition to those individuals currently receiving services through DDA, a waiting list of individuals who are eligible and in need of services exists. As of January 1, 2005 there were 14,616 individuals waiting for one or more of three basic services (residential, day and support services). The total number of residential services being requested by these individuals is 7,666. These are individuals who are in need of affordable housing in communities of their choice. Nearly 2,500 individuals on the waiting list are in a crisis resolution or crisis prevention category and will require immediate housing assistance if their caregiver dies or becomes unable to take care of them.

The Developmental Disabilities Administration also operates four (4) state residential centers (SRC) for individuals with mental retardation. These state residential centers include Rosewood Center in Owings Mills, Holly Center in Salisbury, Potomac Center in Hagerstown, and Brandenburg Center in Cumberland. The total number of individuals residing in these facilities is 380. These individuals are also potentially in need of affordable housing in communities of their choice. The DDA has worked for more than 20 years to reduce the census of its SRCs through an emphasis on community services. In FY 2004, DDA moved 25 individuals into the community from the SRCs.

PERSONS WITH MENTAL ILLNESS

The Mental Hygiene Administration (MHA) of DHMH is responsible for the treatment and rehabilitation of the mental ill. The MHA plans and develops comprehensive services for the mentally ill, supervises State-run psychiatric facilities for the mentally ill, and provides consultation to State agencies concerning mental health services among other duties.

Major psychiatric hospital run by MHA include Carter, Eastern Shore, Finan, Perkins, Spring Grove, Springfield, and Upper Shore. Together, these facilities operate at a capacity of 1,340 beds. This represents a steady reduction in beds over the years as MHA works to deinstitutionalize individuals and move them into the community.

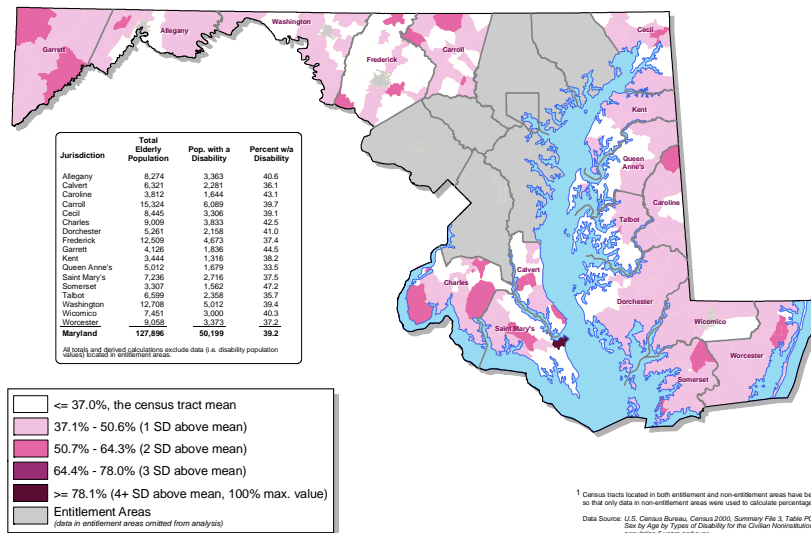
The Mental Hygiene Administration provides housing through Residential Rehabilitation Programs (RRP), Supportive Housing and independent housing efforts on the part of the consumer and providers. Individuals with mental illness are encouraged to access housing through a variety of community resources, to include DHCD, public housing authorities as well as non-profit housing agencies. Supportive and independent housing programs have access to flexible support services to assist eligible individuals in the community.

THE ELDERLY AND FRAIL ELDERLY

The Department of Aging has primary responsibility for looking after the needs of the elderly and frail elderly in Maryland. According to MDoA, in 2000 there are approximately 800,000 Marylanders aged 60 and over. This represents 15% of Maryland's population. By 2020, the elderly are expected to comprise 23% of the State's population. This is due to the movement of the baby boomers (persons born between 1945 and 1960) entering their senior years, when even the youngest "boomers" will be senior citizens. A large number of boomers are expected to live into their mid-80s and beyond, where they are statistically more likely to outlive their resources and suffer from multiple chronic illnesses.

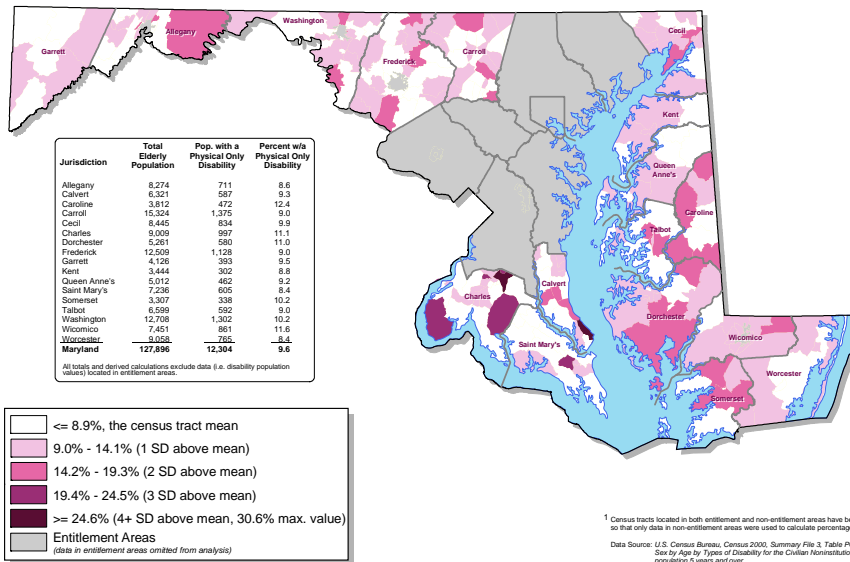
As part of developing the Consolidated Plan, DHCD looked at the elderly who were disabled. Based on DHCD's analysis, there were 50,199 elderly persons in the State's non-entitlement jurisdictions with some sort of disability in 2000. This includes persons with physical, sensory, or self care disabilities, as well as persons with "mental disabilities" which are primarily learning disabilities rather than mental illnesses or diseases such as Alzheimer's.

Percent of Individuals with a Disability by Census Tract¹ for the Elderly
Civilian Noninstitutionalized Population 65 years and over
(excluding entitlement areas)



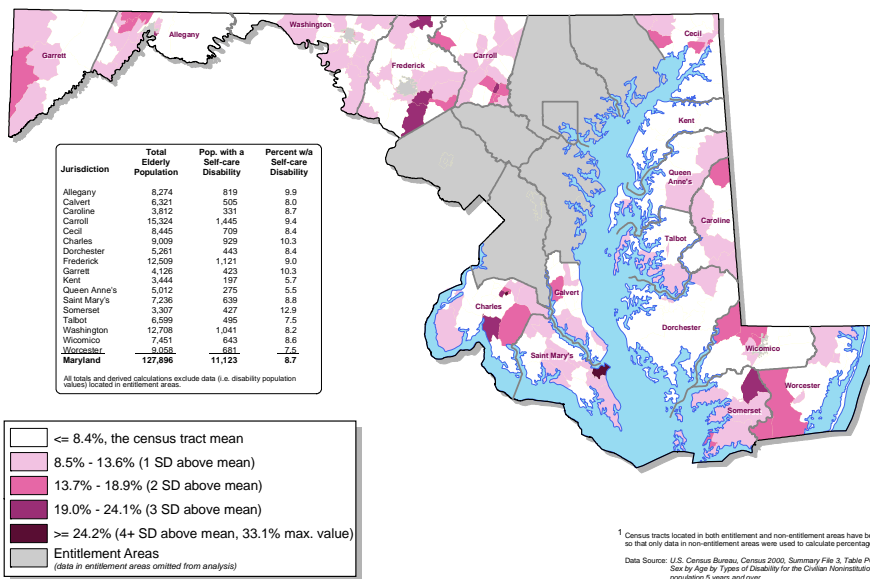
DHCD also broke down information on the elderly with disabilities by type where it was readily distinguishable. (In the Census, people can report whether they have one or more disability, but if they report multiple disabilities, it is not possible to tell what they are.) The most common type of disability for elderly persons (where they only reported one) are physical disabilities. Physical disabilities include difficulty walking, climbing stairs, reaching, lifting, or carrying objects. There were 12, 304 elderly persons in the non-entitlement areas who had this type of disability in 2000. The map below shows where these households live:

Percent of Individuals with a Physical Only Disability by Census Tract¹ for the Elderly Civilian Noninstitutionalized Population 65 years and over (excluding entitlement areas)



The second most common form of disability for the frail elderly is a self care disability. Self care disabilities are just that – persons who need assistance with basic daily life, including bathing, feeding, using the bathroom. There were 11,123 elderly households in the State's non-entitlement jurisdictions with this type of disability in 2000.

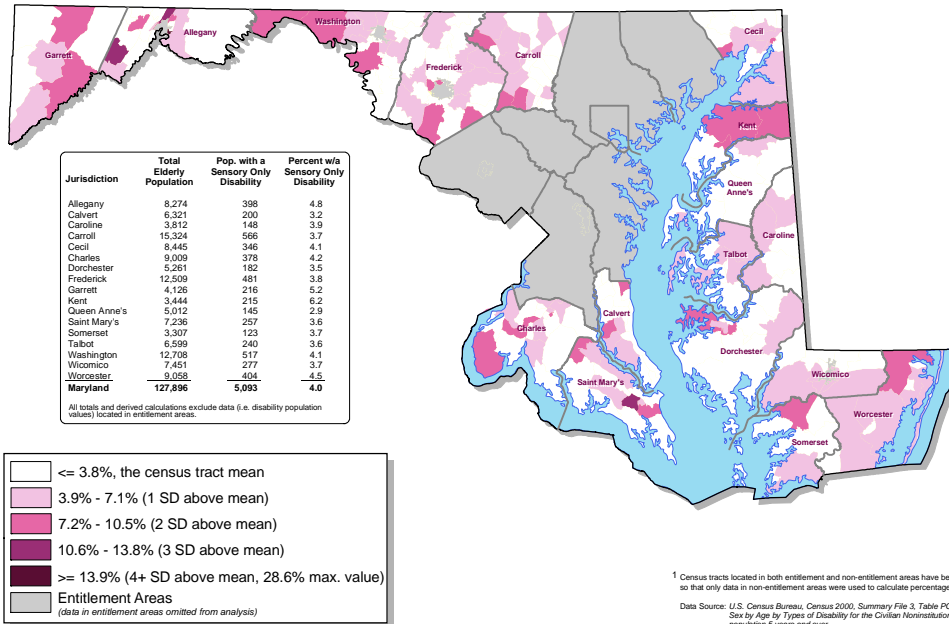
Percent of Individuals with a Self-care Disability by Census Tract¹ for the Elderly Civilian Noninstitutionalized Population 65 years and over (excluding entitlement areas)



Last but not least, according to the 2000 Census, there were 5,093 elderly persons with sensory disabilities only in the State's non-entitlement jurisdictions that year. Persons

with sensory disabilities are primarily persons who are deaf and/or hard of hearing, or blind or severely visually impaired. The map below shows where these households are distributed:

Percent of Individuals with a Sensory Only Disability by Census Tract¹ for the Elderly Civilian Noninstitutionalized Population 65 years and over (excluding entitlement areas)



The needs of the elderly and frail elderly, depending on their type of ability or disability are wide ranging. Whether disabled or not, there is a need for affordable rental and ownership housing. In addition, especially for some of those most severely disabled, there is a need for supportive housing and assisted living.

Persons Who do NOT Require Supportive Housing

HUD asks states, to the extent data is available, to discuss the housing needs of elderly persons and the disabled who do not require supportive services. We could find no data on this. The Census provides information on who is disabled and who is not, and, as per the maps above, we were able to determine the elderly disabled. Also, as per our discussion in Part 1 of the needs assessment, we could look at the needs of the elderly as a whole. But there is no available data that breaks this information down into subgroups.

Housing Needs - Part IV

LEAD-BASED PAINT HAZARDS

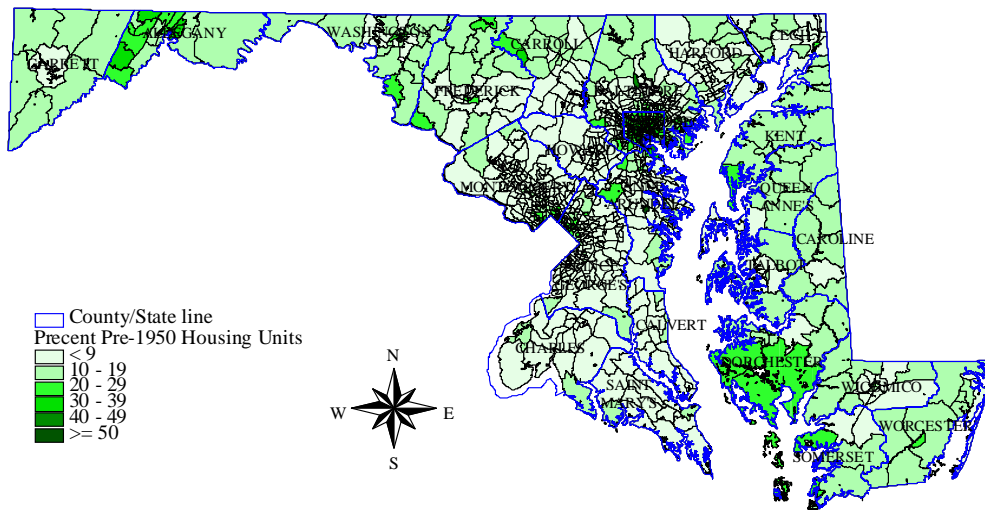
Lead-based paint has long been recognized as a substantial health hazard both in Maryland and the nation for many years. Lead poisoning can severely affect the health of both children and adults. The ingestion of lead dust by young children is particularly damaging, and can result in learning disabilities, hearing impairments, brain damage, convulsions, seizures, mental retardation, coma and death.

Maryland has a high concentration of housing with lead paint and a critical need for more resources to help deal with the removal of this hazardous substance. Maryland has a significant amount of older housing stock, with over 1,483,835 housing units built before 1978 of which 160,000 units were built before 1950. Based on calculation using the most recent studies from HUD regarding lead hazards and age of housing, it is estimated that 526,300 housing units have serious lead hazard potential.

ESTIMATED HOUSING UNITS WITH LEAD PAINT	
COUNTY	UNITS
Allegany	14,080
Anne Arundel	35,897
Baltimore City	144,241
Baltimore County	84,037
Calvert	3,478
Caroline	3,296
Carroll	10,485
Cecil	7,439
Charles	5,406
Dorchester	4,866
Frederick	13,960
Garrett	3,780
Harford	12,961
Howard	8,587
Kent	2,846
Montgomery	64,643
Prince George's	59,743
Queen Anne's	3,045
Saint Mary's	5,322
Somerset	2,736
Talbot	4,270
Washington	17,074
Wicomico	7,848
Worcester	6,259
TOTAL	526,300

Lead remains one of the most significant and widespread environmental hazards for children in Maryland. Most children confirmed (CSTE definition) with venous blood lead levels $\geq 20 \mu\text{g/dL}$ in Maryland live in housing built before 1950. Preliminary analysis of the Childhood Lead Registry (CLR) data in conjunction with census information on pre 1950 housing shows that the zip codes with the highest proportion of pre 50 housing have the highest proportion of tested children with blood lead level $\geq 10 \mu\text{g/dL}$. The map below shows where pre-1950 units of housing are concentrated by census tract.

Percent of Pre-1950 Residential Housing Units Statewide Census Tracts (2000 census data)



The surveillance of blood lead levels indicates that the rates of childhood lead exposure in the most urban areas of Maryland are significant. The comparison of the Childhood Blood Lead Surveillance Reports of 1995 and 2003 reflects the State's efforts. The overall proportion of elevated blood levels (children 0- 6 years of age $\geq 10 \mu\text{g/dL}$) in 1995 was 18% of those tested, or 11,585 children. In 2003, the lead exposure rate dropped to 2.2% of those tested, or 1,719 children Statewide. Comparison of earlier surveillance data to most recent surveillance data reflects recent decreases in blood lead levels in the highest risk areas.

Surveillance data indicate that the most concentrated high-risk housing/population combinations are in Baltimore City and on the Lower Eastern Shore. The counties of Caroline, Dorchester, Somerset, Talbot, Wicomico and Worcester comprise the Lower Eastern Shore. Major risk factors converge in Baltimore City and Maryland's Lower Eastern Shore where a high proportion of children tested have been found to have blood lead levels above CDC's level of concern at rates well above the national average.

Childhood Lead Poisoning in Baltimore City and Lower Eastern Shore Counties ⁽¹⁾ (Data from Childhood Blood Lead Surveillance in Maryland 2002 Annual Report)								
Region	0-35 Months				36-72 Months			
	Population	%Test	%EBL ⁽²⁾	% Lead Poisoning ⁽³⁾	Population	%Test	%EBL	% Lead Poisoning
Baltimore City	27,523	42.5	8.0	0.9	25,221	19.4	12.6	1.5
Lower Eastern Shore	8,883	38.5	5.1	0.6	8,503	12.2	5.5	0.4

1. Lower Eastern Shore counties include Caroline, Dorchester, Somerset, Talbot, Wicomico, and Worcester.
2. Defined as a blood lead level ≥ 10 $\mu\text{g/dL}$
3. Define as a venous blood lead level ≥ 20 $\mu\text{g/d}$

The most current surveillance data (2003) from MDE's CLR show that the blood lead testing rate of children 0-72 months Statewide averaged 17.5% with a low of 7.6% in a jurisdiction without an at risk area as identified by the Targeted Screening Planning to a high of 35.2 % in Baltimore City which is entirely within an at risk area. Overall testing has increased Statewide, especially in those aged 1 and 2 years. In 2003, Statewide, including Baltimore City, 22.6% of children 0-35 months and 10.7% of children 36-72 months had a blood lead test. In Baltimore City alone, 43.6% of children 0-35 months and 26.2% of children 36-72 months were tested.

Most cases of childhood lead exposure ≥ 10 $\mu\text{g/dL}$ in Maryland are related to deteriorated or damaged residential lead paint. Ownership of houses identified as a primary source for lead poisoned children was 90% rental in Baltimore City in 1992, and 74% rental in 2000. In other jurisdictions, ownership was 75% rental in 1992, and 43% rental in 2000.

Other sources, such as lead in drinking water, ceramics, traditional medicines, occupational "take-home" or adult hobbies, and lead-containing vinyl products contribute to general background exposure. They are occasionally identified as the primary source for an individual child's exposure. As paint sources are controlled, and if levels at which damaging health effects are determined to occur continue to drop, these other sources may acquire more importance in Maryland's elimination plan.

According to Maryland's Childhood Lead Registry (CLR) data analysis, most children confirmed with venous blood lead levels ≥ 20 $\mu\text{g/dL}$ in Maryland come from lower-income families. Preliminary work to determine the most sensitive indicators of childhood lead poisoning in Maryland show that the percentage of families with children under five years of age under the poverty level (poverty as defined by the US Bureau of Census) is the next most significant risk factor after pre-1950 housing. Baltimore City and the Lower Eastern Shore are sizeable communities with significant percentages of the households living at or below the poverty level, especially in older communities. The table below shows the blood lead testing of children 0-72 months of age by jurisdiction in 2003.

**Maryland Department of the Environment
Lead Poisoning Prevention Program: Childhood Lead Registry
Blood Lead Testing of Children 0-72 months by Jurisdiction in 2002**

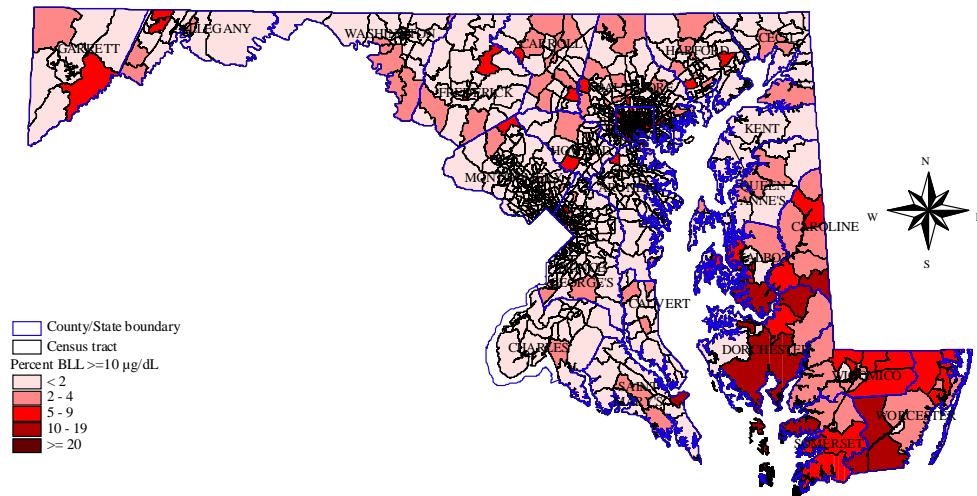
County ¹	Population of children 0-72 months old ²	Children Tested ³		Children with Elevated Blood Lead Level ⁴		Children with Lead Poisoning ⁵	
		Number	Percent	Number	Percent	Number	Percent
Allegany	4,187	1,315	31.4	30	2.3	5	0.4
Anne Arundel	40,772	5,029	12.3	20	0.4	1	0.0
Baltimore	54,829	10,427	19.0	120	1.2	18	0.2
Baltimore City	51,184	18,242	35.6	1,166	6.4	160	0.9
Calvert	6,168	682	11.1	2	0.3	0	0.0
Caroline	2,240	796	35.5	14	1.8	3	0.4
Carroll	11,781	1,040	8.9	14	1.3	2	0.2
Cecil	7,091	959	13.5	9	0.9	2	0.2
Charles	11,145	1,391	12.5	2	0.1	0	0.0
Dorchester	1,941	540	27.8	26	4.8	5	0.9
Frederick	17,621	1,630	9.3	16	1.0	2	0.1
Garrett	1,982	429	21.6	3	0.7	0	0.0
Harford	18,298	2,674	14.6	19	0.7	2	0.1
Howard	22,178	1,688	7.6	8	0.5	2	0.1
Kent	1,046	157	15.0	3	1.9	0	0.0
Montgomery	76,228	10,163	13.3	53	0.5	9	0.1
Prince George's	72,886	12,426	17.0	77	0.6	7	0.1
Queen Anne's	3,177	495	15.6	5	1.0	2	0.4
Saint Mary's	7,847	903	11.5	9	1.0	0	0.0
Somerset	1,411	544	38.5	18	3.3	5	0.9
Talbot	2,114	449	21.2	15	3.3	1	0.2
Washington	9,823	1,971	20.1	15	0.8	3	0.2
Wicomico	6,524	2,031	31.1	50	2.5	7	0.3
Worcester	3,027	731	24.1	24	3.3	1	0.1
County Unknown		9		1		0	0.0
Statewide	435,452	76,721	17.6	1,719	2.2	237	0.3

1. County assignment in the order of priority was based on child's census tract, child's zip code address and provider's zip code address
2. Adapted from US Census population estimate for 2003.
3. Blood lead reports with missing or wrong date of birth were assumed to be from children under six (6) years of age with exact age unknown.
4. Any blood level ≥ 10 $\mu\text{g/dL}$
5. Defined as a venous blood lead level ≥ 20 $\mu\text{g/dL}$

The “Statewide Elevated Blood Lead Levels” map below represents the distribution of children aged 0-72 months with blood lead levels $\geq 10 \mu\text{g/dL}$.

Statewide Elevated Blood Lead Levels

Percent of Children 0-72 Months Tested Statewide with Blood Lead Level above $10 \mu\text{g/dL}$ 2001-2002 by Census Tracts



Notes:

1. Each child is counted once (highest blood lead level) for each calendar year. Over the years a child may have been counted more than once.
2. A total of 156,249 children tested for lead statewide in 2001-2002, of whom 94,454 had enough address information at the street level for census tract to be assigned and were included in this presentation.

SOURCE: Maryland Department of the Environment Lead Poisoning Prevention Program Childhood Lead Registry

Maryland has developed a Plan to Eliminate Childhood Lead Poisoning by 2010. The plan will address lead poisoning prevention statewide, with an emphasis on highest risk areas in Baltimore City, Lower Eastern Shore, and Western Maryland. States must have an Elimination Plan to be eligible for future lead poisoning prevention funding or lead hazard reduction funding under the federal Centers for Disease Control (CDC), Housing and Urban Development (HUD), or Environmental Protection Agency (EPA) Lead grant Programs.

The State has been implementing a strong primary prevention program since 1996. Maryland law focuses on pre-1950 rentals as the highest risk housing. It sets a standard for hazard reduction, confirmed by a third party inspector, to be met before each unit turnover. Other Maryland efforts require blood lead testing at ages 1 and 2 years of age for day care and school entry, support statewide outreach, integrate lead into routine housing grant and loan programs, and require compliance with state lead registration and hazard control requirements as a condition for Section 8 unit approval or use of rent courts. Maryland also has aggressive state funding and enforcement of the state standards statewide, especially in Baltimore City.

The Statewide plan will be implemented by state and local agencies and non-profits. Each responsible party will do their own internal reporting and evaluation as usual, with the Lead Commission responsible for general oversight. The Lead Commission will report on overall

progress and needs to the Governor and Legislature. The full body of the Plan can be found on MDE's website at www.mde.state.md.us.

State law regarding case management, Environment Article (EA) §6-304 "Case Management For Children With EBLs", requires State level assistance to local health departments to provide case management of children. This law and EA §6-8, "The Reduction of Lead Risk in Housing Law," requires local health departments to provide "Official Notice, Report of Elevated Blood Lead Level," commonly referred to as "Notice of EBL" to parents and rental property owners in cases where a child's blood lead level is $\geq 15\mu\text{g}/\text{dL}$. The Notice of EBL triggers rental property owner responsibilities to provide appropriate interventions and treatment of the rental unit. The "Protocol for Nursing Case Management of Lead Poisoned Children" and the "Protocol for Environmental Case Management of Lead Poisoned Children" have been in place since 1991. The MDE Lead Poisoning Prevention Program (LPPP) updates and distributes both periodically.

As of June 2003, there were a total of 1,182 children being case managed throughout the State. Of these cases, 930 were from Baltimore City and 252 were from all other counties (MDE STELLAR Report, 2003). The MDE LPPP, working from the laboratory reports received by the Childhood Lead Registry, notifies the appropriate local health department nurse about a child exposed to lead. Local health department nursing case management is initiated upon receipt of blood lead level $\geq 15\mu\text{g}/\text{dL}$. A home visit by the nurse is the preferred first intervention at this level. A lower level of response occurs at a blood lead level of 10 -14 $\mu\text{g}/\text{dL}$, such as mailing materials or telephoning the family to provide education when resources are an issue. Local Health Departments adapt case management policies and procedures recommended by MDE to fit local circumstances with MDE oversight. Environmental investigations are initiated by MDE as part of case management for most counties. Environmental Sanitarians certified as Lead Risk Assessors in Baltimore City, Baltimore County, and Prince Georges County conduct their own environmental investigation after receiving a referral from a local health department nurse case manager. Local health and environmental departments must follow MDE protocol or comply with MDE-approved local protocol. Recommendations for unit treatment and unit treatment enforcement are coordinated with MDE's Lead Enforcement Division. Maryland's environmental investigation and unit treatment protocols are consistent with Federal recommendations from CDC, EPA and HUD. Protocol and policies require that case management continue until discharge criteria conditions as described in the Protocols are met.

Nursing case managers attempt to assure that the child receives all appropriate and necessary resources, such as appropriate medical follow-up. Medicaid regulations require managed care organizations to provide case management for their patients with lead exposure, and 3 tertiary care centers with lead specialists are available for consultation or for treatment. These are the Kennedy-Krieger Institute, Mount Washington Hospital in Baltimore City and the Children's National Medical Center in adjacent Washington D.C. Most children receive the appropriate medical follow-up, but too many of them continue to live in environments where they are exposed to lead hazards. Relocation of the family to a safe environment and/or treatments of the hazardous unit can take many months to occur. Lead hazard reduction in the initial unit, and the availability of lead-safe housing for temporary or permanent relocation are critical.

HOUSING MARKET ANALYSIS

General

Maryland has experienced many internal and external events that have affected its economy and housing conditions. What follows is a general description of the housing market and inventory conditions in the State.

Incomes in Maryland are among the highest in the nation. According to figures released in February, 2005, the median income in the State was \$66,900. Median income varied widely, however, from a low of \$37,500 in Allegany County, to a high of \$82,800 in the Washington D.C. metropolitan statistical area, which includes Montgomery, Prince George's, Calvert, Charles, and Frederick Counties in Maryland.

The Maryland Department of Planning (OP) reports that population growth in Maryland is currently growing slightly faster than the national average. Overall, Maryland's population ranks about 19th overall among States, the same ranking it has held since the 1970s

The Market

The following information was prepared in housing by DHCD's Office of Research (OR). Each month, OR prepares a monthly review of Maryland's housing economy, which is published Statewide in Blueprint Maryland. December 2004 data was used in the Consolidated Plan as it represents the last full year for which data is available.

HIGHLIGHTS

- The resilience of household spending from 2000 to 2004, even in light of a 1.2 percent annual reduction in household income, is attributable primarily to the substantial growth in home equity wealth in Maryland. Statewide, the owner occupied home equity wealth grew by an estimated \$157.8 billion, representing a growth of \$103,918 per homeowner household.
- From December 2004 to January 2005, Freddie Mac's 30-year effective fixed mortgage rate dropped from 5.81 percent to 5.77 percent in the U.S., and from 5.75 percent to 5.73 percent in the South region. The 30-year fixed effective mortgage rate in Maryland declined from 5.81 percent in December 2004 to 5.53 percent in January 2005.
- The effective mortgage rate of the Community Development Administration (CDA), an arm of the Maryland Department of Housing and Community Development, stands at 5.39 percent. The CDA's effective rate is now 14 basis points below the average effective commercial mortgage rates in Maryland and 38 basis points below Freddie Mac's national average rate.

The strength of consumer spending since 2000 has played a major role in propelling the U.S. economy forward. Despite significant shocks to the U.S. economy resulting from the stock market crash of 2000, and the onset of economic down turn and the September 11 terrorist attacks in 2001, consumption expenditures have consistently added fuel to an otherwise

faltering economy. The strong pace of consumer spending since 2000, as represented by an average annual growth rate of 3.3 percent, has enabled the U.S. Gross Domestic Product to grow at a healthy rate of 2.6 percent during the same period.

The resilience of household spending since 2000, even in light of a 1.5 percent annual average decline in household income, is attributable primarily to the considerable strength of the housing market. Thanks to historically low mortgage rates, home sales have been on the rise, reaching a high of 8 million annualized units in 2004. Construction of new homes also exhibited an exceptional performance, reaching about 1.6 million units last year. Strong demand for housing pushed the median price of existing homes by about 8 percent nationally in 2004. The gains in home prices during the past four years have substantially increased the net wealth of homeowners through home equity accumulation.

Home equity, the difference between the appraised home value and the mortgage debt, is the largest component of net wealth for many American households and contributes significantly to the overall consumption expenditures. According to the 2001 Survey of Consumer Finance, home equity accounts for about one-half of household net wealth for an estimated 50 percent of families. In 2004, the Joint Center for Housing Studies of Harvard University reported that consumers spend about five-and-a-half cents out of every dollar increase in both housing wealth and stock wealth. However, spending from housing wealth only takes about a year to reach 80 percent of its long-run effect, compared with nearly five years for stock wealth to have the same effect.

Similar to the national trend, a significant boost in consumption expenditures, as evidenced by a substantial increase in retail sales tax collections, is largely responsible for Maryland's recent upbeat economic performance. During the fiscal period 2000 to 2004, the retail sales tax collections in Maryland, our proxy for consumer spending, increased by 17.9 percent, or 4.5 percent annually. According to our projections, the Maryland economy, as measured by the Gross State Product, grew by 25.1 percent since 2000, representing a very robust annual growth rate of 6.3 percent. During the same period, however, the median household income in Maryland declined by 4.9 percent, or 1.2 percent annually. Thus, similar to the national economy, the buoyancy of household spending in Maryland since 2000 is due, primarily, to the substantial growth in housing market and the corresponding increases in home equity wealth.

According to our projections, the number of owner occupied housing units in Maryland grew to about 1,590,000 in 2004, representing a growth rate of 9.6 percent since 2000. The highest growth occurred in Calvert County where the number of housing units grew by 21.7 percent reaching a high of 22,912 units in 2004. Other counties with double-digit growth rates included Charles (18.7 percent), Worcester (16.2 percent), Queen Anne's (15.5 percent), Carroll and St. Mary's (15.1 percent each), Frederick (14.3 percent), Cecil (14.0 percent), Howard (13.3 percent), Harford (12.1 percent), Kent (11.3 percent), Washington (10.4 percent), and Montgomery County (10.3 percent). Allegany County with a growth rate of 2.2 percent had the smallest increase in the number of owner occupied housing units in Maryland.

Along with the growth in the number of owner occupied housing units, Maryland home prices have increased significantly since 2000. Statewide, the average value of existing homes increased by 74 percent, reaching a high of \$283,233 in 2004. Average home prices have grown by as much as 124.2 percent in Worcester County, home to the state's premier tourist destination Ocean City, 78.3 percent in Queen Anne's County, 72.7 percent in Howard County,

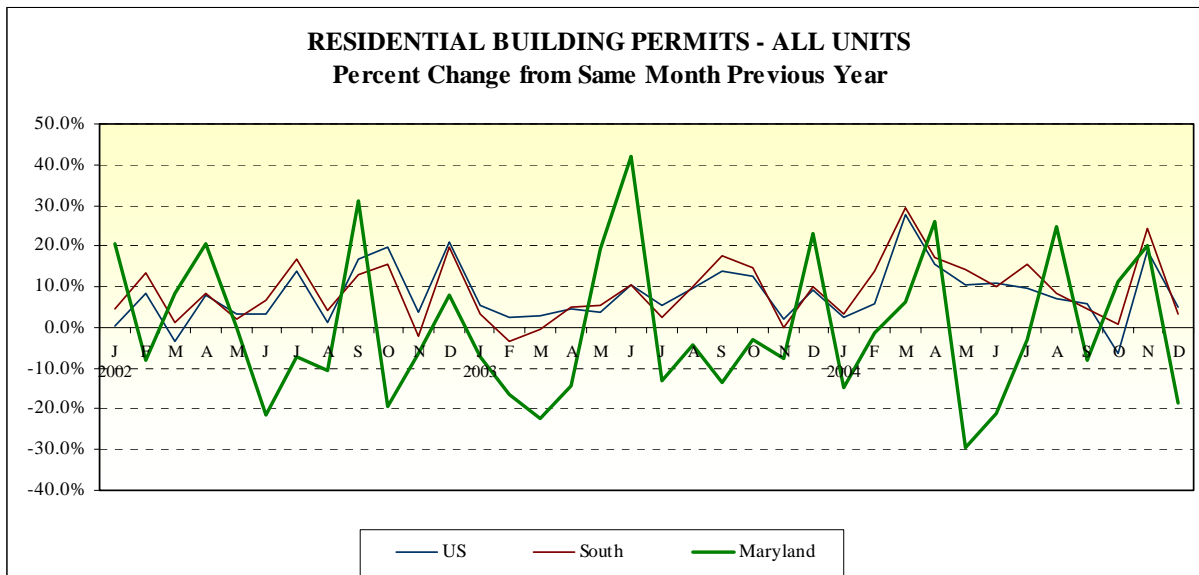
72.6 percent in Western Maryland's tourist destination of Garrett County, and 72.3 percent in Kent County.

The rapid appreciation of home prices in Maryland has substantially increased the equity wealth of homeowners since 2000. From 2000 to 2004, the owner occupied home equity wealth grew by an estimated \$157.8 billion in Maryland, representing a growth of \$103,918 per homeowner household.

Owner Occupied Home Equity Growth in Maryland 2000-2004									
County	Number of Units			Average Value of Units			Home Equity Growth 2000-04		
	Projected 2004	% Change 2000-04	Rank	Projected 2004	% Change 2000-04	Rank	Total Value (\$millions)	Per Homeowner	
								Value	Rank
Allegany	21,029	2.2%	24	\$82,783	9.1%	24	\$144	\$6,852	24
Anne Arundel	147,362	9.2%	16	\$335,342	62.6%	14	\$18,258	\$123,900	7
Baltimore	219,502	8.4%	19	\$232,367	53.3%	21	\$17,123	\$78,010	17
Baltimore City	225,504	2.6%	23	\$129,304	57.3%	17	\$10,523	\$46,664	22
Calvert	22,912	21.7%	1	\$300,365	61.0%	15	\$2,363	\$103,128	11
Caroline	9,934	9.2%	17	\$195,715	67.9%	9	\$760	\$76,519	18
Carroll	45,296	15.1%	5	\$302,079	67.6%	10	\$5,151	\$113,710	8
Cecil	27,814	14.0%	8	\$234,771	66.5%	12	\$2,435	\$87,553	15
Charles	34,666	18.7%	2	\$268,462	69.6%	6	\$3,537	\$102,042	12
Dorchester	10,214	6.0%	22	\$204,884	54.7%	18	\$728	\$71,283	19
Frederick	62,440	14.3%	7	\$284,114	66.3%	13	\$6,625	\$106,098	10
Garrett	9,485	6.0%	21	\$319,709	72.6%	4	\$1,232	\$129,918	6
Harford	65,879	12.1%	10	\$228,782	46.9%	22	\$4,587	\$69,631	20
Howard	71,696	13.3%	9	\$367,654	72.7%	3	\$10,435	\$145,548	5
Kent	5,861	11.3%	11	\$283,332	72.3%	5	\$660	\$112,625	9
Montgomery	221,260	10.3%	13	\$426,027	67.9%	8	\$36,260	\$163,878	3
Prince George's	260,195	9.1%	18	\$236,443	69.0%	7	\$24,142	\$92,786	13
Queen Anne's	12,704	15.5%	4	\$377,746	78.3%	2	\$1,968	\$154,880	4
Somerset	6,239	7.0%	20	\$128,221	39.8%	23	\$220	\$35,332	23
St. Mary's	25,240	15.1%	6	\$254,473	59.8%	16	\$2,247	\$89,017	14
Talbot	10,314	9.9%	14	\$510,442	53.8%	20	\$1,784	\$172,988	2
Washington	36,499	10.4%	12	\$207,610	66.6%	11	\$2,894	\$79,298	16
Wicomico	26,425	9.3%	15	\$187,417	54.0%	19	\$1,675	\$63,369	21
Worcester	11,516	16.2%	3	\$340,369	124.2%	1	\$2,008	\$174,367	1
Maryland	1,589,988	9.6%	n/a	\$283,233	74.0%	n/a	\$157,761	\$103,918	n/a

Maryland Housing Completions Increased

The U.S. Census Bureau reported that in December, 2004 privately owned housing completions increased sharply by 27.1 percent nationally. Across the nation, single-family and multi-family housing completions were up by 29.0 percent and 15.7 percent, respectively. In the South region, housing completions increased by 22 percent as single-family and multi-family completions were up by 15.7 percent and 72.4 percent, respectively. In Maryland, the number of housing units completed increased by 16.1 percent to 2,699 units in December. This strength was due to a 16.9 percent increase in single-family and a 13.2 percent rise in multi-family completions. Compared to the same month last year, housing completions were up by 13.4 percent in the U.S. and 2.8 percent in the South region, but down by 23.1 percent in Maryland.



Residential Construction Activity in Maryland Counties

Across Maryland, the value of housing permits in December declined by 14 percent to \$267 million. Overall, ten Maryland jurisdictions reported gains in the number and value of building permits issued, including Anne Arundel, Calvert, Carroll, Cecil, Charles, Dorchester, Frederick, Wicomico, and Worcester counties. Statewide, the value of housing starts increased by 2.6 percent to \$285 million. Strong housing starts were reported in Anne Arundel, Baltimore, Calvert, Carroll, Charles, Dorchester, Washington, Wicomico, and Worcester counties and in Baltimore City. The value of housing units completed in Maryland also increased in this month by 16 percent to \$353 million. Housing units completed were up in Allegany, Anne Arundel, Baltimore, Calvert, Carroll, Cecil, Charles, Dorchester, Garrett, Kent, Montgomery, Somerset, Wicomico, and Worcester counties.

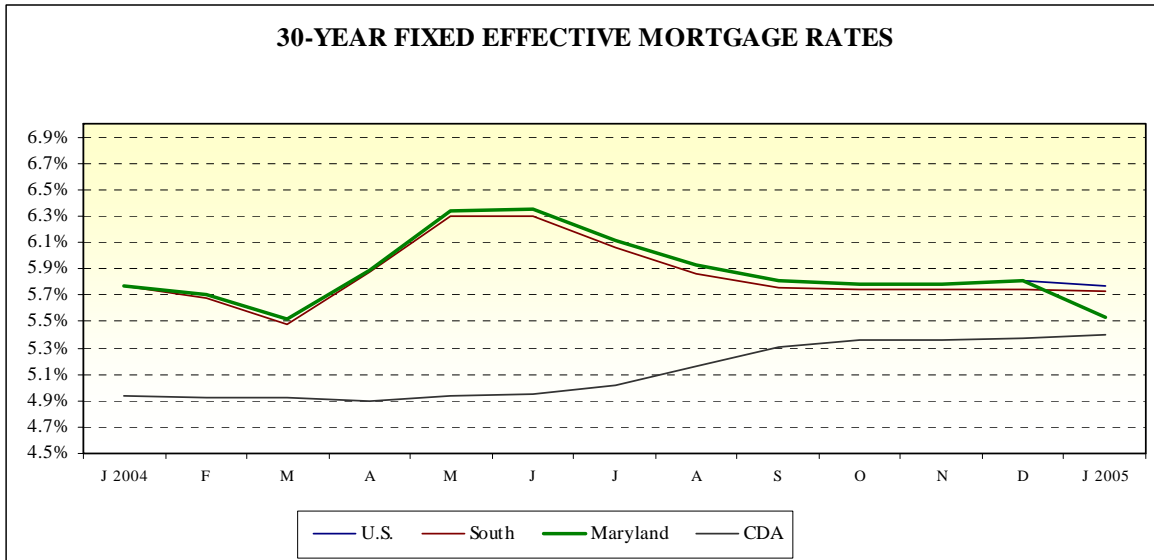
Residential Construction in Maryland December 2004						
County	Permits		Starts		Completions	
	Units	Value ('000s)	Units	Value ('000s)	Units	Value ('000s)
Allegany	4	\$487	4	\$487	11	\$1,855
Anne Arundel	248	\$30,095	222	\$28,373	354	\$34,178
Baltimore	301	\$28,003	243	\$24,126	198	\$21,610
Baltimore City	2	\$273	264	\$17,628	0	\$0
Calvert	59	\$8,064	59	\$8,064	49	\$7,644
Caroline	11	\$1,728	11	\$1,728	12	\$1,908
Carroll	158	\$14,995	58	\$8,370	77	\$10,466
Cecil	81	\$12,267	70	\$11,729	136	\$17,245
Charles	95	\$18,078	90	\$17,891	100	\$20,378
Dorchester	23	\$3,635	23	\$3,635	31	\$4,357
Frederick	112	\$15,338	112	\$15,338	145	\$19,748
Garrett	3	\$565	3	\$565	51	\$8,634
Harford	75	\$10,690	68	\$10,115	138	\$19,174
Howard	65	\$7,757	49	\$6,697	554	\$61,145
Kent	12	\$1,499	12	\$1,499	45	\$5,180
Montgomery	211	\$42,612	341	\$51,223	95	\$12,984
Prince George's	142	\$20,029	142	\$20,029	218	\$30,109
Queen Anne's	41	\$4,213	41	\$4,213	29	\$5,245
Somerset	13	\$989	12	\$914	20	\$1,729
St. Mary's	61	\$7,989	73	\$8,844	111	\$14,538
Talbot	41	\$6,816	41	\$6,816	40	\$16,694
Washington	83	\$10,025	163	\$14,208	130	\$19,040
Wicomico	49	\$6,717	49	\$6,717	63	\$6,517
Worcester	106	\$14,570	124	\$15,798	92	\$12,340
Maryland	1,996	\$267,433	2,274	\$285,007	2,699	\$352,718

Mortgage Rate Trends

The effective 30-year fixed mortgage rates -- rates that account for variations in points -- declined in January 2005. During the December 2004 to January 2005 period, Freddie Mac's 30-year effective fixed mortgage rate dropped from 5.81 percent to 5.77 percent in the U.S., and from 5.75 percent to 5.73 percent in the South region. The 30-year fixed effective mortgage rate in Maryland declined from 5.81 percent in December 2004 to 5.53 percent in January 2005. The Maryland commercial fixed mortgage rate is now 24 basis points below the national rate.

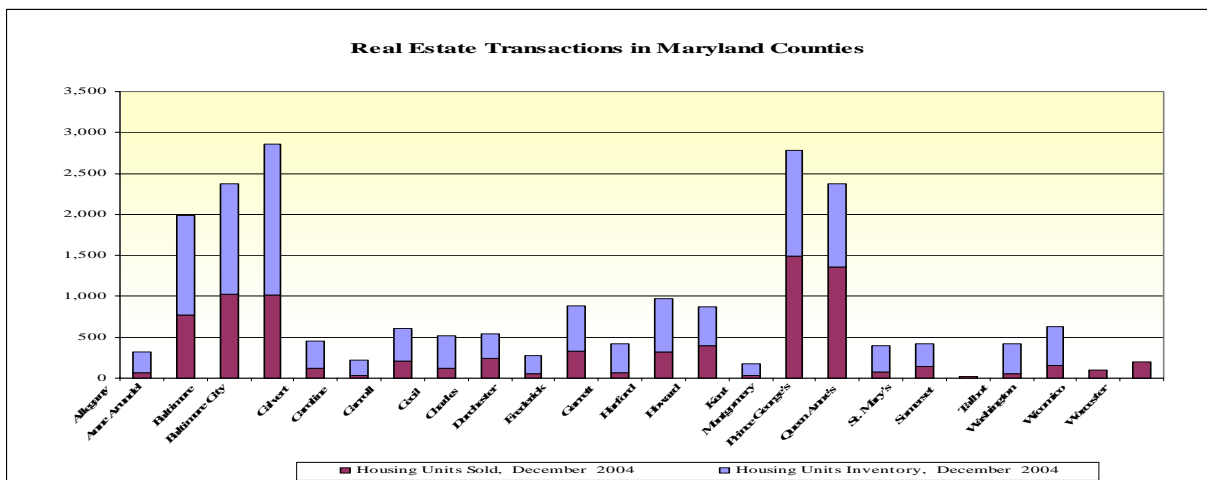
The effective mortgage rate of the Community Development Administration (CDA), an arm of the Maryland Department of Housing and Community Development, stands at 5.39 percent.

The CDA's Maryland Mortgage Program (www.morehouse4less.com) provides low-interest mortgage loans to eligible homebuyers through private lending institutions throughout the State. The CDA's effective rate is now 14 basis points below the average effective commercial mortgage rates in Maryland, and 38 basis points below Freddie Mac's national average rate.



Home Sale in Maryland Counties

In December 2004, the inventory of housing units available for sale totaled 12,410 units statewide, up 12.7 percent from November, but down 2.4 percent from the previous year. A total of 8,410 housing units were sold in Maryland, up 5.8 percent from last year, but down 0.2 percent from the previous month. The number of units sold represents 67.8 percent of Maryland's available inventory. Complete data is not available for Somerset, Wicomico, and Worcester Counties.



Housing Units Sold and Housing Inventory December 2004						
County	Housing Units Sold			Housing Units Inventory		
	Current Month	% Change from Last Year	% Change from Last Month	Current Month	% Change from Last Year	% Change from Last Month
Allegany	63	0.0%	5.0%	253	0.0%	23.4%
Anne Arundel	772	3.3%	-7.4%	1,219	-1.4%	7.2%
Baltimore	1,026	7.5%	-2.3%	1,350	0.6%	21.7%
Baltimore City	1,020	34.9%	15.1%	1,842	-15.7%	25.7%
Calvert	121	-13.6%	-15.4%	329	34.3%	26.5%
Caroline	36	20.0%	-2.7%	186	6.9%	20.8%
Carroll	206	4.0%	7.3%	396	-14.8%	8.5%
Cecil	119	0.0%	6.3%	403	20.3%	18.2%
Charles	248	13.2%	0.8%	293	14.5%	8.5%
Dorchester	57	42.5%	14.0%	215	-1.4%	-0.9%
Frederick	330	-18.7%	-18.1%	554	0.4%	9.1%
Garrett	63	117.2%	37.0%	357	25.7%	2.6%
Harford	316	4.6%	-7.1%	660	27.7%	29.7%
Howard	392	-2.5%	-5.3%	475	18.8%	5.3%
Kent	36	20.0%	-12.2%	140	-6.7%	10.2%
Montgomery	1,493	3.4%	-1.6%	1,285	1.8%	-6.8%
Prince George's	1,361	2.3%	1.7%	1,016	-31.9%	8.0%
Queen Anne's	74	0.0%	-2.6%	325	0.3%	10.9%
St. Mary's	143	-10.1%	9.2%	277	34.5%	32.5%
Somerset	23	43.8%	-8.0%	0	0.0%	0.0%
Talbot	55	-16.7%	-17.9%	363	-2.4%	11.0%
Washington	156	6.8%	-13.8%	472	15.7%	18.9%
Wicomico	103	-5.5%	98.1%	0	0.0%	0.0%
Worcester	197	8.8%	5.9%	0	0.0%	0.0%
Maryland	8,410	5.8%	-0.2%	12,410	-2.4%	12.7%

Homeownership Affordability Indices

The Maryland Homeownership Affordability Indices for repeat and first-time homebuyers provide a framework within which housing affordability in Maryland counties and Baltimore City can be traced over time. In December 2004, the Maryland affordability index for repeat buyers was 109, signifying the ability of a typical repeat buyer to afford a house that is 9 percent more expensive than a median priced home. The December Maryland affordability index for first-time buyers

stood at 70, indicating that the typical first-time buyer could only afford a home priced 30 percent below the median priced home available to first-time buyers.

Home Sale Prices and Affordability Indices in Maryland December 2004								
County	Median Home Sale Prices				Housing Affordability Indices			
	Current Month		% Change from Last Year	% Change from Last Month	Current Month		% Change from Last Year	% Change from Last Month
	Repeat Buyers	First Time Buyers			Repeat Buyers	First Time Buyers		
Allegany	\$70,000	\$59,500	0.0%	-4.1%	227	146	0.0%	3.6%
Anne Arundel	\$285,000	\$242,250	14.5%	1.8%	125	81	-9.6%	-2.4%
Baltimore	\$200,000	\$170,000	25.0%	0.0%	130	84	-17.4%	-0.7%
Baltimore City	\$90,000	\$76,500	15.5%	-2.2%	153	99	-10.7%	1.5%
Calvert	\$312,450	\$265,583	18.1%	18.4%	123	79	-12.4%	-16.1%
Caroline	\$159,950	\$135,958	24.5%	-14.0%	121	78	-17.1%	15.5%
Carroll	\$284,950	\$242,208	12.9%	-1.6%	118	76	-8.4%	0.9%
Cecil	\$224,900	\$191,165	24.9%	-0.7%	125	81	-17.2%	0.0%
Charles	\$283,000	\$240,550	28.6%	7.4%	118	76	-19.7%	-7.5%
Dorchester	\$180,000	\$153,000	55.8%	17.3%	99	64	-33.7%	-15.3%
Frederick	\$272,450	\$231,583	21.1%	-0.6%	123	79	-14.6%	-0.1%
Garrett	\$349,900	\$297,415	17.0%	35.1%	44	28	-11.8%	-26.5%
Harford	\$200,250	\$170,213	7.1%	-6.2%	156	101	-3.5%	5.9%
Howard	\$330,885	\$281,252	18.8%	1.8%	127	82	-13.0%	-2.5%
Kent	\$274,000	\$232,900	27.4%	16.0%	68	44	-19.1%	-14.4%
Montgomery	\$369,900	\$314,415	13.8%	1.3%	103	67	-9.2%	-2.0%
Prince George's	\$249,900	\$212,415	31.5%	0.8%	117	75	-21.4%	-1.5%
Queen Anne's	\$328,000	\$278,800	11.2%	9.3%	96	62	-7.1%	-9.2%
St. Mary's	\$273,500	\$232,475	24.3%	1.3%	101	65	-16.9%	-2.0%
Somerset	\$156,999	\$133,449	55.4%	15.4%	99	64	-33.5%	-14.0%
Talbot	\$357,810	\$304,139	23.4%	11.3%	60	39	-16.4%	-10.8%
Washington	\$198,900	\$169,065	17.4%	11.1%	102	65	-12.1%	-10.6%
Wicomico	\$170,000	\$144,500	37.1%	6.3%	115	74	-24.7%	-6.5%
Worcester	\$498,999	\$424,149	102.8%	69.2%	42	27	-49.1%	-41.3%
Maryland	\$258,216	\$219,484	19.4%	2.1%	109	70	-13.5%	-2.7%

Workforce Affordable Rental Housing Shortage in Maryland

There is an acute shortage of workforce affordable rental housing for families, seniors and individuals with disabilities in Maryland. This shortage has become more concentrated among the low-income renter households despite improvements in income and housing conditions across a broad range of income groups in the past decade. Statewide, household income grew from an average of \$36,016 in 1990 to \$52,310 in 2000, an increase of 45 percent. The growth of household income was widespread throughout Maryland, ranging from a low of 25 percent for Baltimore City to a high of 47 percent for Worcester County. This impressive growth of income, however, did not significantly reduce the share of low-income renter households with housing problems.

During the 1990-2000 period, the share of Maryland households with severe rent burden declined by only 2 percent among households with 0-30 percent of the Area Median Income (AMI). The same share declined by 8 percent among households with 31-50 percent of the AMI, and by only 1 percent for households in the 51-80 percent of the AMI group. Among households with incomes below 30 percent of the AMI, 70 percent reported at least one housing problem in 2000, while 54 percent paid more than 50 percent of their income for rent and utilities. The corresponding figures for households with incomes between 31-50 percent of the AMI are 68 percent and 13 percent respectively. Finally, 32 percent of the families earning between 51-80 percent of the AMI reported at least one housing problem, while 2 percent indicated severe housing problems. In Worcester County, 54.8 percent of the low income households are cost burdened, the lowest rate, while in Montgomery County, 74.2 percent are cost burdened, the highest rate. About 34.3 percent of Garrett County's low income households are severely cost burdened, the lowest rate, compared to Montgomery County's 60.4 percent, the highest rate.

In addition to the size and variation of household income overtime, the affordability problem depends on the supply side of the rental market, i.e., higher rates of growth in median rent and the slow growth of multi-family residential structures. The rental housing supply, in turn, can be measured by units affordable and available to a specific income threshold. Data from the 2000 Census show that about 87 rental-housing units were affordable for every 100 low-income renter households in Maryland. This represents a shortage of 13 units per 100 renter households. However, many units, nominally affordable to specific income groups, are occupied by higher income households. In 1990 and in 2000 alike, about 46 percent of the affordable units, or 40 units per 100 low-income renters, were occupied by higher income renter households. As a result, there were only 47 affordable and available rental units per 100 low-income renter households in Maryland.

This study, conducted at the request of the Governor's Commission on Housing Policy, estimates the shortage of affordable and available rental housing units for households who earn less than 50 percent of the AMI and pay more than 30 percent of their income for rent. The Commission was established by Governor Robert L. Ehrlich, Jr. through an executive order in March 2003 to develop new and innovative policies to expand home ownership, to ensure an ample supply of workforce housing, to address the needs of seniors and individuals with disabilities, and to enhance community revitalization activities to create sustainable communities.

Since the median household income varies widely across the state, the use of a single statewide affordability threshold may distort the analysis as it represents a different share of the

local median income. For example, in 2003, the statewide median family income threshold (50 percent), as reported by the U.S. Census Bureau, was \$26,155. This threshold represents only 35 percent and 37 percent of the median household income in Howard and Montgomery counties respectively. The corresponding figure for Baltimore City is 87 percent. Thus, to account for these variations, this study estimates the magnitude of the rental housing shortage in Maryland by utilizing a different income threshold for each county. These local income thresholds are equivalent to 50 percent of each county's median household income.

To estimate the shortage of affordable housing for the state's senior households, the elderly population had to be converted into elderly households. Our conversion technique is based on the Census distribution of families (ranging in size from one person to four or more persons) headed by an individual 65 years and older. According to the 2000 Census, about 68.3 percent of senior families consist of one person, 26 percent consist of two persons, and the remaining 5.7 percent consist of three or more individuals.

The disabled households are defined as families with one or more disabled individuals where disability, as defined by the 2000 Census, is a condition that makes it difficult for a person to do activities such as walking, climbing stairs, dressing, bathing, learning, or remembering. The data include non-institutionalized individuals over five years of age who live in households and group quarters such as college dormitories, military quarters, and group homes. The disabled individuals (including the elderly disabled) are converted to the disabled households using an average household size of about 2.2 persons per family.

Baseline shortage of workforce affordable rental units for 2000 are based on the number of low income families, elderly and disabled households compared to the number of workforce affordable rental units available to them. The shortage projections for 2014 are based on the forecast of population growth. On average, the number of low-income families and the disabled households will grow by about 0.8 percent a year during the projection period. The corresponding figure for senior households is 2.0 percent a year.

In 2000, Maryland had a deficit of about 125,000 affordable and available rental units. The rental housing shortage in Maryland is projected to grow by an additional 25 percent, reaching a high of 157,000 units by 2014. Our projections assume no new workforce affordable rental housing production by Maryland Department of Housing and Community Development (DHCD) beyond 2005. This allows us to estimate the impact of various production scenarios and policy options on the projected deficit. According to our analysis, low-income family units account for the bulk of the projected deficit (103,100 units or 66 percent of the total), followed by units accessible to individuals with disabilities (28,800 or 18 percent), and the elderly units (25,000 or 16 percent). Based on an estimated cost per unit of about \$114,000 and incorporating future inflation, the estimated production cost of meeting the expected 157,000 shortage of units over the next ten years is approximately \$19.5 billion.

Montgomery County with 36,000 units has the largest projected shortage, followed by Prince George's County (27,600 units), Baltimore County (22,400 units), Baltimore City (17,800 units), Anne Arundel County (12,600 Units), and Howard County (8,700 units). With the exception of Garrett County, jurisdictions with the smallest projected shortage are located on the Eastern Shore of Maryland and include Somerset, Caroline, Kent, Dorchester, Queen Anne's, Talbot, and Worcester counties.

Projected Shortage of Workforce Affordable and Available Rental Housing in Maryland Jurisdictions 2014

Jurisdiction	50% of AMI Threshold (2000)	% of Households in 2000		Shortage of Affordable Units			
		Cost Burdened	Severely Cost Burdened	Families	Seniors	Disabled	Total
Allegany	\$15,411	64.80%	44.20%	700	300	300	1,300
Anne Arundel	\$30,884	67.20%	54.70%	8,700	1,800	2,100	12,600
Baltimore	\$15,039	66.90%	48.80%	13,200	4,600	4,600	22,400
Baltimore City	\$25,334	76.70%	63.50%	10,000	3,300	4,500	17,800
Calvert	\$32,973	69.90%	46.10%	900	200	200	1,300
Caroline	\$19,416	61.40%	38.90%	300	100	100	500
Carroll	\$30,011	70.40%	58.40%	1,900	500	500	2,900
Cecil	\$25,255	67.70%	51.50%	1,300	300	400	2,000
Charles	\$31,100	71.20%	47.00%	1,900	300	500	2,700
Dorchester	\$17,039	67.70%	48.60%	300	200	100	600
Frederick	\$30,138	69.10%	49.90%	3,300	700	800	4,800
Garrett	\$16,119	55.90%	34.30%	200	100	100	400
Harford	\$28,617	68.60%	54.40%	3,300	700	800	4,800
Howard	\$37,084	66.10%	57.60%	6,700	900	1,100	8,700
Kent	\$19,935	64.40%	48.40%	300	100	100	500
Montgomery	\$35,776	74.20%	60.40%	24,700	5,700	5,600	36,000
Prince George's	\$27,628	73.80%	58.10%	19,200	3,300	5,100	27,600
Queen Anne's	\$28,519	62.60%	43.40%	500	100	100	700
Somerset	\$14,952	73.00%	58.70%	200	100	100	400
St. Mary's	\$27,353	69.20%	46.30%	1,500	300	300	2,100
Talbot	\$21,766	71.50%	50.50%	500	200	100	800
Washington	\$20,309	65.80%	49.80%	1,800	600	700	3,100
Wicomico	\$19,518	72.50%	56.90%	1,200	400	400	2,000
Worcester	\$20,325	54.80%	41.00%	500	200	200	900
Maryland	\$26,155	70.00%	53.80%	103,100	25,000	28,800	156,900

Inventory Conditions

According to the 2000 census, there are about 2,145,283 million year-round housing units in Maryland. About 1,341,592 of these units are owner-occupied units, and about 639,265 were renter occupied units. Of the remaining units, 2.3 percent were rental units available for rent, 1

percent were units for sale, and 7.3 percent were "other" which is comprised overwhelmingly of rental or owner-occupied units which are under rental or purchase contracts but where the household has not yet taken possession of the unit.

Almost half (48.2 percent) of all owner-occupied units had three bedrooms, 27.2% had four bedrooms, and 7.3 percent had five or more bedrooms. By contrast, rental units tended to be primarily two-bedroom units, which represented 36.7 percent of the rental stock. The table below provides a profile of housing units by owner versus rental status:

Housing Stock in Maryland 2000 Census				
Number of Bedrooms	Owner Occupied	Percent	Renter Occupied	Percent
No Bedroom	4,685	0.3	35,431	5.5
One Bedroom	31,938	2.4	197,007	30.8
Two Bedrooms	196,174	14.6	234,355	36.7
Three Bedrooms	646,585	48.2	134,200	21.0
Four Bedrooms	364,379	27.2	30,661	4.8
Five or More	97,833	7.3	7,611	1.2

Housing in Standard Condition and Substandard Condition but suitable for Rehabilitation

HUD also asks grantees to define housing that is in Standard Condition, as well as Substandard condition but suitable for rehabilitation. For the purposes of the Plan, we use the following definitions:

- "Standard Condition" -_A housing unit in "standard condition" meets all applicable code requirements and has all of its major systems in working order.
- "Substandard Condition but suitable for rehabilitation" _A unit which is "substandard but suitable for rehabilitation" is any unit which has at least one or more major systems which is not in working order and/or has health and safety problems, any of which can be remedied in a manner that is both economically feasible and meets livability code requirements.

HUD requires grantees to report on housing units it believes to be substandard. DHCD estimates there may be about 357,000 substandard units in Maryland. This estimate is based on the number of housing units lacking complete kitchens or plumbing, and units that are overcrowded, as well as housing units built in 1939 or earlier. Obviously, not all unit built prior to 1939 are substandard. However, most of these housing units would have lead paint problems. In addition, since no post 1939 housing units are identified as substandard, although some would be, we think this numbers represents a fairly good "best guess" proxy of substandard units.

Substandard Housing Units in Maryland					
Jurisdiction	Housing units: Built 1939 or earlier	Total Units Lacking Complete Kitchens	Total Units Lacking Complete Plumbing	Total Overcrowded Units	Total Substandard Units
Allegany	12,706	173	162	233	13,274
Anne Arundel	12,036	391	542	3,548	16,517
Baltimore City	110,720	1,974	2,068	11,843	126,605
Baltimore County	26,743	714	875	6,145	34,477
Calvert	1,430	146	137	384	2,097
Caroline	2,623	59	96	272	3,050
Carroll	7,979	173	167	537	8,856
Cecil	4,425	104	140	592	5,261
Charles	1,701	221	338	919	3,179
Dorchester	3,468	108	165	247	3,988
Frederick	11,275	203	260	965	12,703
Garrett	2,644	57	90	107	2,898
Harford	5,741	283	401	1,159	7,584
Howard	2,502	401	240	2,054	5,197
Kent	2,358	47	73	110	2,588
Montgomery	16,590	1,203	1,122	17,633	36,548
Prince George's	13,261	881	1,268	21,247	36,657
Queen Anne's	2,096	56	120	247	2,519
Saint Mary's	1,745	432	251	905	3,333
Somerset	2,179	52	80	188	2,499
Talbot	3,181	113	93	148	3,535
Washington	13,693	212	200	552	14,657
Wicomico	4,484	171	79	780	5,514
Worcester	2,987	49	66	379	3,481
TOTAL	268,567	8,223	9,033	71,194	357,017

The Assisted Housing Inventory

DHCD, HUD, the Farmer's Home Administration, the Appalachian Regional Commission, and local towns, cities and counties through Public Housing Authorities or nonprofit corporations such as the Housing Opportunities Commission all finance rental housing for low- and moderate-income households. A list of the projects in the inventory can be found in **Appendix II**.

Beginning with its first multi-family mortgage insurance closing in 1975, both the Division of Housing Finance (CDA) and the Division of Credit Assurance (MHF) have had a substantial

portfolio of projects subsidized by federal Section 8 rental assistance contracts or Section 236 interest rate reduction subsidies. Forty percent of all MHF insured projects and 32 percent of all insured units receive one or both of these federal subsidies. These federal programs require that projects remain restricted for occupancy by low-income tenants, with the owner's cash flow and return on equity limited during a certain time, usually 15 years. Recently, the use restrictions on the units have begun to expire. Owners now have the ability to discontinue receipt of the federal subsidy payments and sell the properties as market rate rental housing, realizing the substantial appreciation that may have accrued over the years. If owners sell these properties, significant numbers of low-income families will be displaced and affordable rental units will be permanently lost to the State housing stock. Replacement of these units is far more expensive than finding ways to preserve their continued use as affordable housing.

Another challenge to maintaining the assisted housing inventory is the potential loss of low-income housing units financed during the mid-1980s using Federal Low-Income Housing Tax Credits. Generally, those units were financed with a 15-year affordability restriction. The first projects financed with tax credits will have met their 15-year limit beginning in 2002.

CDA serves as the State's clearinghouse for assisted housing preservation activities. Notices of Intent required to be filed on federal projects are catalogued here and both non-profit and for-profit developers register with the Secretary of DHCD to be notified of possible purchase opportunities. In addition, Maryland enacted the Assisted Housing Preservation Act in 1989 which is intended to preserve assisted housing for low-income renters.

Public Housing Authorities

There are 17 Public Housing Authorities (PHAs) located in Maryland's non-entitlement jurisdictions, of which DHCD is one. PHAs can manage physical units, Section 8 Vouchers (which are not attached to physical units) or both. The PHAs that fall under the State Plan operate a total of 1,372 physical units and 7,232 Vouchers.

As part of the Consolidated Plan, HUD asks DHCD to report on the physical assessment scores of units that have been evaluated by HUD's Office of Public and Indian Housing. The scores, where available, are noted below. Performers with a rating of 90 or above are considered high performers. Two PHAs in the non-entitlement jurisdictions are considered substandard performers – Saint Michael's Housing Authority and Wicomico County Housing Authority. However, this is somewhat misleading, as this designation is not necessarily a reflection of the upkeep of the housing. For example, in Saint Michael's, the designation is because capital funds were used to help keep open an on-site day care center so low-income residents could continue to work rather than go on unemployment. In Wicomico County, the rating is being re-assessed as new management there is resolving past issues.

HUD also asks DHCD if it knows of any public housing that is scheduled for demolition. DHCD is not aware of any public housing stock currently scheduled for demolition. The State has partnered with Baltimore City in the past to demolish public housing that was obsolete, however, all the demolition on that project is complete.

Public Housing Units in Maryland As of March, 2005				
Housing Authority	Physical Units	Section 8 Certificates	Total	Assessment Score
Allegany County Housing Authority	0	86	86	Not Rated
Calvert County Housing Authority	72	314	386	94
Cambridge Housing Authority	190	0	190	Not Rated
Carroll County Housing & Community Development	0	549	549	Not Rated
Cecil County Housing Agency	0	539	539	Not Rated
Charles County Commissioners	0	768	768	Not Rated
Crisfield Housing Authority	330	23	353	84
DHCD	0	2,261	2,261	Not Rated
Easton Housing Authority	66	139	205	84
Elkton Housing Authority	150	40	190	93
Frostburg Housing Authority	100	0	100	Not Rated
Queen Anne's County Housing Authority	25	136	161	87
Saint Mary's County Housing Authority	57	1,263	1,320	91
Saint Michaels Housing Authority	75	20	95	62
Washington County Housing Authority	80	498	578	96
Westminster Housing Office	0	289	289	Not Rated
Wicomico County Housing Authority	227	307	534	51
TOTAL Non-entitlements	1,372	7,232	8,604	
Annapolis Housing Authority	1,104	200	1,304	50
Anne Arundel County Housing Commission	1,024	1,708	2,732	90
ARC of Northern Chesapeake Region	0	75	75	Not Rated
Baltimore City Housing Authority	14,554	14,945	29,499	79
Baltimore County Housing Authority	0	5,837	5,837	Not Rated
College Park Housing Authority	108	0	108	Not Rated
Cumberland Housing Authority	429	0	429	Not Rated
Frederick Housing Authority	468	670	1,138	93
Glenarden Housing Authority	60	0	60	Not Rated
Hagerstown Housing Authority	1,012	900	1,912	89
Harford County Housing Authority	0	1,066	1,066	Not Rated
Havre de Grace Housing Authority	60	28	88	72
Howard County Housing Commission	50	863	913	95

Public Housing Units in Maryland (continued)				
As of March, 2005				
Montgomery County Housing Authority	1,564	5,691	7,255	91
Prince George's County Housing Authority	570	4,724	5,294	78
Rockville Housing Authority	170	359	529	80
TOTAL Entitlements	21,173	37,066	58,239	
STATE TOTAL	22,545	44,298	66,843	

Source: HUD office of Public and Indian Housing

DHCD Public Housing Waiting List

HUD regulations ask grantees to provide information on their public housing waiting lists in this section of the Consolidated Plan. DHCD does not operate public housing, so does not have a public housing waiting list. However, DHCD does operate the Section 8 Housing Choice Voucher Program on behalf of some of Maryland's small towns and counties. Each of these jurisdictions maintains its own waiting list, some of which are open and some of which are closed due to the number of people already waiting for Section 8 assistance. The table below provides a snapshot of the total number of households on the Section 8 waiting lists of all of these cities, towns and rural counties where DHCD operates its Section 8 program:

DHCD Section 8 Waiting List for DHCD Subcontractees			
(As of February, 2005)			
Household characteristics	Number of Families	% of Total Families	Annual Turnover
Total	4,374	100%	1,330
Extremely Low Income (<=30% AMI)	3,561	81%	
Very Low Income (>30% but <=50% AMI)	707	16%	
Low Income (>50% but <=80% AMI)	106	2%	
Families With Children	2,791	64%	
Elderly Families	375	9%	
Families with Disabilities	879	20%	

NOTE: The number of Families With Children, Elderly Families, and Families with Disabilities on the waiting list does not add up to the Total Number of Families because families can fall into more than one category, for example, they could both be classified as elderly and having a disability.

Minority and Low-Income Concentrations

One of the items HUD asks the State to look at is concentrations of persons by race or income. The State is allowed to use its own definition of what constitutes a "concentration" and we define it as a census tract where the percentage of minority or low income households is at least 10% greater than the county average. DHCD ran statistics for all of the major ethnic groups, as well as Hispanics. No concentrations by race were found except for black or African-American households. One census tract (ID 955000) in Caroline County had a concentration of persons of Hispanic background.

Areas of Minority Concentration

As shown on the map on the following page, of the 346 census tracts in Maryland's non-entitlement areas, 25 have minority concentrations of black or African-Americans. This represented a decrease from 38 census tracts identified in the last AI using 1990 data. Twelve of these 25 concentrations are due to institutional populations, which typically have a higher number of minorities than society as a whole. These twelve are:

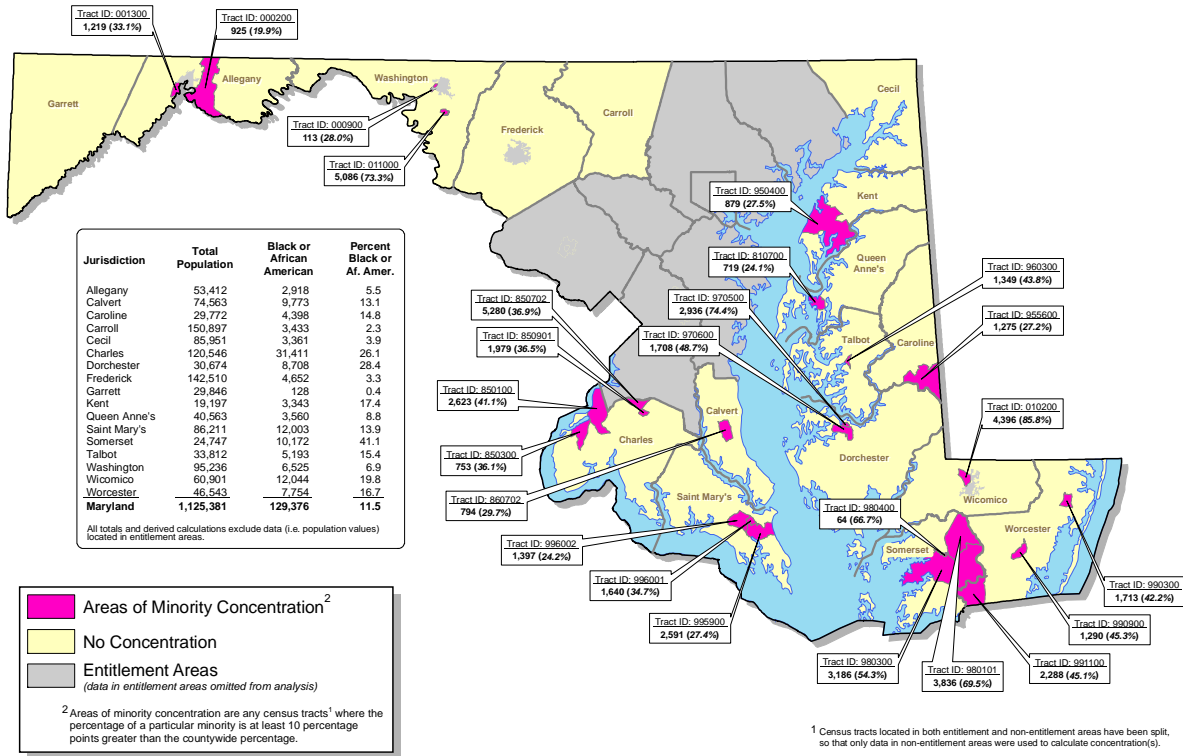
County	Census Tract	Reason for Concentration
Allegany	001300	State Prison
Allegany	000200	State Prison
Calvert	860702	Veterans Home
Dorchester	970500	Residential Hospital Center
Somerset	980101	Historically Black College
Somerset	980300	State Prison
Somerset	980400	State Prison
Washington	009000	State Prison
Washington	011000	State Prison
Worcester	990300	Residential Hospital Center
Worcester	990900	Residential Hospital Center and State Prison
Worcester	991100	Residential Hospital Center

In addition, concentrations are higher in three other census tracts due to a large military presence, as the military also tends to have a much higher percentage of minorities than the State and society as a whole. These tracts are the three census tracts in Saint Mary's County (995900, 996001 and 996002) which are impacted by the Patuxent Naval Air Station.

After subtract out these 15 census tracts where the data was skewed by special circumstances, the State had ten census tracts with high minority concentrations. Of these ten, five were located in or on the edge of small towns on the Eastern Shore – Cambridge (tracts 970500 and 970600) in Dorchester County, Easton (tract 960300) in Talbot County, Graysonville (a historically black community in tract 810700) in Queen Anne's County, and an area outside of Salisbury (tract 010200) in Wicomico County. In primarily rural areas, towns typically have higher numbers of minorities than the surrounding farm areas, so these findings are not surprising. However, in a few census tracts, notably the tract outside Salisbury (which is more than 85% African-American in a county that is less than 20 percent African-American) and the two tracts in Cambridge, the numbers are significantly higher than their Counties as a whole. These concentrations may indicate either a past historical pattern of segregation, and/or possible discrimination in these communities.

Of the remaining four tracts, one is in Kent County, and the other four are in Charles County. The Kent County tract barely qualified as a concentration, exceeding the threshold by 1 tenth of 1 percent. This area is primarily rural, and it is unclear why a concentration exists.

**Concentrations of Race by Census Tract¹: Black or African American Alone
(excluding entitlement areas)**



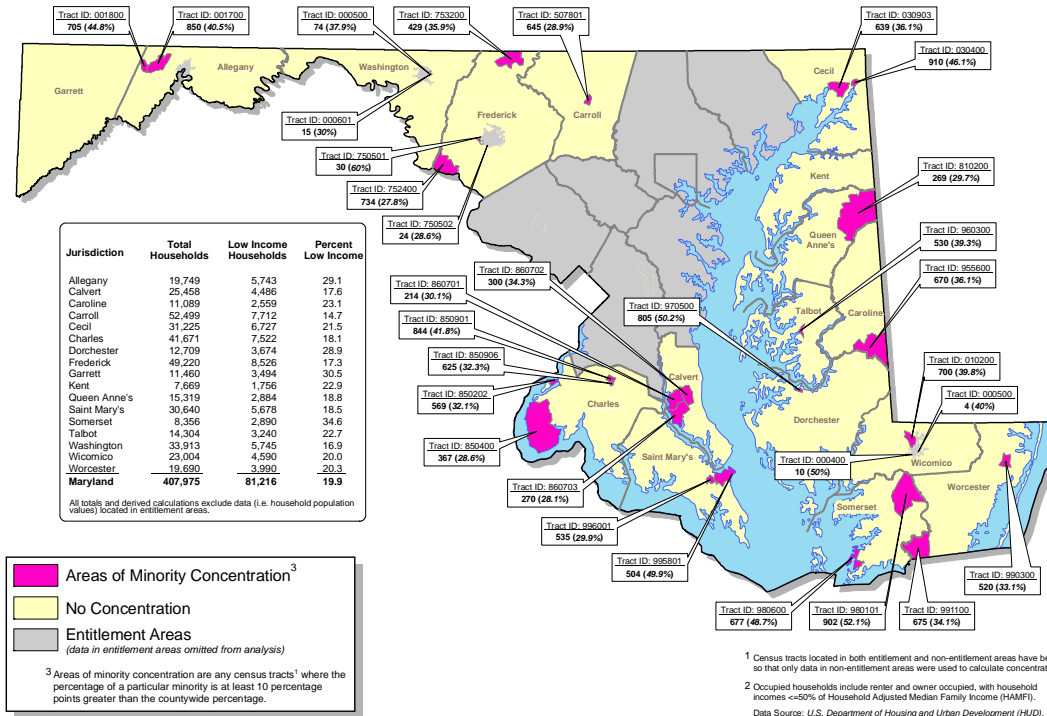
Of the four tracts with minority concentrations in Charles County, one of the tracts (950901) is a small area located in the Saint Charles/Waldorf area, a designated revitalization area for the State. The other three tracts are located on the edge of Prince George's County, one of the nation's few "majority minority" counties, and close to Washington, D.C., a majority minority city. One reason that these concentrations may exist is because economically successful minority families are moving to Charles County, pushing out the boundaries of the adjacent, economically successful minority communities. This theory is supported by the fact that while these census tracts show up as having concentrations of minority persons, they do not show up as low-income concentrations. The households are more likely to be African-American, but not more likely to be poor. In addition, as part of our review of Home Mortgage Disclosure Act (HMDA) data in updating our Analysis of Impediments to Fair Housing Choice, we found that the percent of minority households applying for loans in Charles County exceeded white households by about 80%, and the number of loan applications by minority households far exceeded those for minorities in any other county.

Low-Income Concentrations

Low-income households are households with incomes 50% or less of the median income. Based on 2000 Census information, there were 31 census tracts with concentrations of low-income persons in Maryland's non-entitlement jurisdictions that year. This was a decrease from

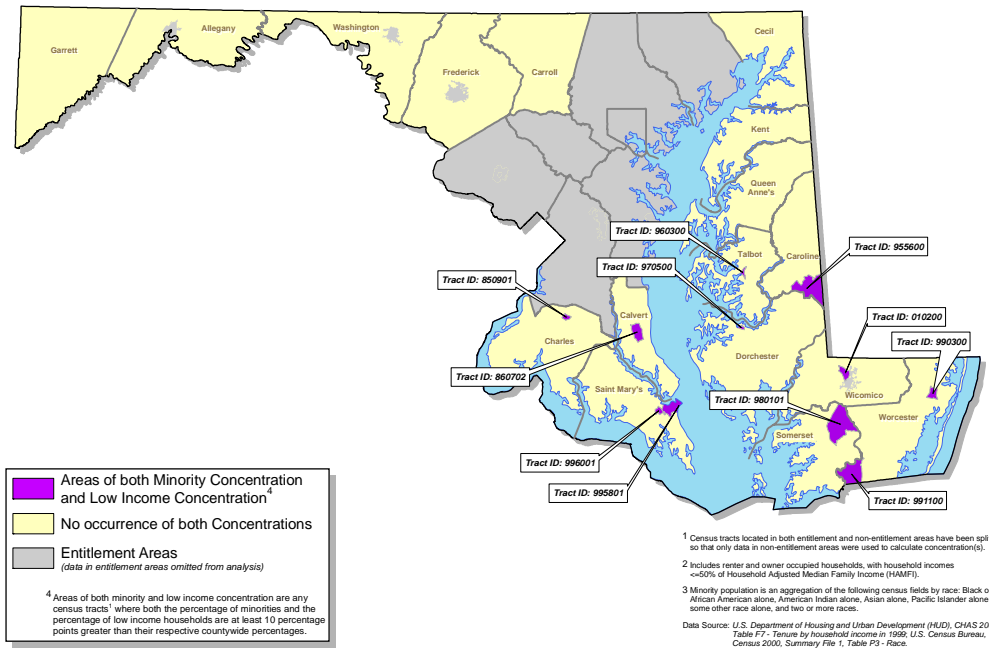
41 census tracts using 1990 census information.

Concentrations of Low Income by Census Tract¹: Occupied Households, Income <=50% HAMFI²
(excluding entitlement areas)



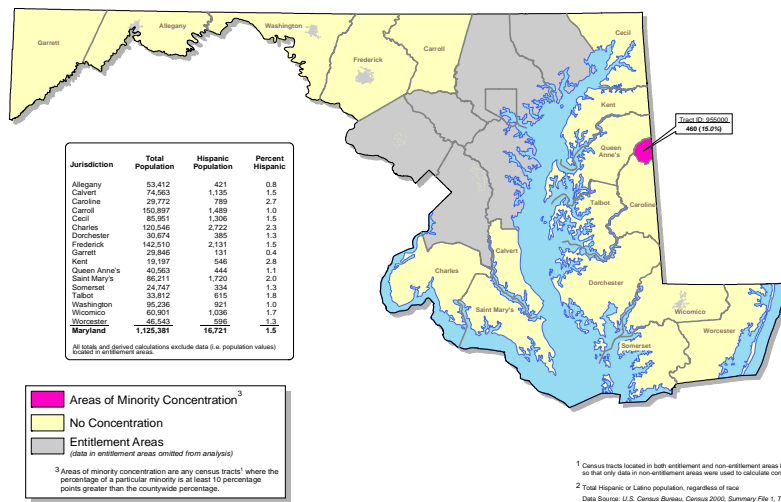
Comparing the census tracts with high minority concentrations to high low-income concentrations, the data shows that only 11 of the tracts meet both criteria, a very low correlation. Of these 11, five are impacted by the same conditions that skewed the minority concentration information. That is, one of the tracts (98010 in Somerset County) had incomes affected by a Historically Black College, one was affected by the Veterans Home in Calvert County (tract 86072), and three were impacted by residential hospital centers (tract 955600 in Dorchester County and tracts 990300 and 991100 in Worcester County). Of the remaining six tracts, two are in Saint Mary's County and may be impacted by the military base, three are outside of small towns on the Eastern Shore (Cambridge, Easton and Salisbury), and the remaining one is the tract located between Saint Charles and Waldorf in Charles County.

Census Tracts¹ with both Low Income² and Minority Population Concentrations³
(excluding entitlement areas)



As noted above, there was one area of Hispanic Concentration in the State's non-entitlement jurisdictions. This concentration is due to the presence of a chicken processing plant that has recruited a large number of Hispanic workers to the area. The area is not a low-income concentration.

Concentrations of Ethnicity by Census Tract¹: Total Hispanic or Latino Population²
(excluding entitlement areas)



Inventory Of Facilities And Services For The Homeless And Persons Threatened With Homelessness

Emergency and Transitional Shelters

There are numerous organizations in Maryland which help house homeless individuals and families. These organizations provided 5,170 beds in emergency or transitional shelters in SFY98. Many of the organizations which offer shelter also offer supportive services, and about 100 offer meals or food supplies.

Emergency shelters serve all groups of the homeless, although all areas do not have focused shelters (e.g., shelters specifically for homeless youth, battered women, etc.). Transitional housing facilities are also available for all homeless groups, although not necessarily in all areas. In its 2003 report, DHR reported the State had 2,486 emergency beds, and 2,739 transitional housing beds. In addition, there were 435 beds which were not designated as specifically for emergency or transitional housing.

Several "special needs" groups of homeless persons are assisted by these facilities. Other facilities aim their housing and supportive services towards assisting the mentally ill. In addition, some facilities assist focus on homeless youth, while others focus on homeless persons with alcohol and/or drug abuse problems. Finally, a number of programs focus on victims of domestic violence, some using shelter programs and four using "safe houses". The most recent list of homeless shelters in Maryland, who they serve, and the supportive services they provide can be found in **Appendix III**. In addition to shelter programs, the homeless and those threatened with homelessness in Maryland are also assisted by soup kitchens, soup kitchens which also operate food pantries, and food pantries which do not operate soup kitchens. That list may also be found in **Appendix IV**.

Inventory of Supportive Housing for Non-Homeless Persons with Special Needs

Maryland has been a national leader in providing supportive housing assistance for persons with special needs. According to the National Council of State Housing Agencies, DHCD has been among the top ten financers of group homes or alternative living units for persons with mental illness or developmental disabilities almost every year in the past ten years.

While we have been very successful in these efforts, the disability community has expressed the desire to be part of the mainstream and to reside in scattered site housing of their own choosing. While group homes remain a necessity for some persons due to the severity of their disability, the majority of persons with disabilities are capable of residing in alternative settings. This direction is enhanced by the availability of flexible off-site support services that are now provided by many service delivery agencies. This more flexible service delivery approach has assisted many persons to live more independently.

In support of efforts to mainstream persons with disabilities, DHCD, in addition to its group home programs, also offers a Homeownership for Individuals With Disabilities Program, as well as a Section 8 Mainstream Voucher program. DHCD also awards higher points in its Qualified Allocation Plan (QAP) to rental projects that provide more handicapped accessible units than

required by law, resulting in a significant increase in the number of units being available to persons with disabilities. In addition, as part of the goals of this Plan, DHCD, working with DHMH, DHR, and MDoD, will offer a new Bridge Subsidy program that will provide rental assistance to persons with disabilities while they await permanent housing.

The Developmentally Disabled

The Developmental Disabilities Administration (DDA) provides a coordinated service delivery system so that individuals with developmental disabilities receive appropriate services oriented toward the goal of integration into the community. This wide array of community based services is delivered primarily through a network of more than 170 non-profit providers. Currently, approximately 22,000 individuals receive community based services. In addition, 380 individuals receive services in one of the four state residential centers operated by DDA.

The Developmental Disabilities Administration also maintains a waiting list of individuals who are eligible for services and are waiting to receive one or more of three basic services (residential, day and support services). As of January 1, 2005 there were 14,616 individuals on the waiting list. Of these, nearly 2,500 individuals are in a crisis resolution or crisis prevention category and will require immediate housing assistance if their caregiver dies or becomes unable to take care of them.

Approximately 4,783 Individuals currently receive residential services through DDA. An additional 380 individuals reside in institutions. Persons receiving residential services live in settings provided by the agency that delivers their services. These individuals do not have control of their housing situation. In addition, approximately 1,464 individuals receive Community Supported Living Arrangement (CSLA) services in their own home, apartment, family home or rental unit.

Department of Health and Mental Hygiene - Developmental Disabilities Administration Housing Assistance		
COUNTY	RESIDENTIAL	CSLA
Allegany	93	44
Anne Arundel	370	99
Baltimore	1,319	332
Baltimore City	278	104
Calvert	37	43
Caroline	47	4
Carroll	110	50
Cecil	82	11
Charles	126	26
Dorchester	41	9
Frederick	152	20
Garrett	31	14
Harford	107	28
Howard	230	74
Kent	23	9

Department of Health and Mental Hygiene - Developmental Disabilities Administration Housing Assistance (continued)		
COUNTY	RESIDENTIAL	CSLA
Montgomery	677	256
Prince George's	513	134
Queen Anne's	22	8
Somerset	36	13
St. Mary's	52	52
Talbot	54	10
Washington	243	63
Wicomico	120	46
Worcester	20	15
TOTAL	4,783	1,464

Individuals With Mental Illness

Persons with mental illness in Maryland include those individuals with are affected by mental illness or deeply rooted psychological problems. The Mental Hygiene Administration (MHA) in DHMH is the State's lead office working with mentally ill persons in Maryland. MHA currently services approximately 90,000 persons with housing and support services.

Department of Health and Mental Hygiene - Mental Hygiene Administration Supervised Housing for Persons with Mental Illness Residential Rehabilitation Beds	
COUNTY	BEDS
Allegany	30
Anne Arundel	258
Baltimore City	353
Baltimore County	331
Calvert	18
Caroline	6
Carroll	57
Cecil	38
Charles	16
Dorchester	18
Frederick	180
Garrett	6
Harford	59
Howard	106
Kent	19
Montgomery	339
Prince George's	376
Queen Anne's	16

Department of Health and Mental Hygiene - Mental Hygiene Administration Supervised Housing for Persons with Mental Illness Residential Rehabilitation Beds (continued)	
COUNTY	BEDS
Saint Mary's	38
Somerset	6
Talbot	9
Washington	30
Wicomico	65
Worcester	1
TOTAL	2,375

In addition to RRP services, individuals can choose to live in independent housing that is owned by the program that rents or leases the unit. The consumer has choice in selecting mental health services from community providers that may include outpatient services, psychiatric rehabilitation programs, and/or case management as well as other community resources. The following programs provide housing but do not provide direct mental health services to the consumer.

Department of Health and Mental Hygiene – Mental Hygiene Administration Supportive Housing		
Organization	Services Area	Clients
Community Housing Associates	Baltimore City	271 individuals
Housing Unlimited	Montgomery County	73 individuals
Supportive Housing Developers	Anne Arundel County	56 individuals
SAIL	Dorchester and Queen Anne's Counties	16 individuals
Main Street Housing	Howard and Washington Counties	13 individuals

Persons With HIV/AIDS

The AIDS epidemic is a problem of growing concern in the State of Maryland as well as the rest of the nation. The Maryland AIDS Administration, a division of the Maryland Department of Health and Mental Hygiene (DHMH), has primary responsibility for meeting the needs of people with AIDS in Maryland. The AIDS Administration provides counseling, outreach, and patient care services to individuals who are HIV positive, and testing and education to the community as a whole.

While the number of AIDS deaths have been declining substantially in recent years, the rate of *infection* has remained fairly steady, and actually increased for persons aged 20-29. In addition, members of ethnic minority groups continue to have much higher rates of AIDS/HIV infection than other groups.

The AIDS Administration does not provide housing per se for HIV positive individuals. Rather, it subcontracts to DHCD funding under the HOPWA program to provide housing assistance to persons with HIV/AIDS in rural areas. This housing assistance is in the form of rental assistance similar to Section 8. Currently, about 51 households are assisted under this

program. The Maryland Department of Housing and Community Development offers group home programs, which have been used to provide housing for HIV positive individuals

For HIV positive individuals who do not need housing, the AIDS Administration provides financial counseling to help individuals receive the financial and medical benefits they are entitled to so they may remain in their homes. HIV positive individuals may also be admitted to DHMH sponsored group homes as appropriate.

Persons With Alcohol and Other Drug Addictions

The Alcohol and Drug Abuse Administration (ADAA) of the Department of Health and Mental Hygiene is the State agency responsible for the planning, development, coordination and delivery of services to prevent and treat harmful involvement with alcohol and other drugs by: supporting a statewide coordinated service delivery system, determining customer needs for services, program planning and development, training addictions professionals and other health, human service and criminal justice personnel, collecting and analyzing addictions treatment and prevention data, evaluating services and customer outcomes and collaborating with local, State and federal agencies.

Although most clients are helped on an outpatient basis, ADAA also certifies residential programs for persons with alcohol and drug addictions:

The Level III.7 (Medically Monitored Inpatient- Intermediate Care Facilities) programs which offers residential services in a medically monitored inpatient treatment. The program provides an intensive treatment regimen of individual and group therapy as well as other activities aimed at the physical, psychological and social recovery of the addicted individual. Clients usually remain in residence for two to four weeks.

The Level III.1 (Halfway House) programs are residential care facilities which provide time-limited services to clients who have received prior evaluation or treatment in a primary or intermediate care program. These clients during their stay (usually up to six months) seek employment and move to a position of personal and economic self-sufficiency.

The Level III.3 and Level III.5 (Long Term Care and Therapeutic Communities) programs are residential care facilities which provide the same at Level III.1 but for a longer period (usually up to a year).

Listed below is the number of certified substance abuse residential programs by jurisdiction and by Level of Care during fiscal year 2005.

Department of Health and Mental Hygiene - Alcohol and Drug Abuse Administration Residential Facilities			
Counties	Level III.7 Intermediate Care	Level III.1 Halfway House	Level III.3 & Level III.5 Other Residential
Allegany	2	1	0
Anne Arundel	1	2	3
Baltimore County	1	2	2
Calvert	0	0	1
Carroll	1	0	0
Cecil	0	1	0
Charles	0	0	0
Dorchester	1	0	1
Frederick	1	2	1
Harford	1	2	1
Howard	0	1	0
Kent	1	0	0
Montgomery	2	3	2
Prince George's	1	1	1
Queen Anne's	0	0	0
St. Mary's	1	2	0
Somerset	0	0	0
Talbot	0	0	0
Washington	0	2	1
Wicomico	2	2	0
Worcester	0	0	0
Baltimore City	3	22	5
Statewide	0	0	0
Total	18	43	18

The Elderly With Special Needs

Maryland's elderly population, like that of the rest of the nation, is growing in size. Most elderly Marylanders are opting to live their entire lives in their own homes, some elderly require supportive services -- health care, housekeeping, or other assistance -- to help them in their later years. The Maryland Department on Aging (MDoA) has the primary responsibility for providing for the needs of Maryland's elderly population.

As the percentage of the population over the age of 65 continues to grow, the need for supportive housing for elderly persons continues to grow. Medical advances that have resulted in increased life span also means that senior-oriented housing resources are not being vacated at the same rates as in the 1960s and 1970s. Locally, the elderly in Maryland are opting to stay

in Maryland rather than move to south and west; this is particularly true in Baltimore City and Baltimore County.

Two items of special interest to the MDoA are the increasing number of frail elderly who require supportive services to maintain independence and the lack of decent, safe, affordable housing for the poor elderly.

The MDoA currently operates 108 group homes with 864 beds to help address the needs of the frail elderly under its Group Sheltered Housing Program. Seniors in this program must be at least 62 years old, in need of assistance with one or more activities of daily living, and have incomes of no more than 60 percent of statewide median.

The Maryland Department of Aging is authorized to regulate Continuing Care At Home (CCAH), a new concept in delivering services to the elderly. Similar to the Continuing Care Retirement Community (CCRC) structure, subscribers to CCAH will pay a one-time entrance fee and monthly premiums to access comprehensive, managed long term care services in their own homes. This housing option is designed for persons 60 years of age and older with moderate to higher incomes and who are living independently in the community.

CCAH services include: care coordination, home inspections by occupational therapist, assistance with activities of daily living in subscriber's home, skilled nursing services in subscriber's home, routine services of an assisted living facility, routine services of a comprehensive care facility, and assistance with the maintenance of the subscriber's dwelling.

CCAH providers must meet the same requirements as CCRCs, including approval of a feasibility study, and review and approval of the language contained in the CCAH contract. A copy of the regulations for Continuing Care at Home are available by individual request. The Maryland Department of Aging urges anyone who is considering entering into a Continuing Care At Home agreement to consult with an attorney and financial advisor before signing any documents. Although the Department of Aging regulates CCAH providers, it does not rate, endorse, or guarantee a CCAH provider.

The MDoA also assists the frail elderly who would otherwise be placed in group homes or nursing homes through its Senior Nutrition Program which helps handicapped elderly individuals by taking them to nutrition sites or senior centers, and the Home Delivered Meals Program, which assists homebound elderly individuals who are unable to cook. The Department also keeps a list of subsidized low-income projects, both public and private, operated within the State, as part of a referral network of affordable housing for elderly individuals who are poor and in need of housing.

The tables below list the Continuing Care Retirement Communities and Congregate Care Housing Services the Department on Aging provides in Maryland:

Maryland Department of Aging Continuing Care Retirement Communities	
County	Community
Anne Arundel	Bay Woods of Annapolis
Anne Arundel	Ginger Cove
Baltimore City	Roland Park Place, Inc.
Baltimore City	The Wesley Home, Inc.
Baltimore County	Augsburg Lutheran Homes of Maryland
Baltimore County	Augsburg Lutheran Village
Baltimore County	Blakehurst
Baltimore County	Broadmead
Baltimore County	Charlestown Community, Inc.
Baltimore County	Edenwald
Baltimore County	Glen Meadows Retirement Community
Baltimore County	Maryland Masonic Homes
Baltimore County	Mercy Ridge
Baltimore County	North Oaks Life Care Community
Baltimore County	Oak Crest Village
Baltimore County	Pickersgill, Inc.
Baltimore County	Presbyterian Home of Maryland
Calvert County	Asbury-Solomons Island
Carroll County	Carroll Lutheran Village
Carroll County	Fairhaven
Frederick County	Buckingham's Choice, Inc.
Frederick County	Home for the Aged
Howard County	Vantage House
Kent County	Heron Point of Chestertown
Montgomery County	Asbury Methodist Village, Inc.
Montgomery County	Bedford Court - Sunrise
Montgomery County	Maplewood Park Place
Montgomery County	National Lutheran Home for the Aged
Prince George's County	Collington Episcopal Life Care
Prince George's County	Riderwood Village
Talbot County	William Hill Manor
Washington County	Fahrney-Keedy
Washington County	Homewood Retirement Center

Maryland Department of Aging Congregate Housing Sites	
County	Congregate Housing Development
Allegany County	Frostburg Heights Apartments
Allegany County	Grandview
Allegany County	Willow Valley Apartments
Anne Arundel County	Arundel Woods Senior Housing
Anne Arundel County	Friendship Station Senior Housing
Anne Arundel County	Glen Square
Anne Arundel County	Glenwood Highrises
Anne Arundel County	Pinewood Village
Baltimore City	Basilica Place
Baltimore City	Bel-Park Tower
Baltimore City	Belvedere Green
Baltimore City	Bernard E. Mason Sr. Apartments
Baltimore City	DePaul House/St. Joachim
Baltimore City	Epiphany House
Baltimore City	N.M. Carrol Manor, Inc.
Baltimore City	Rosemont Towers
Baltimore City	Weinburg Place
Baltimore City	Woodbourne Woods
Baltimore City	Wyman House
Baltimore County	Stella Maris
Baltimore County	St. Luke's Place
Baltimore County	Timothy House
Baltimore County	Trinity House
Montgomery County	Homecrest House III
Montgomery County	Leafy House
Montgomery County	Springvale Terrace
Montgomery County	Takoma Tower Retirement Center
Saint Mary's County	Saint Mary's Home for the Elderly
Wicomico County	Pine Bluff Village

BARRIERS TO AFFORDABLE HOUSING IN MARYLAND

Barriers to affordable housing may include bureaucratic procedures, codes and standards, some land use controls, financial barriers, lack of financial resources by housing providers, lack of coordination of resources, and scattered growth which drives up infrastructure and housing costs. In addition, some families and individuals face barriers to fair housing choice because of lack of access or lack of availability to affordable housing.

Building Codes and Standards

While new residential and commercial development consumes agricultural land, forests, and other undeveloped land, thousands of existing buildings in our communities are not being fully utilized or are abandoned. Many existing buildings with historic architectural elements are in danger of deteriorating or being lost. These vacant and underutilized buildings pose a threat to the health, safety, and welfare of the citizens of the State. The rehabilitation of such buildings, however, is often hampered by constraints in the building construction regulatory system. Many existing codes that apply to rehabilitation are conflicting and overlapping. Also, many codes vary from jurisdiction to jurisdiction, posing a challenge to redevelopment. Standardization of such codes, and the development of consistent standards would both protect public safety and lower rehabilitation costs leading to the re-use of thousands of vacant and underutilized buildings in Maryland.

Local Zoning

Zoning is the primary system by which counties and municipalities maintain control over the pattern of land development within their borders. Zoning regulations allocate parcels of land to different classifications with certain uses being permitted, while others are proscribed. Zoning practices of counties and localities often have the intended or unintended effect of increasing housing costs, and effectively excluding prospective moderate-income households from locating affordable housing for purchase or rent. Zoning can be used as a positive tool in support of cost-effective and efficient design if housing affordability is considered as a part of the jurisdiction's policy. The use of techniques such as programs for moderately priced dwelling units, zero lot line housing, mixed use zones, viable basic design and performance zoning can help to produce affordable housing.

Conversely, the separation of residential from non-residential uses exacerbates traffic problems since most employees cannot walk to work. Moreover, upper-income residents may bid up the price or rent of housing units that are conveniently located near to places of employment therein forcing lower-income residents to live farther from their places of employment. The State's high priority on rebuilding healthy, diverse communities and eliminating sprawl development is intended to reverse this trend.

Zoning regulations prescribing minimum lot sizes minimum setbacks, and other requirements may necessitate the need for larger lots, which drive up the cost of housing and making it less affordable. In addition, zoning is occasionally used to "zone out" manufactured housing, which is an important source of housing for many low- and moderate income-citizens. Zoning regulations also may prohibit the development of ancillary dwelling units, even if such units do not impose a significant cost on other community residents. Ancillary dwelling units --

sometimes called in-law apartments or "granny flats" — are an important tool to increase the supply of housing for moderate-income households, particularly single people who require minimal space. This type of unit and a wide variety of other compatible mixed-use and mixed-income designs should be permitted by local land use policy and the regulations which implement it.

Approval Fees

Approval fees also may constitute a significant barrier to the development of affordable housing in Maryland depending on the type, size, and location of the proposed development. The fees and charges necessary for approval of a residential development include subdivision fees, building and other permit fees, and charges for access to sewers and other public infrastructure, among others. Prospective developers may be required to prepare market analyses, environmental or economic impact analyses, or infrastructure requirements analyses and engineering plans to accompany particular development proposals. In many cases the aggregate cost of these fees, charges, and required submissions can amount to a significant share of the total cost of a residential development.

Permit Approval Process

The length of time involved in the permit approval process itself may constitute a significant barrier. In some cases the process of obtaining all required permits and approvals may add months or even years to the development time. During this period the developer must pay the explicit costs of funds borrowed to finance the development and staff retained to design it, as well as the implicit cost of revenues foregone as a result of the approval process delay. Often such delays are due to the needs for submission revisions in accordance with permit requirements. But whether the delays are the fault of government officials or developers, they still reduce the financial return on the development of affordable housing.

Lack of Adequate Financial Resources

A widely recognized, yet difficult to overcome barrier to affordable housing in Maryland is the lack of adequate financial resources. Although nationally recognized for its innovative and effective housing programs, DHCD still has insufficient resources to meet the need for affordable rental and homeownership housing. Like all states, the need for increased revenue for housing has to compete with other legitimate public priorities, such as education, transportation, health and welfare. In Maryland, public (tax revenue) support for affordable housing was initiated in the early 1970s and reached a peak in the late 1980s and early 1990s. Since that period DHCD's operating budget has increased only gradually. At the same time, federal resources have been cut or shrinking, especially for programs such as HOME and CDBG which are the primary tools for constructing and/or rehabilitating affordable housing for the low-income individuals. Section 8 resources have also been reduced, making it more difficult for renters to find affordable rental housing.

Housing Acquisition Finance Requirements

Mortgage down payment requirements constitute perhaps the most significant barrier to the purchase of otherwise affordable housing by moderate-income households. While moderate-income households may have little difficulty in making monthly mortgage payments --

particularly as household incomes increase with inflation and real wage growth -- it may be difficult for such households to accumulate the total amount required for the up-front down-payment on a home purchase. High home prices have also had a negative in the effort to provide affordable housing, as prices rise out of reach of many would-be first time buyers.

Rental security deposits too may constitute a significant barrier to the acquisition of otherwise affordable rental housing by moderate-income households, although security deposits are generally small compared with mortgage down payment requirements. Counties in Maryland rely heavily on transfer taxes and recordation fees as sources of county revenues. In addition to the 0.5% State transfer tax, ten jurisdictions -- Anne Arundel, Baltimore City, Baltimore County, Cecil, Howard, Kent, Montgomery, Prince George's, Saint Mary's, and Talbot -- impose county transfer taxes. All 24 jurisdictions impose recordation fees as a percentage of the mortgage value. Although it is clear that transfer taxes and related fees constitute a small share of the total cost of purchasing housing, it is equally clear that purchasers in Maryland face substantially higher transfer taxes and related fees than purchasers in most other states. Thus the reliance on transfer taxes and recordation fees constitutes a small, but significant and avoidable, barrier to the affordability of housing in Maryland by moderate-income buyers.

Governmental Coordination

Lack of coordination among and within State agencies creates a barrier to affordable housing. Uncoordinated government efforts cause delays in funding of affordable housing, create conflicting policy/funding priorities across government agencies, and add to administrative burdens. In addition, multiple and differing program applications in a specific agency can lead to delays in processing loan applications and drive up development costs.

Similarly, environmental review procedures among State agencies result in barriers to affordable housing. Environmental regulations provide positive public benefits to all citizens and communities, however, different environmental reviews, rather than a uniform review process shared by all departments, prolong the affordable housing development process, increase costs, create confusion, reduce affordability, and impose undue administrative burdens.

Fair Housing Choice

One of the greatest barriers to affordable housing for many Maryland families is the lack of fair housing choice. HUD broadly defines fair housing choice as "the ability of persons with similar incomes to have the same housing choices regardless of race, color, religion, sex, age, national origin, familial status, or disability." All state and local governments, particularly those that receive federal funds from HUD, are required to promote fair housing choice and to affirmatively further fair housing.

Various forms of discrimination may exist in Maryland which prevents citizens from having fair housing choice. For example, some families face racial discrimination which closes doors to affordable housing. Such discrimination includes refusing to rent or sell affordable housing to minority households, or the denial of equal credit. Lending discrimination too can have a substantive impact on Maryland's communities. Without access to capital, a community cannot build affordable housing, rehabilitate older housing, or establish a healthy residential tax base. In addition, refusal to loan to minorities, or women, or the disabled, or other protected classes undermines efforts to integrate communities.

Despite the continued support for affordable housing by DHCD, there still is the need for more units. Not only do minorities and the disabled need safe, sanitary, and affordable housing, many also know little or nothing about fair housing choice.

In addition to discrimination based on race or ethnicity, Marylanders with disabilities may be denied access to rental housing for a variety of reasons. For example, many have resided in group homes or have been hospitalized and therefore have no credit or rental history. Some persons with disabilities are able to work on a part time basis only, while others cannot work at all. Therefore, SSI or SSDI benefits provide their major source of income. Many rental agents do not consider this a valid source of income and will not rent to persons in this situation. Even when a person has a Section 8 certificate from HUD, there are an increasing number of landlords who choose not to accept these certificates. In addition, many persons with disabilities are stigmatized for no reason other than their disability. As a result, many providers are asked to co-sign leases on behalf of persons with disabilities, further exacerbating the problem. Reasonable accommodations need to be articulated at the State level in order to remove these barriers to community integration.

Persons whose disabilities which are primarily accessibility-related (persons in wheel chairs or with other physical limitations that impair mobility) also have difficulties finding affordable housing. The physically disabled often have lower than average incomes due to the difficulty of obtaining well paying jobs. Thus, their housing problems are exacerbated both by low incomes and by the inability to physically enter into many housing units, affordable or otherwise. This issue was addressed to some degree under the American's with Disabilities Act. However, confusion over the Act and lack of guidelines has meant that "accessible" units are often inaccessible to the persons who need them.

NON-HOUSING COMMUNITY DEVELOPMENT NEEDS

Maryland receives community development, economic development, and infrastructure funds from the federal government, and uses its own funds to carry out these activities as well.

Setting Non-housing Priorities

The State determined its community development, economic development, infrastructure, and other non-housing priorities from a variety of inputs. First, a review of CDBG projects from Federal Fiscal Year 2000 through 2004 was undertaken. This review identified the CDBG priorities that were set by counties and municipalities across the State as well as their sub-recipients. Local governments often identify and target similar development needs. By reviewing these projects, a preliminary list of priorities was gathered.

Second, a survey was taken of local governments, housing providers, advocacy organizations, human service agencies, and other groups and organizations interested in community and economic development (as well as housing) issues. They ranked more than 30 categories of need from (1) "very low need" to (5) "very high need." A copy of this survey can be found in **Appendix I**.

Third, a working group of the Governor's Housing Policy Commission looked at non-housing needs in Maryland's Communities. This group identified needs for infrastructure, public facilities, and essential human services.

Based on these three methods, needs were broken down into two main areas, 1) infrastructure needs and 2) public facilities and essential human service needs. These resulted in the priorities below:

Infrastructure: Priorities for federally funded infrastructure are:

- **Water, sewer, and drainage,**
- **Streets and roads, and**
- **Planning and technical assistance.**

The new construction, rehabilitation, or upgrading of infrastructure will be carried out and/or financed through programs administered by DHCD, DBED, MDOT, and the MDE, among others.

Public Facilities and Essential Human Services: Priorities for public facilities and essential human services are:

- **Head Start , Day Care, and Family Support Centers,**
- **Youth and Senior Centers,**
- **Community Facilities,**
- **Health Centers, and**
- **ADA improvements.**

Public facilities and essential human services programs will be financed through federal programs, such as the CDBG program, as well as State programs.

General Conditions

Like their counterparts nationally, Maryland low- and moderate-income residents are struggling to find jobs which afford personal satisfaction and provide a living wage. Also like their counterparts nationally, Maryland's low-income citizens need assistance with child care, health care and job training. Often their communities also need water and sewer systems that meet health and safety requirements as well as public facilities which are accessible to the elderly and handicapped.

Given these numerous community development needs, Maryland has chosen to focus on the stabilization of existing communities and the revitalization of older communities as its primary goal for all its community development, economic development, and housing activities. This focus is also consistent with the goals of programs which finance revitalization activities, especially the elimination of slums and blight. Maryland will not only use its own resources as well as federal resources to accomplish this goal, but will leverage private (business and nonprofit) and local public resources, too.

Infrastructure

Public infrastructure is critically needed by many of Maryland's small towns and rural areas. Counties and municipalities face expensive requirements for basic infrastructure such as water and sewer systems. Maryland's non-entitlement jurisdictions often apply for infrastructure grants through the CDBG program to supplement limited local funds for critically needed improvements.

While local officials typically use federal and State aid for construction, funds are still needed for maintenance and operating costs. Performance of scheduled maintenance is important to Maryland's infrastructure. Deferred maintenance can cause a facility to deteriorate, ultimately raising the cost of infrastructure. The HPC working group meetings made it clear that funds to improve public infrastructure are still needed, and governmental mandates have placed a renewed emphasis upon infrastructure.

Before applying for CDBG funds, the proposed project must be included in the community development plan of the jurisdiction. Planning major infrastructure projects to revitalize or maintain downtown areas is a priority of the State, and the State will provide technical assistance to communities to plan appropriately for their needs. Without such planning, emergency situations can arise due to deteriorating water and sewer systems.

Public Facilities and Essential Human Services

Youth Centers, head start centers, day care centers, accessible buildings and other services and facilities are essential to healthy communities. Reducing poverty in Maryland is directly related to developing communities and neighborhoods through human and physical development. The demand for funds to construct shelters and day care centers that promote human development has been growing over the years Maryland has administered the CDBG program.

The survey of local jurisdictions, organizations, associations and other agencies gave the top public facility priorities to youth services and centers. Child Care centers and neighborhood centers were also high priorities.

Other Priorities

Two additional needs that ranked high in terms of priority were transportation assistance and job training.

Job training in Maryland is the responsibility of the Maryland Department of Labor, Licensing and Regulation (DLLR). Coordination of job training is handled by the Governor's Workforce Investment Board which is preparing a job training plan for the State. DHCD has been working, and will continue to coordinate its community and economic development efforts with GWIB's job training efforts, when possible.

Use of CDBG Funds

Given the needs as identified by various sources, DHCD has reviewed the list of eligible activities, and set CDBG priorities for the next year, and the next five years. The priorities, which are in the accompanying table, are distinct enough to channel funds to the areas of greatest need, but allow each jurisdiction sufficient latitude to determine its own development course.

Acquisition, clearance and demolition are routinely required to carry out CDBG projects, especially in the revitalization of downtown areas. Though these activities were not cited specifically by the Working Groups or in the survey, they are necessary to provide the community services that were stressed. (e.g. acquiring and clearing land to make room for a day care center.)

In addition, water and sewer, and street/sidewalk improvements are high priorities which insure health and safety and support housing and economic development. Accessibility needs are also high priorities of towns and counties across the State, especially since the Americans with Disabilities Act was enacted.

Over five years, the CDBG program expects to fund the following projects previously identified as the non-housing priorities of the State. Actual funding depends upon the applications received from the eligible jurisdictions.

STATE OF MARYLAND Estimated Community Development Activities (CDBG)		
CDBG ELIGIBLE ACTIVITY	# of Projects	Estimated Cost Over 5 Years (\$)
INFRASTRUCTURE		
Water/Sewer Improvements	25	\$7,500,000
Planning Studies	10	\$400,000
PUBLIC FACILITIES AND ESSENTIAL HUMAN SERVICES		
Youth Centers/Day Care/Family Support Centers/Adult Care/Centers for the Disabled	45	\$17,000,000
ECONOMIC DEVELOPMENT		
Acquisition/Clearance for ED	5	\$5,000,000
Commercial Rehabilitation	5	\$2,000,000
Capital Equipment	5	\$2,000,000

Planning	5	\$50,000
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The table below provides a ranking of all priority needs by CDBG eligible activity:

CDBG ELIGIBLE ACTIVITY *		PRIORITY NEED LEVEL
#	Description	H, M, L, N
1	Acquisition of real property.	High
2	Acquisition, construction, reconstruction, or installation of public facilities.	High
3	Code Enforcement.	High
4	Clearance, demolition, removal and rehabilitation of buildings and improvements.	High
5	Accessibility needs.	High
6	Payments to housing owners for loss of rental income incurred in holding units for relocated individuals and families displaced by activities under the program.	No such need.
7	Disposition of real property.	High
8	Provisions of public services.	Medium
9	Payment of the non-Federal share required in connection with a Federal grant-in-aid program undertaken as part of activities assisted under this title.	No such need.
10	Payment of the cost of completing a project funded under Title I of the Housing Act of 1949.	No such need.
11	Relocation payments for displaced individuals and organizations.	Low
12	Planning.	High
13	Reasonable administrative costs.	High
14	Assistance to public or private nonprofit entities, for: 1. acquisition 2. Construction/ rehabilitation, 3. Planning	High
15	Assistance to neighborhood based non-profit organizations for ED.	High
16	Development of energy use strategies.	Low
17	Assistance to private for profit entities to carry out an ED project.	High
18	Rehabilitation or construction of housing assisted under Section 17 of the United States Housing Act of 1937.	Low
19	Reconstruction of housing owned and occupied by LMI persons.	Low
20	Provision of Technical Assistance that is not planning (12) or Administrative (13).	Low
21	Housing services such as housing counseling, energy auditing, preparation of work specifications, loan processing, inspections, tenant selection, management of tenant based rental assistance.	Medium
22	Assistance to institutions of higher education to carry out eligible activities.	Low
23	Provisions of Assistance to public and private organizations, agencies and other entities to facilitate micro-enterprise development.	Medium
24	Maintain habitability of housing units acquired through tax foreclosure proceedings.	Low
25	Direct assistance to facilitate and expand homeownership among LMI persons.	Low

STRATEGIES, PRIORITY NEEDS AND OBJECTIVES

The State of Maryland is committed to providing decent housing, encouraging economic growth, and undertaking community redevelopment activities over the next year and the next five years.

OVERALL GOALS

The State's overall housing and community development goals for the next five years are:

- Revitalizing Communities
- Encouraging Homeownership, and
- Expanding the Supply of Decent Affordable Housing

Citizen participation in the Consolidated Plan assisted the Department to set forth issues that needed to be addressed to make a difference for individuals and families and the community they live in. Working groups were employed in addressing issues and areas of concern. Comments, suggestions, and recommendations from these groups provided the State with an overview of local needs and priorities and strategies to address them. Significant contributions were received from local and county governments, for profit and nonprofit developers, other State agencies, advocacy groups, public housing authorities, private citizens, and professional groups. Public hearings provided input from groups, individuals, and organizations that could not participate in the working groups because of time or distance. Surveys of the State's housing, economic development, and community development needs also helped us establish our priorities, as did data to the extent new data was available.

Strategies

Priority - Revitalizing Communities

Revitalization efforts must address economic and social issues as well as housing needs. The "holistic" approach to revitalization will maximize federal and State dollars and help assure the success of individual programs. Housing programs must complement economic and human resource efforts while providing safe, decent, and affordable housing to those most in need. Multi-family rental programs at the State level must favor those applications from areas targeted for revitalization and located in established communities (and designated growth areas) to assure that large scale housing development both strengthens existing communities and does not negatively affect the environment.

Strategy: Revitalization - Creation of a Maryland Equity Fund - One of the greatest challenges still facing community development groups is a lack of adequate capital to carry out essential revitalization activities. Without sufficient resources, great projects often get scaled back to become good projects. Other innovative efforts slated to begin this period have to be delayed until later periods and later funding rounds.

In an effort to infuse additional capital into Maryland's community development system, the Department has taken a lead role in organizing financial resources through establishment of a statewide equity fund. The fund would serve as a funding channel to help close the equity gap common in many development projects. Capitalization of the fund, currently targeted for

\$75 million, would come from a broad cross section of institutions including foundations, government, and the private sector. The Department has allocated state resources of \$100,000 to cover 50 percent of the costs of a feasibility study to investigate the viability of the fund. The remaining 50 percent was funded through donations from foundation, private, and non-profit sectors in Maryland. The results of the study will be fully reported out later this calendar year and will help chart directions for future planning and program development.

- **Implementation/measures:** Preliminary results from the feasibility study indicate that the project is viable. The study will be released after minor modification and comprehensive review later this summer. It is anticipated that two funds will be established: a Workforce Housing Fund and a Commercial Revitalization Fund. The success of the Funds will be measured by the amount of new capital that is able to be generated to help meet the state's need for additional workforce housing and commercial development. An additional outcome is the number of projects that these Funds are able to support.

Strategy – Revitalization - Usage of Bond Proceeds - Furthering our efforts to increase the availability of capital for community projects, the Department will put into place a system that will allow it to use bond proceeds to provide gap financing for small business development. This system will permit the Department to supply as much debt as demanded throughout the state. Through this approach, the Department will be able to expand its financing support of community-based small business development ventures which include pharmacies, florist shops, restaurants...it is anticipated the result will include an expansion of capital that will support more than 50 million in small business development annually.

- **Implementation/measures:** It is anticipated that the bond program will be fully in place in early 2006. Beginning in 2006, the program, in conjunction with its securitization potential, is expected to make available additional capital in the amount of \$5 million to support small business development throughout the state. In later years (2007-2010), additional funds in the range of \$5 - \$10 million will be made available to meet statewide demand for small business finance. These valuations represent estimates of the potential demand for low-interest financing for business startup and expansion.

Strategy: - Revitalization - Integration of Resources for Infrastructure - As financial resources become scarcer, it becomes more important that funds, particularly grant funds, are distributed more equitably. In an effort to improve the efficiency of funding resources for infrastructure development and improvements, and increase access for clients to infrastructure resources, DHCD will improve coordination and cooperation both within programs in the Department and across state and federal agencies. Strategies for this will include a single application for infrastructure funding, development of a priority funding list and meetings with other agencies to refer applicants to the appropriate funding source.

- **Implementation/measures:** DHCD is in the process of developing a work plan to accomplish this strategy. The work plan, to be completed during summer 2005, includes development of a working document addressing best practices for cross-agency coordination of capital financing products; and coordination of meetings of Maryland stake-holders providing opportunities for collaboration, joint funding, new process development and greater efficiencies for infrastructure finance.

Strategy: Revitalization -Expansion of Participation in CDBG Program - Increase ability of CDBG non-entitlement jurisdictions to identify and implement creative responses to community based needs through technical assistance and expanded partnerships. The Department seeks to identify communities that have not participated in the CDBG Program to provide assistance in determining community needs and resources to address them, build capacity to administer a CDBG grant or identify partners who can assist. Much of this work will be performed under the heading of a newly created community development training academy known as DHCD Catalyst.

- **Implementation/measures:** DHCD Catalyst will identify and offer assistance to targeted communities that have not previously participated in the CDBG Program. The Department will also conduct outreach including Catalyst workshops, one-on-one meetings, and other forms of technical assistance that will explain the CDBG program as well as discuss community development planning and project implementation. DHCD Catalyst will track the number of jurisdictions or persons receiving technical assistance or training to increase accessibility to resources for sustaining suitable living environments and creating economic opportunities.

Strategy: Revitalization - Participation in Priority Places – In order to foster well-planned new development, redevelopment in and around existing communities, and encourage land-use patterns that are good for the economy, quality of life and the environment, the Department will participate in the Priority Places Strategy. The goal of Priority Places is to focus state resources and activities on particular places and projects within designated Priority Funding Areas. State agencies will work together to positively impact the cost, timing and design of development.

The Interagency Coordinating Committee, which includes a representative from DHCD, will ensure the full participation and commitment of each state agency, with Coordinating Committee members serving as ombudsmen for Priority Places. The ombudsmen will have appropriate levels of authority and access to program directors to serve effectively in their dual roles of tapping internal resources and coordinating with other agencies. In addition, the State will assign a project manager to each Priority Place, and that person will serve as the primary state contact.

- **Implementation/measures:** DHCD staff will assist with review of Priority Places applications and implementation of approved Priority Places. Assistance provided by staff at the Division of Neighborhood Revitalization will help assure the success of local community development plans. Specific assistance provided by DHCD will vary depending on the community served, but may include:
 - Technical assistance identifying, applying for and securing funding from state and non-state resources
 - Coordination with other state, local and private entities to help implement Priority Places strategies
 - Assistance in refining local community development strategies such as Main Street revitalization plans and Community Legacy plans
 - Providing gap financing to help make projects occur make happen

Strategy: Revitalization - Resources. Maryland's resources will be targeted toward Priority Funding Areas (PFAs) to the greatest extent possible.

- **Implementation/measures:** Project/activity locations will be reviewed to ensure they are located in Priority Funding Areas to the greatest extent possible.

Strategy: Revitalization - Infrastructure. DHCD will give priority to funding infrastructure projects, in Priority Funding Areas. Such projects will help meet the critical health and safety needs of older communities.

- **Implementation/measures:** Project/activity locations will be reviewed to ensure they are located in Priority Funding Areas to the greatest extent possible.

Strategy: Revitalization - Day Care Centers, Youth Centers, and Adult Centers. DHCD also will give priority to day care, youth, and senior center projects, with CDBG funds. Funding for these projects will help provide needed community services in PFAs.

- **Implementation/measures:** The usage of CDBG funds for day care centers, youth centers and adult centers will be promoted. The number of households and persons with new or improved access to affordable services and facilities for the purpose of creating a suitable living environment will be tracked.

Strategy: Revitalization - Neighborhood Business Works Program. DHCD will expand the use of the Neighborhood Business Works Program, providing more opportunities for small businesses in State-approved, locally designated neighborhood revitalization areas. The creation of new businesses, or the expansion of existing businesses, will help revitalize and stabilize communities.

- **Implementation/measures:** This strategy will be accomplished using proceeds from the Bond Program as described above.

Strategy: Revitalization – Community Investment Tax Credit Program. DHCD will work to market the Community Investment Tax Credit Program (CITI) and encourage more businesses to purchase Maryland tax credits issued under the Program. Such efforts will expand the resources for non-profits to provide services to low-income households.

- **Implementation/measures:** DHCD is implementing a marketing plan to encourage more businesses to purchase tax credits. The marketing plan includes provision of marketing training to non-profits and publication of advertisements and stories regarding CITC in business-related publications. At least one DHCD Catalyst training will be held annually regarding marketing tax credits; the number of business-related publications in which CITC is advertised and/or stories about the program are published will be tracked, and the number of new businesses which contributed tax credits will be tracked.

Strategy: Revitalization - Interdepartmental Cooperation. DHCD will work cooperatively with other State agencies during the next five years in its effort to not only provide quality affordable housing, but to rebuild healthy communities as well. The Department will actively participate in interdepartmental groups including the Sub-cabinet on Smart Growth, and will

call together interdepartmental working groups as needed to foster community revitalization activities.

- **Implementation/measures:** In order to accomplish this strategy, DHCD will participate in the Smart Growth Sub-cabinet as well as monthly Smart Growth and Neighborhood Conservation Interagency Coordinating Committee meetings. The number of meetings attended will be tracked.

Priority - Encouraging Homeownership

Homeownership is often called the American Dream. Homeownership builds wealth, stabilizes communities, and encourages people to become more involved in the life of their communities. Households living in communities with higher rates of homeownership experience less crime, have higher educational test scores, have fewer teenage pregnancies, and have a generally higher over-all level of well being. The lower level of social problems in communities with higher homeownership rates saves the government money, as less money is required to fund services.

Strategy: Homeownership - Financing. DHCD will provide financing for primarily first-time homebuyers to purchase their own home. DHCD also will provide down payment assistance primarily to first time homebuyers.

- **Implementation/measures:** This strategy will be implemented using the Maryland Mortgage Program, Maryland Home Financing Program, and Downpayment and Settlement Expense Loan Program. The number of units will be counted and measured against the expected five-year goal (set at 13,200 over the next five years).

Strategy: Homeownership - Fair Housing Choice. DHCD will continue to carry out its fair housing strategy in order to promote equal housing opportunity for all of Maryland's citizens. This strategy includes information and education campaigns, inspecting State-financed construction projects to ensure compliance with Americans With Disabilities Act access requirements, and working with CHRBS to train the real estate community on fair housing requirements, among other actions.

- **Implementation/measures:** DHCD will carry out the strategy of promoting fair housing choice by contracting with fair housing organizations/CHRBS to conduct education and outreach campaigns. Compliance with ADA requirements will be made by DHCD staff. DHCD will track will report on fair housing activities undertaken by its contractor, as well as monitoring efforts taken by the department.

Strategy: Homeownership - Homeownership for Persons with Disabilities. DHCD will continue to operate its Homeownership for Persons with Disabilities Program. This program provides homeownership opportunities to persons who have disabilities and have been unable to access the private financing.

- **Implementation/measures:** This strategy will be carried out under the Homeownership for Persons with Disabilities Program. The number of units will be counted and measured against the expected five-year goal (set at 225 over the next five years).

Strategy: Homeownership – Homeownership for Section 8 HCVP Participants DHCD will provide homeownership opportunities to eligible and qualified participants through its Section 8 Housing Choice Voucher Program (HCVP) Homeownership Option. This program provides voucher subsidies toward a home mortgage and other costs similar to a rent subsidy.

- **Implementation/measures:** This strategy will be carried out by CDA and accomplished using the Section 8 Voucher program. DHCD expects that a total of 25 families, or five per year, will be assisted under this program. Families assisted will be reported.

Strategy: Homeownership - Creative Opportunities. DHCD will work to create innovative home ownership opportunities.

- **Implementation/measures:** This strategy will be accomplished on an ad-hoc basis as these opportunities depend on federal tax law, bond proceeds, reserves, insurance requirements and State and federal financing. Three creative opportunities expected to be implemented in the coming year include establishing a 35 year mortgage product, establishing a 40 year mortgage product, and having the Maryland Housing Fund return to the practice of issuing single-family insurance. DHCD will report these types of activities to HUD when they occur.

Strategy: Homeownership - Improve and Expand Marketing. DHCD will expand marketing of its homeownership programs.

- **Implementation/measures:** This strategy will be accomplished by the Office of Marketing, which will conduct marketing campaigns to promote the program. These marketing campaigns will be tracked and reported.

Strategy: Homeownership – Reduce Homeownership Delinquencies. DHCD will work to reduce single family delinquencies and foreclosures through proactive intervention measures.

- **Implementation/measures:** This strategy will be accomplished by both CDA and the Maryland the Maryland Housing Fund. This will include both support of housing counseling efforts, as well as work outs and other actions for loans in DHCD's portfolio. Success will be measured against comparable FHA delinquency and foreclosure rates.

Priority - Expand the Supply of Decent Affordable Housing

Many of Maryland's most vulnerable citizens need decent affordable housing. This includes the poor, the homeless, the elderly, and frail elderly, and persons with disabilities. Renters may pay excessive rent that puts them in danger of homelessness. Homeowners may lack the finances to repair health and safety problems in their residences. Some persons may require social services to allow them to age in place, or to mainstream into the community at large. Others simply need the most basic level of shelter to get off the streets before making the transition back into society.

Expand the Supply: Strategy - Rental Housing DHCD will finance quality affordable rental housing. DHCD will do this using private, federal, local, and State resources.

- **Implementation/measures:** This strategy will be accomplished using State funds, federal HOME funds, bond funds, and low-income housing tax credits, among other resources. The number of units will be counted and measured against the expected five-year goal of producing 13,500 affordable rental units in the next five years.

Expand the Supply: Special Needs Housing The State will create a Bridge Subsidy Demonstration Program for individuals with disabilities by reallocation of existing resources of funds from DHCD and other State agencies, for the purpose of providing short-term rental assistance for up to three years, while the individuals await for assistance such as a Section 8 Housing Choice Voucher.

- **Implementation/measures:** This strategy will be accomplished using funding from DHCD, DHR, DHMH, and other state agencies. DHCD will fund the first year, and other agencies will fund the program in future years. The number of units will be counted and measured against the expected five-year goal of 350 units for this effort.

Expand the Supply: - Special Needs Housing DHCD will participate in the review process of the State's surplus property inventory to assist with the identification of land appropriate for housing development, which includes workforce housing, senior housing and housing for individuals with disabilities, including those at Social Security (SSI) level income.

- **Implementation/measures:** This strategy will be accomplished working with DHR, DHMH, MDoA, MDoP, and the Maryland General Services Administration. Properties used for the purpose of affordable housing will be reported.

Expanding the Supply – Special Needs Housing DHCD will participate in an inter-departmental steering committee lead by the Department of Budget and Management to address service deliver efficiencies and 1) direct a portion of any State saving and/or 2) direct existing resources for the production of affordable housing for seniors and individuals with disabilities at SSI level income, regardless of age.

- **Implementation/measures:** This strategy will be pursued by DBM, DHCD, DHMH, DHR, MDoA and other appropriate agencies. As efficiencies are implemented they will be identified in Annual Plan updates with concurrent measures.

Expand the Supply: Strategy - Supporting Other Providers DHCD will support the applications of housing providers who provide affordable housing for which DHCD is not an eligible applicant, as well as those whose offer proposal consistent with the Consolidated Plan. This includes support for persons and organizations applying for Section 202, Section 811, Farmer's Home, and other federal funding.

- **Implementation/measures:** This strategy will be accomplished by DHCD's work with the Governor's Grants office, as well as supporting applications with Certificates of Consistency with the Consolidated Plan as appropriate. Information on successful grant applications will be reported.

Expand the Supply: Strategy - Lead Paint Abatement. DHCD will work with MDE, local governments, and property owners to help abate lead paint. Abatement of lead paint will help prevent the illnesses and developmental problems caused by lead paint poisoning of

Maryland's children. By incorporating MDE's rental property registration and risk reduction requirements into HUD Housing Quality Standards for approving properties under the Section 8 Housing Choice Voucher Program, DHCD will facilitate compliance with State laws covering rental properties built before 1950.

- **Implementation/measures:** This strategy will be accomplished using both State and federal funds. Units abated will be reported.

Expand the Supply: Strategy - Homelessness Assistance. DHCD will help support Maryland's Continuum of Care for assisting the homeless. Specifically, DHCD will use the ESG program to continue to support shelters and its own Transitional Housing Grant Program to build emergency and transitional shelters for homeless persons. DHCD also will use RAP funds to provide rental assistance to families and individuals as they achieve self-sufficiency.

- **Implementation/measures:** DHCD will report on the shelters assisted with the ESG program and the Transitional Housing Program, and the number of households assisted under RAP (expected to be 7,700 over the next five years).

Expand the Supply: Housing Rehabilitation. DHCD will use its Special Loans programs to rehabilitate owner-occupied and small rental properties. DHCD will also use federal programs like DOE's Weatherization program to make housing more energy efficient.

- **Implementation/measures:** This strategy will be carried out by DHCD. The number of households assisted will be reported (expected to be 7,395 over the next five years).

Expand the Supply: Tenant Assistance. DHCD will work to expand rental assistance available to low-income households. This will include applying for Section 8 Vouchers, as well as using the State's own RAP program to provide temporary rental assistance to needy households. Through a HOME Program grant, DHCD will provide security deposit assistance to certain families who, without this assistance, could not lease a unit offered by a landlord under the Section 8 voucher program.

- **Implementation/measures:** This strategy will be carried out by DHCD. Funding will be dependant on federal resources. The number of families assisted will be reported.

Expand the Supply: Supportive Housing. DHCD will continue to work with its sister agencies and local organizations to finance group homes for persons with mental illness, developmental disabilities, or other problems that require supportive housing.

- **Implementation/measures:** This strategy will be carried out by DHCD. Success will be measured against the five year goal of 285 beds.

Goals for Persons who are homeless or who have Special Needs

In addition to the goals above, the State will carry out other efforts to assist needy families and individuals, including the homeless and persons with Special Needs. While DHCD will be providing assistance to the homeless and persons with Special Needs as noted above, primary responsibility for assisting these individuals rests with the Department of Human Resources and the Department of Health and Mental Hygiene.

Homeless Goals:

Maryland has long been an advocate of the “Continuum of Care” approach of serving homeless persons and persons threatened with homelessness. The three principal features of Maryland’s Continuum of Care are:

1. **Preventing low-income individuals and families from becoming homeless, providing outreach to homeless persons, and addressing their individual needs;**
2. **Addressing the emergency shelter and transitional housing and service needs of homeless individuals and homeless families; and**
3. **Helping homeless people make the transition to permanent housing and independent living.**

Homeless persons to be assisted include homeless individuals, homeless families with children, the severely mentally ill homeless, homeless persons with alcohol or other drug addiction problems, homeless fleeing domestic violence, homeless youth, homeless individuals diagnosed with AIDS and other related diseases, and any other homeless individuals or persons at risk of becoming homeless. The Continuum is discussed in detail in the Annual Action Plan portion of this document. DHR has primary assistance for helping the homeless. The table below shows the estimated assistance DHR expects to offer the homeless in the next five years:

HOMELESS ASSISTANCE - DEPARTMENT OF HUMAN RESOURCES	
UNITS OF MEASUREMENT	Five Year Estimated Assistance
EMERGENCY AND TRANSITIONAL HOUSING SERVICES	
Bednights in Emergency Shelters	400,000
Bednights in Transitional Facilities	325,000
Shelters and Transitional Facilities	400
Emergency Services	135
HOMELESS PREVENTION	
Housing Counseling	2,500
Eviction Prevention	60,000
Service Linked Housing	10,000
EMERGENCY FOOD ASSISTANCE	
Occasions of Service Annually	2,250,000
Pounds of Food Distributed	22,500,000
DOMESTIC VIOLENCE PROGRAM	
Bednights for Domestic Violence Victims and Their Children	325,000
WOMEN'S SERVICES PROGRAM	
Bednights for Women and Children	425,000

Special Needs Goals:

The Department of Health and Mental Hygiene has primary responsibility for assisting persons with Special Needs, including individuals with Mental Illness, Developmental Disabilities, and Alcohol and Drug addictions. The tables below show the estimated assistance they expect to provide over the next five years. (Note that in all cases, an individual may receive assistance more than once over the five years, so there may be double counting.)

DEPARTMENT OF HEALTH AND MENTAL HYGIENE Mental Hygiene Administration	
UNITS OF MEASUREMENT	Five Year Estimated Assistance
Individuals Discharged from Inpatient Treatment – Adults	24,835
Individuals Discharged from Inpatient Treatment – Children	12,710
Persons with SMI receiving Employment Services	5,755
Persons with SMI receiving Residential Rehab	14,765
Number of Adults receiving psychiatric support	40,615
Number of Adults who receive public mental health	226,415
Number of Children receiving community based services	220,735
Number of Children receiving psychiatric support	45,670

DEPARTMENT OF HEALTH AND MENTAL HYGIENE Developmental Disabilities Administration	
UNITS OF MEASUREMENT	Five Year Estimated Assistance
Number of Individuals Served	110,100
Number of Individuals receiving home based services	38,915
Number of Individuals moved out of State Centers	65
Clients receiving community residential services	24,235
Clients in Day programs	27,785
Summer Program	9,410
Family Support Services	14,310
Individual Family Care	1,125
Individual Support Services	26,225
Behavioral Support Services	6,500
Community Supported Living Arrangements	5,895

DEPARTMENT OF HEALTH AND MENTAL HYGIENE Alcohol and Drug Abuse Administration		
UNITS OF MEASUREMENT	Programs/ Facilities	Five Year Estimated Assistance
Outpatients	65	135,000
Residential Clients	25	30,000
Halfway House	19	2850
Methadone Maintenance	18	35,000

The table below (corresponding to HUD Table 1C) is provided at HUD's request in an attempt to provide Performance Measures for HUD programs. HUD is currently in the process of making extensive revisions to its Performance Measurement process, so it is unlikely these measures will remain in effect. Note that the table has double counting, and that it asks for actual numbers of units produced which will not be available for at least five years. Also note that some measures reported here are repeats of measures stated elsewhere in the Plan.

Summary of Specific Homeless Needs Objectives				
	Specific Objectives	Performance Measure	Expected Units Over Five Years	Actual Units Over Five Years
	Homeless Objectives			
1	Preventing Homelessness			
1.1	DHR - Housing Counseling	Persons Counseled	2,500 ¹	2,500 ⁴
1.2	DHR - Eviction Prevention	Households Assisted	60,000 ¹	60,000 ⁴
1.3	DHR - Service Linked Housing	Households Assisted	10,000 ¹	10,000 ⁴
1.4	DHCD – Emergency Shelter Grants	Families Assisted	6,500 ¹	6,500 ⁴
2	Emergency and Transitional Housing			
2.1	DHR - Bednights in Shelters	Persons Sheltered	400,000 ¹	400,000 ⁴
2.2	DHR - Bednights in Transitional Facilities	Persons Sheltered	325,000 ¹	325,000 ⁴
2.3	DHCD – Transitional Housing Provided	Beds Financed	300 ¹	300 ⁴
2.4	DHR – Domestic Violence Program	Persons Sheltered	325,000 ¹	325,000 ⁴
2.5	DHR – Women's Services Program	Persons Sheltered	425,000 ¹	425,000 ⁴
3	Permanent Housing			
3.1	HUD – Supportive Housing Programs	Households Assisted	400 ²	400 ⁴

NOTE: The Permanent Housing goals only include programs specifically designed to provide permanent housing for the homeless. It does not include DHCD apartment units financed that the formerly homeless may rent.

Summary of Specific Homeless Needs Objectives (continued)				
Specific Objectives		Performance Measure	Expected Units Over Five Years	Actual Units Over Five Years
Special Needs Objectives				
1.1	DHCD – Special Needs Units in Apartment Complexes Financed	Units in Developments	500 ¹	500 ⁴
1.2	DHCD – Supportive Housing in Group Homes	Beds Financed	285 ¹	285 ⁴
1.3	DHCD/DHMH/DHR – Rental Assistance through Bridge Subsidy Program	Households Assisted	350 ¹	350 ⁴
1.4	DHCD – Homeownership for Persons with Disabilities	Homes Financed	225 ¹	225 ⁴
1.5	DHMH – Patients with Severe Mental Illness receiving Residential Rehab	Persons Assisted	14,765 ^{1,3}	14,765 ⁴
1.6	DHMH – Clients with Developmental Disabilities receiving residential services	Clients Assisted	24,235 ^{1,3}	24,235 ⁴
1.7	DHMH – Persons with Alcohol or Drug Addictions receiving rehabilitation through Residential Settings	Persons Assisted	30,000 ^{1,3}	30,000 ⁴
1.8	DHMH – Persons with Alcohol or Drug Addictions served through Half-way Houses	Persons Assisted	2,850 ^{1,3}	2,850 ⁴

1. Includes Assistance in Both Entitlement and Non-Entitlement Jurisdictions
2. Included Assistance in Non-entitlement Jurisdictions only, and would include “double counting” as projects are renewed.
3. May include double counting for clients assisted over multiple years
4. HUD has requested actuals, although this is impossible to determine as actual assistance will not be known for at least five years. Therefore, projected units are used.

Geographic Targeting

Data provided by HUD on housing need revealed there was a great similarity of need from jurisdiction to jurisdiction. For example, if the percentage of "small, very low-income renter families" was 65 percent statewide, virtually every jurisdiction within the State would be within a few percentage points of the Statewide average.

Since need exists throughout the State, the State will not target its funds to certain jurisdictions except as established by law. For example, the State's allocation of ESG and CDBG funds may only be used in non-entitlement areas. However, since there is a major emphasis on directing resources to areas in need of revitalization, and community revitalization is one of the State's three main goals, resources will be focused to the greatest extent possible on Priority Funding Areas. The Section 8 Existing Voucher/Certificate, Section 8 Moderate Rehabilitation, Community Services Block Grant (CSBG). Federal and State Historic Tax Credits, and Federal Historic Preservation Grants are except from both federal geographic targeting and State Priority Funding

Area (PFA) restrictions. However, the following federal resources will be directed toward specific geographic areas as described below.

Emergency Shelter Grant (ESG)

Emergency Shelter Grant funds are awarded through a formula established by the federal government. The State's allocation of ESG funds may be used anywhere in Maryland except Anne Arundel, Baltimore, Montgomery, and Prince George's Counties and Baltimore City. These five jurisdictions receive their own allocations of ESG funds directly from the federal government, thus are not eligible for the State allocation. Because of the nature of homelessness, the ESG program is exempt from PFA requirements.

Farmers Home Programs (All)

The U.S. Department of Agriculture's Farmer's Home Administration (FmHA) Programs were established to provide safe, decent, affordable housing to the Nation's rural and farm communities. All FmHA programs (502, 515, 523, etc.) are restricted for use in "rural areas" which include open country and places with populations of 50,000 or less. FmHA loans are exempt from State PFA requirements, however FmHA is working with the State to encourage the use of their programs in PFAs.

HOME Investment Partnerships Program (HOME)

The HOME program was established under the Cranston-Gonzalez National Affordable Housing Act of 1990. The State's allocation of HOME funds may not be used in Anne Arundel, Baltimore, Harford, Montgomery, and Prince George's Counties and Baltimore City. These jurisdictions are HOME entitlement jurisdictions and receive their own HOME funds directly from HUD. In non-entitlement jurisdictions, HOME funds are restricted to PFAs except where the Secretary determines that the project is necessary: a) to prevent or ameliorate neighborhood blight, b) to protect public health, or c) to alleviate personal economic hardship in an emergency situation.

Low-Income Housing Tax Credits

Federal Low-Income Housing Tax Credits may be used within the State of Maryland's PFAs. However, in accordance with federal law, states are required to develop allocation criteria which disperse the tax credits across the State through an IRS approved competitive process. Maryland has an approved competition process which awards points based, in part, on location. This process has ensured a fair distribution of tax credit properties in all areas of the State. Areas which receive points for geographic distribution vary year by year and competition by competition depending upon the number of applications received from Maryland's various jurisdictions. As per the approved process, all tax credit projects will be located in PFAs.

Maryland Appalachian Housing Fund (MAHF)

Maryland Appalachian Housing Fund resources are allocated to the State through the Appalachian Regional Commission. Federal law restricts expenditure of these funds to Allegany, Garrett, and Washington Counties in Western Maryland. MAHF funds are not restricted to PFAs in these counties.

Community Development Block Grant (CDBG)

Community Development Block Grant funds are awarded through a formula established by the federal government. The State's allocation of CDBG funds may not be Anne Arundel, Baltimore, Harford, Howard, Montgomery, and Prince George's Counties and the cities of Annapolis, Baltimore, Bowie, Cumberland, Frederick, Gaithersburg, Hagerstown and Salisbury. These jurisdictions receive their own allocations of CDBG funds directly from the federal government, and are not eligible for use of the State allocation. Use of CDBG funds in non-entitlement jurisdictions is restricted to PFAs, except where the Secretary determines that the project is necessary: a) to prevent or ameliorate neighborhood blight, b) to protect public health, or c) to alleviate personal economic hardship in an emergency situation or where an exception has been granted through the Department of Planning process.

Maryland Mortgage Program

Home loans for new homes made under the State's Maryland Mortgage Program will be restricted to PFAs, except for loans financed through the "On Behalf Of" (OBO) bond issue. Loans made under the OBO bond issue are not restricted to PFAs because the State is issuing the bond on the behalf of Maryland's counties. It is the responsibility of the counties to decide on the geographic targeting they will use for their OBO funds.

Housing Priorities

In addition to setting overall goals, the State also has developed specific goals for households to be assisted *who are not homeless or who do not require supportive services*.

After careful review, the State has chosen the following housing priority populations:

- 1. Extremely Low-Income Renters**
- 2. Low-Income Renters**
- 3. Extremely Low-Income Homeowners**
- 4. Low-Income Homeowners**
- 5. Moderate-Income Renters**
- 6. Moderate-Income Homeowners**
- 7. Middle-Income Renters**
- 8. Middle-Income Homeowners**

The State of Maryland will provide numerous types of assistance for both renters and homeowners, including acquisition and substantial rehabilitation of affordable housing, moderate rehabilitation of housing, preservation of the existing housing stock, lead paint abatement, emergency and transitional housing, supportive services, new homeownership opportunities, tenant assistance, innovative projects, and new construction of affordable housing

Basis For Assigning Priority Housing Needs

The State priorities for assistance are based on numbers of persons with housing problems, as well as the inability of households with problems to address their own needs. For example, extremely low-income renters have both the highest needs, as well as the least ability to address

them on their own. Consequently, they are the State's highest priority for federal assistance. Low-income renter households, who also have high need, are ranked second. Extremely low-income homeowners and low-income homeowners rank next, followed by moderate income renters and moderate income homeowners, who have the fewest housing needs.

It is also important to distinguish between the *percent* of households with housing needs and the actual *number* of households with housing needs. While large family renter households rank at the top in terms of percent of households with housing problems, the actual number of large households with problems is smaller than any other tenure group. For example, there are almost four times as many small family households with housing problems, despite the actual percent being lower. This is also true for elderly and other households. Despite the percentages of households with problems being somewhat lower, because there are so many more small, elderly, or other households, the actual number of people with problems is much higher for these groups than for large families. Consequently, we do not make any distinctions between households of different sizes.

PRIORITY HOUSING NEEDS			PRIORITY NEED LEVEL		
			HIGH, MEDIUM, LOW, NO SUCH NEED		
			0-30%	31-50%	51-80%
RENTER	SMALLRELATED	CB> 30%	H	H	M
		CB>50%	H	H	M
		SUBSTND	H	H	M
		OVRCRD	H	H	M
	LARGE RELATED	CB> 30%	H	H	M
		CB>50%	H	H	M
		SUBSTND	H	H	M
		OVRCRD	H	H	M
	ELDERLY	CB> 30%	H	H	M
		CB>50%	H	H	M
		SUBSTND	H	H	M
		OVRCRD	H	H	M
	ALL OTHER	CB> 30%	H	H	M
		CB>50%	H	H	M
		SUBSTND	H	H	M
		OVRCRD	H	H	M
OWNER		CB> 30%	H	H	M
		CB>50%	H	H	M
		SUBSTND	H	H	M
		OVRCRD	H	H	M

*By Definition, "other" renter households can not be overcrowded.
CB means "cost burdened"

OBJECTIVES

Because they have significantly different housing needs and problems, Maryland has established different objectives for renters and owners.

Renters

- **Objective:** The primary objective for assisting renters is to provide them with safe, decent, affordable housing.

To assist the tens of thousands of extremely low- and low-income renter families that have housing problems, DHCD will undertake the following activities over the next five years:

- Substantial rehabilitation
- Moderate rehabilitation
- New construction
- Preservation
- Tenant assistance, and
- Lead paint abatement

DHCD also will work to move renter households into homeownership (see the homeownership objectives below.)

As noted earlier in the Consolidated Plan there are many projects, which are eligible to prepay their mortgages. The Department is working to keep developments in the low-income housing stock so those very low-income households do not become homeless.

Also of concern to the Department is the possibility that Congress may not renew the Section 8 contracts within these developments. If that occurs, there will be a substantial need for thousands of units of affordable rental housing. Tenant based subsidies (most Section 8) have the advantage of reducing the amount of income paid for rent, **and** giving mobility to low-income households to move closer to jobs, schools, transportation, etc. Mortgage based subsidies are development specific, and while they offer affordable housing, they offer less choice to the tenant because the tenant has to live in that development rather than where he or she chooses. However, the disadvantage of tenant-based subsidies is that they work only as long as funds are appropriated year after year for contract renewals. Once funding is cut, the tenant's rent is no longer subsidized and the rent is no longer affordable. The advantage of mortgage-based subsidies, unlike rental subsidies, is that they last as long as the mortgage, which is typically 30 or 40 years, and require no new applications to keep housing affordable for the life of the mortgage.

DHCD's own programs, as well as the federal HOME and CDBG programs (among others), can be used to ensure the creation of affordable housing for long periods of time. For that reason, DHCD will continue to push ahead with the rehabilitation and construction of affordable rental housing using State and federal funds, while continuing to seek funds, such as Section 8, that provide tenant assistance and tenant choice.

In addition to paying excessive rent, extremely low-and very low-income renter households are the most likely to live in housing with lead paint problems. More than 54 percent of all persons who live in units with lead paint are in these two categories of renters.

Homeowners

- **The first objective of the State's homeownership activities will be to provide affordable homeownership opportunities to first-time home buyers.**
- **The second objective of the State homeownership activities will be to rehabilitate substandard housing occupied by extremely low, very low, and low-income homeowners.**

Activities to be undertaken to assist very low-income homeowners include:

- **home buyer's assistance to first-time home buyers**
- **acquisition assistance to first-time home buyers**
- **moderate rehabilitation assistance for existing homeowners, and**
- **mortgage insurance**

Homeownership is commonly called "The American Dream". It is difficult to estimate the number of persons who are currently renting who would like to become homeowners. However, assuming that just half of all renters would like to own their homes, that would mean about 300,000 households desire to purchase a house. Many low-income renters have enough income to purchase at least a "starter" home in most areas of the State. The needs of many low-income Maryland residents can best be met by giving them the opportunity to become first time homeowners.

Resources

In order to carry out its objectives, the State will dedicate a wide array of resources toward meeting the goals of Maryland's neediest households.

Federal Resources

DHCD expects to receive about \$8,005,956 in **HOME Investment Partnerships Program (HOME)** entitlement funds for housing next year. This is the only entitlement funding for housing the State receives. The amount of funds the State is expected to receive over the next five years is about \$40 million.

DHCD expects to receive about \$8.9 million in **Community Development Block Grant (CDBG)** fund for housing, community development, and economic development in the next year. The State expects to receive about \$45 million in CDBG over the next five years.

DHCD expects to receive about \$599,886 in **Emergency Shelter Grants (ESG)** funds in the coming year. This amount varies from year to year as the ESG allocation is based on the discretion of the Secretary of HUD. There are currently proposals in Congress to block grant

ESG funds with other homeless funds. Because there is so much fluctuation in funding for this program, DHCD does not have a five-year projection for funding.

DHCD administers the **Section 8 Voucher** program on behalf of many local jurisdictions. DHCD expects to administer \$60 million in Section 8 fund during the next year. The amount of funds the DHCD expects to administer over the next five years is approximately \$200 million assuming the State continues to administer Section 8 for the same number of jurisdictions it does presently.

Maryland receives an annual per capita allotment of **Federal Low-income Housing Tax Credits** every year. These numbers are based on the State's estimated population, and are updated yearly. The current allocation amount is \$1.85 per capita. Based on current population projections, the State should receive \$52 million in tax credits over the next five years.

The Federal **Mortgage Revenue Bond** (MRB) program provides funding for mortgages for first time homebuyers. MRB authority is derived from the Internal Revenue Service based on State population. The federal government also caps the issuance of MRBs. DHCD expects to use about \$150 million in MRBs authority over the next year for homeownership mortgages, and about \$300 million in rental housing mortgages. DHCD expects to use about \$2.49 billion in MRBs over the next five years. However, if DHCD and other housing organizations are successful in increasing the cap on MRBs, we will be able to issue over \$300 million in additional MRBs for homeownership and rental housing over the next five years.

In addition to the above programs, the State of Maryland has received funds under numerous competitive federal housing programs. In many instances DHCD cannot apply for these funds, however non-profit and profit motivated developers, community action agencies, public housing authorities and other organizations and individuals may apply for competitive funds. These numbers can vary widely from year to year.

Examples of competitive funding these organizations receive include competitive **Section 202** funds for supportive elderly housing, **Section 8 Vouchers**, **HOPE** funds for public housing, and **Section 811** homes to help persons with disabilities, among others. Funds were also awarded under other competitive programs, and the State strongly supports and encourages applications for funding under any federal program that helps meet the State's housing, community development, and economic goals.

In addition to HUD funds, the **Farmer's Home Administration** of the U.S. Department of Agriculture has also been a major supplier of rental housing in the past, primarily through new construction activities in rural areas. More than 4,000 rental units have been constructed in Maryland's rural counties using Farmer's Home funds. In addition, the Administration has operated a number of homeownership and rehabilitation programs that assist persons to buy their first homes and help existing homeowners rehabilitate their homes. Farmer's HOME also provides housing for migrant workers. DHCD has leveraged substantial HOME resources against Farmer's Home first time homebuyers programs to promote homeownership opportunities in rural areas where lending institutions have been unable to make homeownership loans. The State strongly supports the use of Farmer's Home funds for homeownership, rental housing, housing rehabilitation, and migrant housing.

Also from a non-HUD source, DHCD expects to receive approximately \$2.9 million in **U.S. Department of Energy Weatherization** funds during the next fiscal year. The amount of funds

expected over the next five years is about \$14,250,000. However, the amount of funds available under this program varies considerably from year to year, so the amount may be much higher or lower. These funds are used for energy related improvements, including providing insulation, weather-stripping, new windows, installation of furnaces, and other work that makes housing more energy efficient.

State Resources

The State of Maryland has substantial resources of its own which can help the State address its housing needs.

DHCD's **Housing Development Programs** finance multi-family rental housing developments of five or more units. Over the next five years, these programs expect to receive a total appropriation of about \$96 million.

DHCD's **Homeownership Programs** uses State funds to assist first time home buyers purchase their homes through help with settlement and closing costs, helps the elderly access the equity in their homes through reverse equity mortgages, and helps very low- income persons become first time home buyers. Homeownership Programs expects to receive appropriations totaling approximately \$37.5 million over the next five years.

DHCD's **Special Loan Programs** focus on two areas: rehabilitation of owner-occupied and small rental housing projects (four or fewer units) and providing group home loans for the developmentally disabled. DHCD expects to receive about \$36 million in rehabilitation funds over the next five years.

DHCD also operates its own **Housing Subsidy Programs**. The most important of these is the Rental Allowance Program, which provides rental assistance to very low-income families who are homeless or are threatened with homelessness. DHCD expects to receive about \$8.5 million in RAP funding over the next five years.

Accomplishments

DHCD as part of its efforts to provide more affordable housing opportunities to Maryland's citizens plans to produce an average of 6,200 housing units a year for the next five years, for a total of 31,000 units. This would include an average of 3,600 rental units per year, for a total of 18,000 over the next five years, and 2,600 homeownership units annually, for a total of 13,000 over the next five years.

This is based on the current State funding support with planned innovations and enhancements to the homeownership and rental housing programs noted above. These enhancements are innovations are largely predicated on improving DHCD's revenue bond programs.

DHCD is also required to provide information in the Consolidated Plan specifically about housing goals under the HOME program. The table below shows the number of units expected to be produced with HOME funds over the next five years:

HOME ASSISTED UNITS - FIVE YEAR PROJECTION						
TENURE TYPE	HH TYPE	HOUSING PROBLEM	0-30%	31-50%	51-80%	TOTAL
RENTER	Small Related	CB>30%	30	180		210
		CB>50%	40	205		245
	Large Related	CB>30%	50	30	25	105
		CB>50%	110	30	25	165
	Elderly	CB>30%	115	60		175
		CB>50%	205	60		265
	All Other	CB>30%	195	60		255
		CB>50%	280	90		370
OWNER		CB>30%	135	120	65	320
		CB>50%	135	120	65	320
		Substandard	335	200	155	690
		Overcrowded	30	20	5	55

CB is "cost burdened"

Estimated Five Year Projection – All Units			
Program	Household Type	Units	Total Units
Rental Housing	Family	7,155	13,500
	Elderly	5,805	
	Special Needs	540	
Rental Subsidy	Family	7,364	7,739
	Special Needs	375	
Homeownership	Family	13,200	13,425
	Special Needs	225	
Special Loans	Family	7,395	7,680
	Special Needs	285	
TOTAL			42,344

NOTES: DHCD's rental housing programs are competitive, estimates are based on past performance. Rental Subsidy, Homeownership, and Special Loans programs do not target by elderly versus family. Special Needs Units under rental housing are units produced through the QAP, under Rental Subsidy they are households assisted under the new Bridge Subsidy Program, under Homeownership they are households assisted under Homeownership for Individuals With Disabilities Program, and for Special Loans they are Group Home beds.

Section 215 goals

Section 215 goals are units that meet HOME program income limits for rental housing, and both HOME program income limits and HOME recapture provisions for owner-occupied housing. Because virtually all units DHCD finances under the rental housing programs have incomes

below 60% of median income, and all families assisted under the Rental Allowance Program earn less than 30% of median income, almost all rental units meet Section 215 goals. Most of our homeownership loans and special loans would meet the Section 215 income limits (80% of median income or less). However, because we do not recapture our funding when a homeowner's income increases (we raise our interest rates) most units financed under these programs do not meet Section 215 requirements. Consequently, our Section 215 goals for the next five years would include 13,500 rental units, and 7,739 rental subsidy units, but for homeownership would only cover the units in the HOME table above.

Obstacles to Meeting Underserved Needs

The greatest obstacle to meeting underserved needs is the lack of resources available to provide affordable housing. This is especially true in light of proposed federal budget cutbacks which will further reduce funds available for affordable housing for low and moderate-income families.

STRATEGY TO COORDINATE THE TAX CREDIT

Nationally, Maryland has been one of the most aggressive users of the Federal Low-Income Housing Tax Credit since the program's inception in the late 1980s. The program, which is used to provide tax credits to developers to construct or rehabilitate rental units for low-income persons, has resulted in thousands of units of affordable housing in conjunction with private and State, and to a lesser extent federal, financing.

The awarding of tax credits is extremely competitive, and has been subject to competition since 1991. DHCD has used all of its tax credits for the past five years and has been awarded recaptured tax credits from the federal tax credit pool. State funds for rental housing have also been used aggressively by the development community. As a result of this strong demand for State funds and the Department's desire to use the credits more effectively, all State funds and tax credits for rental housing have been awarded on a joint competitive basis since July 1, 1995.

In order to reduce paperwork, bureaucracy, and multiple applications for different sources of funds, DHCD's Community Development Administration (CDA) developed a single application for all sources of rental housing funds. These include the State's Rental Housing Production, Partnership Rental Housing, Elderly Rental Housing, Maryland Housing Rehabilitation, and Nonprofit Rehabilitation Programs, HUD's HOME Investment Partnership Program, and the Federal Low-Income Housing Tax Credit Program.

All of these funds are allocated on a competitive basis. Profit motivated and non-profit developers submit only one application to the Department for a specific rental housing project, and the application is ranked against all other applications. Competitions are conducted twice each year, although the Department reserves the right to have an additional competition if necessary due to the recapture of credits or other conditions. Funds are awarded to projects under whichever source the Department deems appropriate based upon the type of project the developer is proposing (elderly housing, family housing, etc.) and the financing needed to make the project viable (tax credits, HOME, State financing, or any combination thereof).

The policies and procedures for awarding points under the programs is outlined in the Uniform Application and the Qualified Allocation Plan that are posted on DHCD's website.

BARRIER REMOVAL

As illustrated by previous discussions, the primary barrier to affordable housing in Maryland is the lack of affordable rental and homeownership units. Many low- and moderate-income persons and households, especially the very low-income households, the homeless, the physically and mentally disabled, and the frail elderly, have problems finding and obtaining affordable housing. In addition, in the section of the Plan that identified barriers to affordable housing, DHCD identified areas such as building codes and local zoning as barriers to affordable housing, as well as permit fees, although as a State, Maryland has little control over these local conditions. However, the State of Maryland is still working to address these issues, and, in response, offers these barrier removal strategies:

Building Codes and Standards:

Maryland has been addressing issues of building Codes and standards through two strategies. The first is the adoption of Smart Codes, which provides for appropriate rehabilitation requirements of older structures so that they can be more easily and readily reused for housing and other purposes. The second strategy is the adoption of a statewide building code that standardized code requirements through all Maryland jurisdictions. In 2004, Maryland became only the 6th State (and the first since the late 1990s) to receive certification from HUD that its building codes and standards are model codes that reduce inefficiencies and help make housing more affordable.

Local Zoning:

In response to concerns about zoning and its restrictions, the Maryland Office of Planning has developed a typology that examines development capacity at the municipal and county level. This typology will help localities determine if they have zoned for an adequate supply of affordable housing to support their workforce. In addition, the Governor's Housing Policy Commission has called for State and local government agencies to utilize the Development Capacity Task Force Memorandum of Understanding, executed by the Maryland Municipal League, Maryland Association of Counties and Maryland Department of Planning as a mechanism for the development of a housing plan for each jurisdiction in Maryland. Among other items, the housing plans may address the supply of land properly zoned for residential purposes and sufficient to accommodate growth that equitably address affordability for all Maryland citizens at all incomes, includes workforce families/individuals, seniors, individuals with disabilities below Supplemental Security Income level and the homeless.

Housing Acquisition Finance Requirements

In response to this barrier, DHCD is offering a number of strategies in both the homeownership and rental housing areas.

In terms of homeownership, DHCD will start offering new mortgage products, including new 35 year and 40 year mortgage products for first time homebuyers. In addition, the Department finances down payment assistance, and will be creating a new down payment program with local businesses (see the Annual Action Plan for more detailed

information.) DHCD will also operate a Section 8 Homeownership Voucher program, to help persons purchase their homes.

On the rental housing side, the State will offer a new Bridge Subsidy program for individuals with disabilities. This program will provide rental assistance for up to three years while disabled persons await permanent housing assistance through the Section 8 Voucher or other programs. DHCD will also work with Public Housing Authorities to improve their housing stock. This will be done through the issuance of bonds. In addition, DHCD will pursue two recommendations by the Governor's Housing Policy regarding rental housing. One of these will be to a Housing Trust fund at the State level. The other will be to work with other State agencies in regard to the State's surplus properties to identify properties to be used for workforce housing, including senior housing, and housing for individuals with disabilities.

Fair Housing Choice

DHCD and the State of Maryland will continue to work to provide all Marylanders with fair housing choice. In addition to carrying out the goals outlined in its Analysis of Impediments to Fair Housing Choice, which focus on education activities by DHCD and enforcement activities by the Maryland Commission on Human Relations, the State will continue to operate programs that allow all of the State's citizens to have fair housing choice.

DHCD's homeownership programs primarily assist low and moderate income first time homebuyers. Based on our loan information from 2004, about 50 percent of all of DHCD's mortgages go to minority households, allowing those households to participate in the American Dream of homeownership. DHCD also assists persons with disabilities purchase their own homes through its Disabled Borrowers program, a program it will continue in the coming years.

Fair Housing choice is also offered to Marylanders through the State's rental housing programs. All of DHCD's rental housing developments have affirmative marketing requirements. In addition, when financing properties, DHCD gives extra points in its rating and ranking system to developers who exceed the federal requirements for accessible housing. This has led to a more than doubling of accessible units financed in the last two years.

The State also maintains an affordable housing registry, which lets renters know where and what type of affordable rental housing is available to them. This includes information on both family and elderly projects, as well as information on unit size and accessible units. DHCD works pro-actively with advocacy organizations for the disabled to "get the word out" that accessible housing units are being constructed as well, to help reduce waiting lists for persons with disabilities in their search for affordable housing.

Removing Barriers Between State Agencies

DHCD's success rate in working with other State agencies, as well as local governments, is high. However, some barriers to service delivery exist. The biggest barrier that exists is between DHCD and the agencies which assist persons with disabilities. DHCD builds affordable housing units for persons with Disabilities; however, the Disabled community sometimes has difficulty getting their clients into those units.

DHCD is currently participating in a working group set up between DHCD, MDoD, DHMH, and DHR to better coordinate the gap between production and client linkages. This newly formed group will develop policies and procedures to make sure persons with disabilities will utilize the housing resources made available to them.

DHCD is also participating in other working groups and programs with other agencies. DHCD is working closely with MDE on developing and implementing the State's 10-year Plan to eliminate lead paint (and which are reflected in the Consolidated Plan), and is also working with DHR on its 10-year Plan to eliminate homelessness, as well as help carry out the continuum of care. DHCD also participates in the Governor's Sub-cabinet on Smart Growth, and the Interagency Council for the Non-Profit Sector along with DBED, DLLR, DHR, DHMH and the Secretary of State. In addition, DHCD works with all other agencies in State government to coordinate and improve delivery of housing and services through the Governor's Grants Office.

LEAD BASED PAINT HAZARD REDUCTION

DHCD has a long history of financing for the purpose of reducing lead hazards in owner-occupied and rental housing in Maryland. The State's Lead Hazard Reduction Loan and Grant Program (previously know as RELAP) has been in existence since 1987. This program provides low interest and/or deferred loans and grants to assist property owners and day care centers with risk reduction work related to lead.

DHCD's primary partner in these efforts has been the Maryland Department of the Environment (MDE). MDE has been the lead agency Maryland's Plan to Eliminate Childhood Lead Poisoning by 2010. The plan addresses lead poisoning prevention statewide, with an emphasis on highest risk areas in Baltimore City, Lower Eastern Shore, and Western Maryland. States must have an Elimination Plan to be eligible for future lead poisoning prevention funding or lead hazard reduction funding under the federal Centers for Disease Control (CDC), Housing and Urban Development (HUD), or Environmental Protection Agency (EPA) Lead grant Programs.

Maryland has been implementing a strong primary prevention program since 1996. Maryland law focuses on pre-1950 rentals as the highest risk housing. It sets a standard for hazard reduction, confirmed by a third party inspector, to be met before each unit turnover. Since 1995, over 100,000 lead hazard reduction certificates have been issued statewide by accredited private sector lead inspectors, with over 55,000 of these certificates in Baltimore City. Approximately 60% of rental units built before 1950 are now registered with the Maryland Lead Rental Registry, which provides annual first-class mail updates on lead hazard reduction requirements to all registered owners. The Lead Registry and inspection certificates database are also used by MDE Lead Enforcement to increase compliance with the Maryland Lead Hazard Reduction Standard. Compliance with registration and inspection certificate standards was recently added as a requirement for access to rent court, and for approval of payment under Section 8.

Other Maryland efforts require blood lead testing at ages 1 and 2 years of age for day care and school entry, support statewide outreach, and integrate lead reduction into routine housing grant and loan programs. DHCD and other State and Baltimore City agencies are coordinating with national and regional HUD efforts under the "safe and Healthy Communities", "Operation Clean House", and "Operation Healthy Homes" initiatives. Enforcement will be coordinated among DHCD, MDE, the Baltimore City Health Department and HUD to assure that enforcement targets highest risk areas, and is integrated with on-going State and City enforcement efforts.

MDE Lead Poisoning Prevention Program staff assembled an Elimination Plan Working Group with representatives of state and local agencies, non-profits, and community groups. The Working Group developed the first draft of the assessment, gap identification, and proposed action plan using the framework suggested by CDC. The Maryland Lead Poisoning Prevention Commission ("Lead Commission") participated in reviews of subsequent drafts. The plan's current version was developed through a series of reviews and edits by the whole Working Group. During FY 2005, Baltimore City Health Department will take the lead on developing a smaller Elimination Plan specifically for Baltimore City. The Statewide and City plan will be linked for coordination of services and maximizing resources.

The Statewide plan will be implemented by state and local agencies and non-profits. Each responsible party will do their own internal reporting and evaluation as usual, with the Lead

Commission responsible for general oversight. The Lead Commission will report on overall progress and needs to the Governor and Legislature.

The Elimination Plan includes an Assessment, Gaps, and Strategic Work Plan. Proposed actions for the next five years are organized in tables. Greatest detail for the action plan is in the first two years, with very general concepts listed for the out-years. Key areas of action will be to expand Primary Prevention efforts for both lead source control and outreach, and to identify and integrate additional resources.

This Plan to Eliminate Childhood Lead Poisoning is considered a “work in progress.” Revisions are to be expected over the next years. Highlights of the Plan are as follows:

Component/ Five Year Goal	Major Activities	Responsible Parties (lead in bold)	Time-frame
<p>1. Surveillance Maryland citizens will have appropriate access to a blood lead surveillance system that meets the CDC surveillance system standards in use and dissemination of data</p>	<p>a. Quarterly data sharing meetings of MDE, DHMH, BCHD and other interested parties</p> <p>b. Ongoing assessments of quality assurance of CLR data by MDE and Lead Commission</p> <p>c. Electronic lab reporting to CLR will increase to 90%</p> <p>d. Baltimore City portion of CLR data will be available through the BCHD Electronic Immunization system</p> <p>e. MDE CLR will distribute daily blood lead reports electronically to all jurisdictions.</p>	<p>MDE</p> <p>MDE, Lead Commission</p> <p>MDE, private labs</p> <p>BCHD, MDE</p> <p>MDE</p>	<p>Yr 1</p> <p>Yr 2</p> <p>Yr 3</p> <p>Yr4</p> <p>Yr5</p>
<p>2. Case Management Each jurisdiction will have access to resources and enforcement for prompt reduction of the identified lead hazards in the home of a child exposed to lead or for prompt relocation of the child to a lead safe home.</p>	<p>a. BCHD CLPPP will perform 80% of health case mgmt activities within the timelines of the BCHD/MDE protocol and finalize procedures to assess and document public health interventions.</p> <p>b. BCHD CLPPP will perform 80% of environmental investigations within the time period in the MDE/BCHD protocol, and implement procedures to assess and document public health interventions.</p> <p>c. Local authorities will propose changes to laws, regulations to institutionalize the prompt environmental treatment of a residence, child day care or early childhood learning facility in response to the identification of an EBL caused by lead paint hazards.</p> <p>d. Statewide public health interventions to assure reduced exposures within 3 months for a child with EBL of 15 mcg/dL .</p> <p>e. Statewide public health interventions to assure reduced exposures within 3 months for a child with EBL of 10 µg/dL .</p>	<p>BCHD, MDE</p> <p>BCHD, MDE</p> <p>Lead Commission, MDE</p> <p>Lead Commission, MDE</p> <p>Lead Commission, MDE</p>	<p>Yr 1</p> <p>Yr 2</p> <p>Yr 3</p> <p>Yr 4</p> <p>Yr 5</p>
<p>3. Blood Lead Testing Young children will receive appropriate lead risk screening and blood lead testing.</p>	<p>a. Maryland will improve blood lead testing among children aged 12 – 36 months who reside in the targeted areas by 5%, and by 2% in Medicaid enrolled children</p> <p>b. Maryland will heighten education and outreach to health care providers to increase testing rates, especially Medicaid providers</p>	<p>DHMH</p> <p>DHMH</p>	<p>Yr 1</p> <p>Yr 2</p>

	<p>c. Re-evaluate the effectiveness of current laws and policies re testing and screening.</p> <p>d. High-risk jurisdictions that show less than an 80% testing rate for 1-2 yr old children in targeted areas will increase testing by 2 %.</p> <p>e. 80% of children aged 12 – 36 months of age in at risk area or at-risk population will have received a blood lead test.</p>	<p>DHMH</p> <p>DHMH</p> <p>DHMH</p>	<p>Yr 3</p> <p>Yr 4</p> <p>Yr 5</p>
<p>4. Coordination and leveraging resources All organizations involved in residential housing will be knowledgeable about the lead primary and secondary prevention laws, regulations and resources.</p>	<p>a. At least one proposal to a local foundation for funding for outreach or hazard reduction will be submitted.</p> <p>b. Outreach and education re lead law will be conducted for judges, attorneys, realty management associates in high risk areas.</p> <p>c. Explore and expand use of CDBG funds for lead hazard reduction.</p> <p>d. MDE, DHCD, DHMH co-sponsor Healthy Homes regional meetings for local health and housing agencies.</p> <p>e. Implement a statewide Healthy Homes media campaign including lead awareness, prevention resources, and action steps.</p>	<p>Coalition, MDE, DHMH</p> <p>MDE, Legal Aide, Coalition</p> <p>DHCD</p> <p>DHCD, DHMH, MDE</p> <p>MDE</p>	<p>Yr 1</p> <p>Yr 2</p> <p>Yr 3</p> <p>Yr 4</p> <p>Yr 5</p>
<p>5. Primary Prevention All owners will use lead safe work practices and procedures to renovate or maintain their pre-1978 residential properties at the appropriate standard of care.</p>	<p>a. Increase the number of pre-1950 rental units in Baltimore City and Lower Eastern Shore which are registered with the MD Lead Rental Registry by 5 %.</p> <p>b. 55% of pre-1950 rental property owners will be in compliance with the 100% phase-in requirement of the MD Lead Law.</p> <p>c. MDE will have web-based access to current registration and certificate information on the MDE website.</p> <p>d. MDE Enforcement emphasis will shift from compliance assistance to enforcement regarding the 100% phase-in rule.</p> <p>e. MDE and MD Dept of Labor, Licensing and Industry will include lead safe work practices in home renovation contractor licensing.</p>	<p>MDE</p> <p>MDE</p> <p>MDE</p> <p>MDE</p> <p>MDE, DLLR</p>	<p>Yr 1</p> <p>Yr 2</p> <p>Yr 3</p> <p>Yr 4</p> <p>Yr 5</p>

BCHD	Baltimore City Health Department
CDBG	Community Development Block Grant
CDC	Centers for Disease Control
CLR	Childhood Lead Registry
Coalition	Coalition to End Childhood Lead Poisoning
DHCD	MD Department of Housing and Community Development
DHMH	MD Department of Health and Mental Hygiene
DLLR	MD Department of Labor, Licensing and Regulation
EBL	Elevated Blood Lead level
MDE	MD Department of the Environment

A complete copy of the State's Plan to Eliminate Childhood Lead Poisoning by 2010 is available from MDE.

ANTI-POVERTY STRATEGY

Maryland is one of the country's wealthiest states, with a median household income of \$75,250 as of February, 2005. Still, about 9 percent of Marylanders lived in poverty.

State programs and policies aimed at reducing poverty are driven by several factors:

- A high number of children living in poverty
- High illiteracy rates and dropout rates among inner city students
- High concentrations of poverty in the State's older, distressed neighborhoods
- The movement of jobs away from sites where people in poverty tend to live
- A job market which increasingly demands skilled workers

No single tactic will address the problem of poverty in Maryland. Thus, DHCD, in coordination with other State and local government agencies, Community Action Agencies (CAAs), other nonprofit organizations and advocacy groups has developed a broad strategy to address the complex causes of poverty and needs of low-income families and individuals.

Key components of the State's anti-poverty strategy include:

- Providing quality education and job training
- Focusing economic growth and revitalization on areas where persons in poverty are most likely to reside
- Increasing the supply of affordable housing
- Creating jobs
- Providing supportive services such as transportation, health care, and child care to assist low-income individuals in getting and keeping jobs

Education and Job Training

Investing in education is essential to giving Maryland's low-income residents the tools to lift themselves out of poverty, to support the State's economic development, and to improve the quality of life for all Maryland citizens. Maryland residents will be unable to compete in the labor market without quality education. Similarly, Maryland needs a skilled, well-educated labor force to attract businesses and remain competitive. Recent State initiatives will mean less crowded classrooms, safer schools and improved education. Maryland's capital budget for the current state fiscal year continues to commit resources to renovating and building schools and higher education facilities.

The federally funded Head Start program which provides education to pre-schoolers and is operated by the Community Action Agencies (CAAs) is also an important element in Maryland's Anti-Poverty Strategy. It is designed to increase the ability of disadvantaged three and four year old children by providing comprehensive programs to meet their educational, social, health and nutritional needs. It also assists those families of the enrolled children with social services, educational and training. In federal fiscal year 2004, 8 of Maryland's 17 CAAs operated Head Start programs, which helped over 2,800 children. This investment in pre-school education by the CAAs is expected to improve the children's ability to learn and, hence, increase high school graduation rates and college enrollment. Such education, in turn, should reduce the rate of

crime, welfare dependency, and teenage pregnancy, while raising the participants' lifetime earning potential.

Recent strides in Maryland, and throughout the country, have dramatically reduced the welfare rolls and increased the number of former recipients who are employed. Many of these former recipients are "fragile" members of the labor force. Often they have limited skills and are unable to obtain employment that pays a "living wage." They do not live where most of the best job opportunities are, and often have to take public transportation, if available, to get to work. Public transportation takes an excessive amount of time to get both to and from work. If they own automobiles, often the vehicles are old and not in good condition. Also, child care is difficult to find if a child is sick or odd hours are needed. Many also do not have health insurance. Finally, housing costs can be prohibitive if affordable housing is not available.

The State is and will continue to assist persons living in poverty to reach self-sufficiency. Programs that are available include:

- Health insurance for the children of low-income families who do not have health insurance.
- Benefits for day care and/or transportation assistance through DHR.
- Housing assistance through DHCD.

It may not be realistic to expect that people seeking to get out of poverty can go directly into a job paying a living wage. However, employment situations which enable people to acquire on the job training and skills, as well as confidence in their abilities, and which will lead to promotions to positions that do pay a living wage should be encouraged.

Focusing Economic Growth and Healthy Communities

The State's efforts to reduce sprawl and encourage the revitalization of deteriorating areas are designed to benefit low-income families. This initiative encourages economic growth to occur in existing developed areas and in areas that have already been planned for development. This will result in job opportunities arising closer to where low-income workers live, reducing commuting time. Reversing the deterioration of older communities will also encourage economic development in these revitalization areas and will promote a better income mix among residents as the improvements in an area make it more attractive to higher income families. Creating healthy communities will require coordinated efforts among state agencies, such as the Departments of Housing and Community Development, Economic Development, Education, Human Resources, Juvenile Justice and Public Safety and Corrections. In addition, local government and private sector partners will be requested to help create these healthy communities. Coordination is discussed in more detail in the next section of the Plan. Programs that are directed to helping revitalize communities include:

- The Department of Housing and Community Development's Neighborhood BusinessWorks Program which provides financial assistance to new and expanding small business in Designated Revitalization areas
- The Department of Housing and Community Development's Community Investment Tax Credit Program which provides income tax credits to nonprofit organizations that can be exchanged for contributions from businesses; projects funded by these tax credits help the low income residents of designated revitalization areas.

- The Department of Housing and Community Development's Capital Access Program which will help fund loan guarantee accounts that will enable financial institutions to assist small business development.
- The Department of Housing and Community Development's Community Legacy Program which is designed to assist urban neighborhoods, suburban communities and small towns that are experiencing decline and disinvestment, but have the potential, with modest public and private investment, to be vibrant places to live and work.
- The Department of Housing and Community Development's Main Street Maryland Program which is a comprehensive downtown revitalization program that strives to strengthen the economic potential of Maryland's traditional main streets and neighborhoods.

Linking Services

One of DHCD's major partners in the fight against poverty at the local level is its 17 Community Action Agencies. The CAAs use holistic strategies involving both physical and human development to help Maryland's low-income families become self-sufficient. They are instrumental in leveraging private and public (local, State and federal) funds in excess of \$80 million dollars annually to offer comprehensive services to over 175,000 low-income citizens. The CAAs' programs can be grouped into six categories and include employment, housing, education, emergency assistance, nutrition, and linkages/referral.

LOW-INCOME MARYLANDER'S SERVED BY CAAs	
SERVICES	NUMBER OF PEOPLE SERVED
Employment	1,755
Housing	15,787
Education	22,804
Emergency Assistance	78,937
Nutrition	22,804
Linkages/referrals	33,329
TOTAL	175,416

These six categories include numerous programs and activities. CAAs are also providers of emergency assistance through Constant Care Community Health Centers, the Maryland Energy Assistance Program, eviction prevention assistance, emergency shelter programs, and crisis intervention. Along with the Center for Poverty Solutions, the CAAs provide food and activities centered on nutrition. These activities include summer feeding programs, commodity distribution, holiday food distribution, nutrition education, full-service food assistance and Women, Infants and Children (WIC) assistance. In the rural areas, many of the CAAs are the major providers of affordable housing and housing counseling services. Programs and services include: housing development, homeownership programs, new construction of affordable housing, Section 8 rental assistance, self-help housing programs and transitional shelters. Linkages and referrals CAAs provide include transportation to medical facilities, rural transportation, utility service cutoff protection, credit union management, and volunteer services.

COORDINATION EFFORTS

Interagency Cooperative Efforts

DHCD engages in cooperation with many of the other State agencies. Examples of such cooperation include assisting persons with HIV/AIDS with the AIDS Administration of DHMH, coordinating lead paid abatement policies and programs with the Maryland Department of the Environment, working with the Department of Human resources to address the needs of homeless persons, and providing housing assistance to persons with disabilities through the Maryland Departments of Aging, Disabilities, and Health and Mental Hygiene..

DHCD also works cooperatively with DHMH's AIDS Administration to help assist persons with HIV/AIDS. This has occurred to two ways. First, DHCD has used its allocation of HOME funds to help persons with HIV/AIDS pay their rent through a tenant assistance program. Second, DHCD and DHMH work together to administer the Housing Opportunities for Persons With AIDS (HOPWA) program funding to assist persons with HIV and their families. In this instance, DHMH provides health and medical assistance and DHCD provides housing assistance in the form of voucher payments. This holistic approach helps ensure persons with HIV/AIDS receive the health and housing assistance they need.

DHCD works closely with the Maryland Department of the Environment (MDE) on lead paint abatement issues. DHCD has adopted MDE's lead abatement guidelines, and operates all of its housing programs, including the Section 8 Voucher program, to MDE standards for lead abatement.

DHCD's work with the Department of Human Resources focuses primarily on working with the homeless. DHCD participates on the Governor's Advisory Board on Homelessness, and operates some of its programs, such as the Emergency Shelter Grant program and the Transitional Shelter and Housing Grant Program in conjunction with the policies set forth in the State's Continuum of Care.

Another example of interagency coordination efforts carried out by DHCD with partners is the Homeownership for Persons with Disabilities Program. This effort includes DHCD, DHMH, MDoD, and the Maryland Center for Community Development. Working together, these agencies provide homeownership opportunities for persons with disabilities by providing them support services and affordable housing financing so persons with disabilities can become homeowners.

State-Local Coordination Efforts

In addition to working with other State agencies, DHCD also works with local partners, including local governments, for profit and non-profit developers, individuals, and businesses to help meet the State's housing, economic, and community development needs.

Capacity Building

The purpose DHCD's Operating Assistance Grants Program is to help nonprofit housing developers learn how to produce and rehabilitate housing. Both nonprofit organizations engaged in the production of affordable housing, and newly formed nonprofits are eligible to receive assistance. At the beginning of each fiscal year, up to one percent (1%) of the total

aggregate amount of budgeted moneys in DHCD's Rental Housing Programs Fund, Homeownership Programs Fund and Special Loan Programs Fund are made available to eligible nonprofit organizations. Additional funds appropriated from any other source also may be included, such as HOME funds for CHDOs.

Planning and Technical Assistance

DHCD supports its CDBG program applicants and grantees through the assistance of Community Representatives. The CDBG staff also offers technical assistance in the development of proposed projects and in the implementation of funded activities. Through coordinated efforts with other State and federal agencies, grantees are able to leverage a significant amount of other funding and develop projects that meet CDBG readiness criteria.

DHCD engages in planning and technical assistance for a range of community development activities. Emphasis is placed on commercial revitalization, economic development, housing development, and community facilities/infrastructure. Planning grants are awarded to local jurisdictions competitively.

Commercial Revitalization

Through its Maryland Main Street Program, DHCD also assists local government officials and downtown business leaders to develop and implement long term downtown revitalization programs. Assistance covers: (a) organization and goal setting, (b) design assistance, (c) promotions, (d) economic restructuring, and (e) institutionalization of the revitalization program.

Generally, the Center helps to identify the business leaders in the central business district and the revitalization needs and opportunities of a specific community. The leaders are organized as a business association or other organization, and DHCD assists the association to develop an action program. DHCD also provides technical assistance to implement the action plan. For example, DHCD provides design options for facade rehabilitation to individual business owners and helps to arrange financing. In addition, DHCD helps to organize the business association into a commercial district management authority, which effectively institutionalizes, and manages the revitalization program, if requested.

DHCD Catalyst

Last but not least, in order to work better with its local partners, including local governments, nonprofits, businesses, and others, DHCD routinely offers training through DHCD Catalyst. This training is customized to the individual needs of the partner, business, or nonprofit. The training is done in cooperation with many other agencies: DHCD's partners in Catalyst include:

- **Enoch Pratt Free Library** which offers free workshops for individuals, nonprofits, and businesses on starting and operating a nonprofit or small business,
- **Maryland Center for Community Development** which provides training and technical assistance to organizations that are doing homeownership and housing counseling, or housing and community development including economic development,
- **Maryland Association of Nonprofit Organizations** which provides training and technical assistance, including in depth consulting services and customized training, on all aspects of nonprofit governance and management,
- **Maryland Small Business Development Center** which provides low cost training and no cost consulting to small businesses throughout Maryland,

- **Microenterprise Council of Maryland** which provides technical assistance and resources to organizations, agencies and municipalities assisting or wanting to assist entrepreneurs starting or expanding micro businesses,
- **Montgomery Chamber of Commerce** which offers a one-stop shop for free business plan consultations, low-cost training, access to finance, business education and access to prospective clients and customers in Montgomery County,
- **Morgan University's Entrepreneurial and Assistance Center** which utilizes the support and participation of Morgan University sources to assist assists entrepreneurs and aspiring entrepreneurs. The target populations for the EDAC are minorities, women, and micro enterprises,
- **SCORE of Maryland** which s a volunteer organization providing business counseling without charge,
- **Small Business Resource Center** which provides technical assistance to microenterprises, small business and organizations who are looking for business assistance,
- **Neighborhood Reinvestment Corporation** which provides national and regional training and capacity building for community development leaders, practitioners and professionals,
- **National Main Street Center** which provides technical assistance and information services in the field of commercial district revitalization to housing and community development groups, **University of Maryland School of Social Work** which provides organizational development, community building and fundraising assistance, and the
- **University of Maryland Institute for Governmental Services** which supports local officials by providing education and training, applied research and technical assistance to local officials and nonprofit community development organizations.

PUBLIC HOUSING RESIDENT INITIATIVES

RESIDENT INITIATIVES

HUD asks states in this part of the Plan to discuss public housing resident initiatives the state will undertake to encourage residents to become more involved in the management of public housing and to participate in homeownership.

Management

DHCD's Community Development Administration (CDA) occasionally serves as a Public Housing Authority (PHA) in a limited capacity, until a local jurisdiction forms a PHA. Typically, CDA helps finance a housing development, and then turns that property over to a local jurisdiction, once it receives final approval to form a PHA from HUD. Because DHCD does not maintain long-term control over public housing units, staff has not developed a plan to assist tenants in managing public housing. We do, however, encourage local PHAs to help tenants become more involved in management of their units. Further, under the Partnership Rental Housing Program, which is DHCD's primary tool for financing rental housing for PHAs, DHCD requires a Tenant Participation Plan. The statute authorizing the Partnership Program requires that tenants contribute actively to the operation or maintenance of their housing or community.

All Tenant Participation Plans must include responsibility for some level of project maintenance and activity which benefits the community. The Plan must be structured to address real needs of the project, reduce operating costs and integrate the housing into the community. Each Tenant Participation Plan must include the following activities, as applicable:

- a) **Tenant's Association.** Except for scattered site projects, all Partnership developments are required to form an active tenants association. The association is to be given responsibilities which involve tenants in the management of the project. Examples of responsibilities include evaluation of tenant complaints, participation in formulating operating policies and responsibility for organizing tenant or community activities. To the extent feasible, scattered site projects are encouraged to form tenants associations as well. If a tenant's association is not feasible for scattered site projects in which Partnership units are located, and the units are located in an area that has a homeowner's or community association, tenants of the Partnership units are encouraged to participate in those associations.
- b) **Project Maintenance.** Each Tenant Participation Plan must include tenant responsibilities for project maintenance that enhances the project and reduces operating costs. Maintenance responsibilities may be tailored to address the type of project occupancy and building type. Examples of acceptable forms of project maintenance are listed below. Each Tenant Plan must include at least one of the recommended forms of project maintenance. The project management may specify that certain types of tenant-performed maintenance are undertaken only under the supervision of project staff.

TENANT PARTICIPATION PLAN		
MAINTENANCE ACTIVITY	PROJECT TYPE	OCCUPANCY TYPE
Exterior Maintenance, Such as snow removal, lawn care and painting	Townhouse, Detached Scattered Sites	Family
Interior unit painting	All Types	Family
Community Room/Building activity scheduling and post activity clean up	All Types with Community Rooms	Family & Elderly
Grounds or Building Decorations such as flower gardens and lobby decoration	All Types	Family & Elderly
Tenant staffing of office phone or reception desk	Single Site	Elderly
Minor repairs such as window and screen repairs	All Types	Family

C) **Community Activities.** Each Tenant Participation Plan must include requirements for tenants to participate in activities that benefit the community in which the development is located. Community activities may be performed on an ongoing basis or may be periodic. Each Plan should include an activity from the following list or a comparable activity recommended by the borrower and approved by DHCD:

1) Continuing Community Activities

- a) Recycling program
- b) Crime Watch program
- c) Participation in Community Association
- d) Foster Grandparent Program

2) Periodic Community Activities

- a) Neighborhood clean up
- b) Fund-raising activities to benefit neighborhood charities or nonprofit activities
- c) Food drives for holiday baskets

The Tenant Participation Plan also must address measures the borrower or management agent will undertake to assure tenant participation. CDA's loan documents obligate the borrower to implement the Plan, obtain CDA's approval prior to changing an approved Plan and provide an

annual report to CDA on tenant activities. The lease with the tenant should specify all tenant activities and inform the tenant of his obligation to comply with the Plan.

Homeownership

The State of Maryland is strongly committed to providing homeownership opportunities for all its low- and moderate-income residents. PHA residents may fully access all of DHCD's homeownership programs. Such programs include the Maryland Mortgage Program and the Preferred Interest Rate Program, which provide reduced interest rate mortgages to low- and moderate-income first time home buyers, and the State's down payment assistance program, which assists low-income buyers with down-payment and closing cost assistance. In addition, DHCD will continue to support federal efforts to promote homeownership, and will continue to use federal HOME funds to support homeownership through soft seconds and down payment and settlement assistance. DHCD also supports efforts by the State's local PHAs to provide homeownership opportunities not only through these programs, but through any program for which residents are eligible, including HUD's HOPE programs. DHCD also offers the Section 8 Housing Choice Voucher Home Ownership Option to eligible and qualified program participants.

HELPING TROUBLED PHAS

As part of the 1998 Quality Housing and Workforce Responsibility Act (QHWRA), Maryland and other States must describe how they would assist troubled PHAs with "financial or technical assistance" to help them lose their troubled status. HUD scores PHAs on their management practices and the physical quality of their units - a score under 60 results in a PHA being given "troubled" status.

In the event a PHA is designated as troubled, DHCD will cooperate with HUD to provide technical assistance to help them lose their troubled status. The type of assistance offered will be based on the findings in HUD's scoring that resulted in the PHA's troubled status. Examples of technical assistance DHCD will offer include assistance with financial operations, asset management, property management, or day-to-day operations, as appropriate. In addition to technical assistance, PHAs which have units in need of rehabilitation are eligible applicants for assistance under the competitions for DHCD's rental housing programs.

Currently, two PHAs in the non-entitlement jurisdictions are considered troubled. DHCD is assisting both of these PHAs with technical assistance.

GEOGRAPHIC DISTRIBUTION

Some of the federal resources available to the State of Maryland to provide affordable housing are subject to geographic targeting. The following federal resources will be directed toward specific geographic areas as described below.

Community Development Block Grant (CDBG)

Community Development Block Grant funds are awarded through a formula established by the federal government. The State's allocation of CDBG funds may not be Anne Arundel, Baltimore, Harford, Howard, Montgomery, and Prince George's Counties and the cities of Annapolis, Baltimore, Bowie, Cumberland, Frederick, Gaithersburg, Hagerstown and Salisbury. These jurisdictions receive their own allocations of CDBG funds directly from the federal government, and are not eligible for use of the State allocation.

Emergency Shelter Grant (ESG)

Emergency Shelter Grant funds are awarded through a formula established by the federal government. The State's allocation of ESG funds may be used anywhere in Maryland except Anne Arundel, Baltimore, Montgomery, and Prince George's Counties and Baltimore City. These five jurisdictions receive their own allocations of ESG funds directly from the federal government, thus are not eligible for the State allocation.

HOME Investment Partnerships Program (HOME)

The HOME program was established under the Cranston-Gonzalez National Affordable Housing Act of 1990. The State's allocation of HOME funds may not be used in Anne Arundel, Baltimore, Harford, Montgomery, and Prince George's Counties and Baltimore City. These jurisdictions are HOME entitlement jurisdictions and receive their own HOME funds directly from HUD.

Housing Opportunities for Persons With AIDS (HOPWA)

The State's allocation of HOPWA funds may only be used in Allegany, Caroline, Dorchester, Garrett, Kent, Somerset, Charles (as fiscal agent for St. Mary's County), Talbot, Washington, Wicomico and Worcester Counties. All other counties in Maryland are HOPWA entitlement jurisdictions and receive funding directly from HUD.

Farmers Home Programs (All)

The U.S. Department of Agriculture's Farmer's Home Administration (FmHA) Programs were established to provide safe, decent, affordable housing to the Nation's rural and farm communities. All FmHA programs (502, 515, 523, etc.) are restricted for use in "rural areas" which include open country and places with populations of 50,000 or less. FmHA loans are exempt from State PFA requirements, however FmHA is working with the State to encourage the use of their programs in PFAs.

Low-Income Housing Tax Credits

Federal Low-Income Housing Tax Credits may be used within the State of Maryland's PFAs. However, in accordance with federal law, states are required to develop allocation criteria which disperse the tax credits across the State through an IRS approved competitive process. Maryland has an approved competition process which allows points to be given to rental housing projects which serve areas previously unserved by tax credit developments. Areas which receive points for geographic distribution vary year by year and competition by competition depending upon the number of applications received from Maryland's various jurisdictions.

In addition to federal requirements, the State has its own requirements regarding the targeting of programs. Since there is a major emphasis on directing resources to growth areas and areas in need of revitalization, we will generally be targeting funds to projects located in Priority Funding Areas (PFAs) as well as appropriate. The information below provides an outline of how funds will be targeted beyond the federal requirements noted above:

Programs (or parts of programs) that are not required to fund projects located only in PFAs

- Federal and State Lead Paint Reduction Programs
- Weatherization for Low Income Persons
- Indoor Plumbing
- Single Family Rehabilitation (MHRP: 1-4 units)
- Group Home Financing
- Shelter and Transitional Housing Facilities Grants
- HOME – for single family existing homes only
- Maryland Mortgage Program
- Local Government Infrastructure Financing
- Rental Allowance
- Emergency Shelter Grants
- CDBG – for single family housing rehabilitation only
- CSBG
- Maryland Appalachian Housing
- Accessory Shared and Shelter Housing
- Section 8 Voucher/Certificate
- Section 8 Moderate Rehabilitation
- Federal and State Historic Tax Credits
- Federal Historic Preservation Grants
- Museum Assistance Grants

Programs required by law to fund projects located only in Smart Growth Areas

The Smart Growth – Priority Funding Areas Act of 1997 requires that the following DHCD programs be used exclusively in Priority Funding Areas (PFAs):

Neighborhood Revitalization

- Community Investment Tax Credit

- Main Street Maryland
- Community Legacy Program
- Neighborhood BusinessWorks – *in Designated Neighborhoods only*
- Live Near Your Work – *in Designated Neighborhoods for non-State employees and in PFAs for State employees*

Homeownership

- Maryland Mortgage Program (MMP) – *excluding O.B.O. – for new construction*
- Maryland Home Financing Program – *for new construction*
- Preferred Interest Rate Loan Program – *for new construction*
- HOME – *for new construction*

Rental Housing

- Elderly Rental Housing – *for new construction*
- Rental Housing Production – *for new construction*
- Multifamily Housing Revenue Bond Financing – *for new construction*
- HOME – *for new construction*

In addition, HUD also asks if or how funds will be specifically targeted to areas of minority concentration. In its Analysis of Impediments to Fair Housing Choice, the State defined a "high concentration" of minority households as a census tract where the percentage of minority households is at least 10% greater than the county average. Based on this definition, of the 346 census tracts in Maryland's non-entitlement areas covered by the Analysis, only 25 were areas of minority concentration, and, of those, 15 were impacted by institutions such as military centers, Historically Black Colleges, hospital centers, and prisons. Of the remaining 10, 9 are in PFAs. As noted above, DHCD targets its funds to Priority Funding Areas. Because of DHCD's emphasis on targeting funds to PFAs, areas of minority concentration are already targeted for assistance through the State's housing and community revitalization programs.

MONITORING

Housing Activities (including HOME)

Two offices within Maryland's Department of Housing and Community Development are responsible for monitoring housing loans and grants made by the Department with both State and federal (including HOME) funds. The Multifamily Housing Unit in the Division of Development Finance is responsible for income monitoring of tenants. The Asset Management division of the Maryland Housing Fund is responsible for monitoring the physical and financial condition of DHCD, HUD, Montgomery County Housing Opportunities Commission, Prince George's County, and Charles County financed properties.

In order to ensure that DHCD's programs are carried out in furtherance of the Consolidated Plan and ensure long-range compliance with objective, the Consolidated Plan's strategies, objectives, and activities will be incorporated into the Department's work plan. Achievement of Consolidated Plan goals by DHCD will be measured by the same standards used to evaluate all programs and activities by appraising the diverse operations and controls within DHCD and determining whether: risks are identified and reduced; acceptable policies and procedures are followed; established standards are met; resources are used efficiently and economically; and ultimately, the Department's objectives are achieved. In concert with the Department's overall mission and goals, DHCD's fulfillment of its designated objectives and responsibilities, including Consolidated Plan goals, will be measured and evaluated through the Managing for Results process.

Continuous reviews of programs and compliance testing to monitor activity performance under the Plan and long-term compliance and planning requirements will be conducted. Internal audits will furnish DHCD with analyses, appraisals, recommendations, counsel, and information concerning the activities reviewed and will monitor any corrective actions taken to assure that problems have been adequately identified and resolved. DHCD's activities will assist in the delivery of affordable housing units by ensuring that beneficiaries of DHCD financing are income-eligible and the provision of affordable housing follows State and federal regulations. Planning and Administration will endeavor to use the performance of projects within the portfolio as a tool during the rating and ranking process as well as during the underwriting process in an effort to minimize risks.

On-Site Monitoring for HOME-Assisted Projects

On-site monitoring is conducted to ensure that HOME-assisted projects are operated in compliance with the HOME regulations. On site monitoring responsibilities are conducted in accordance with the HOME regulations. Inspections of HOME-assisted rental units are scheduled as follows:

Number of HOME units	Inspection Required
1-4	Every 3 years
5-25	Every 2 years
26 or more	Annually

The on-site monitoring elements include:

- maintenance of appropriate records
- evidence that the property's written tenant selection policy has been followed
- acceptable lease documents
- evidence of affirmative marketing and conformance with fair housing policies
- review of rent adjustments
- review of treatment of rents for tenants who no longer qualify as low-income families
- review of corrective procedures dealing with temporary noncompliance caused by increases in the incomes of existing tenants
- ensure compliance with the written agreement between the owner and DHCD
- physical inspections for compliance with property standards
- verification of accuracy of information submitted by owners on eligible tenant incomes and HOME rents

Multifamily Housing will perform annual audits and reviews of grantees in the delivery of rental subsidies, as well as annual audits for compliance with tenant income and rent restrictions of properties with HOME funding. Multifamily Housing will perform additional audits, if needed, to ensure that problems are corrected. Multifamily Housing and grantees are subject to HUD audits. Reviews and audits will ensure that all State and federal regulations are being followed.

Asset Management undertakes physical inspections of DHCD-financed properties, as well as ensuring the financial stability of loans and assets management by the Department. Generally, Asset Management is responsible for conducting annual inspections on all properties for which the original loan amount was \$750,000 or greater and all HUD insured and subsidized projects. Inspections are conducted every two years on properties with original loan amounts between \$350,000 and \$750,000. Inspections are conducted every three years on projects whose original loan amount was less than \$350,000, but more than \$75,000. On multifamily loans of less than \$75,000, no inspection is conducted by DHCD. Some inspections may be completed by the Contract Servicer.

In addition, annual physical inspections are performed on projects that do not meet **all** of the following criteria:

- The loan is current and has not been delinquent in the prior twelve months.
- The debt service coverage ratio for the loan including any superior debt, if applicable is greater than 1.0.
- Vacancy is less than 10%.
- There are no significant outstanding violations of the Regulatory Agreement or other loan or program requirements.

- The project does not exhibit deferred maintenance. Deferred maintenance is defined as a condition exhibiting the continued failure by a management agent or an owner to perform routine or day-to-day tasks associated with the repair or upkeep of the property.
- The project received a Satisfactory or better rating on its most recent physical inspection and administrative review by Asset Management.
- The surrounding market is stable or appreciating.

Internal evaluations will measure goal achievement within the context of external limitations that may exist (i.e. reduced funding, shifting priorities of the Department, coordination difficulties within other governmental entities, etc.) and internal limitations (staff shortages, etc.). As program/activity performance is measured and goals are adjusted, the programs will review original goal estimates and make necessary revisions. Coordination will be a part of ongoing monitoring and if delivery or coordination efforts are stymied, an immediate determination will be made as to the most effective method of resolving the problem. If additional resources are necessary to eliminate or remove barriers, steps will be taken to initiate such action.

Performance measures and evaluations (periodic, annual, informal and formal) will be shared and utilized in planning for and preparing the next Consolidated Plan. Adjustments to monitoring activities will be completed as needed to address identified problems and assess corrective remedies and actions.

CDBG Activities

DHCD's Division of Neighborhood Revitalization staff conducts a review of the performance of every CDBG project that is brought to completion. Specialists review the projects to determine compliance with federal and State regulations. Depending upon the size and complexity of the grant, the monitoring is done either through the mail or on site. All projects are monitored at least once; most are reviewed several times.

Every CDBG grant is monitored at least once during the lifetime of the project. Monitoring of planning grants is accomplished through a desk monitoring in which grantees submit a completed checklist and supporting documentation. Staff reviews the information and writes a summary report which is then mailed to the Chief Elected Official within 60 days.

All other CDBG grants are monitored through a visit to the grantee and review of the records on-site. Monitoring of a grantees' capacity to meet compliance, project performance and national objective requirements includes an assessment of the following:

- Overall CDBG management structure;
- Internal procedures and controls;
- Capacity to track projects and activities from the planning stage through applicable major milestones (e.g., release of funds, contract bid and award, etc.) to completion;
- Consistency of the implemented project with the approved plan (as reflected in the grant application, Grant Agreement, and any amendments);
- Capacity of the grantee (and/or its subrecipients) to ensure compliance with the relevant programmatic and compliance requirements.

24 CFR 570.490 and 24 CFR 570.506 describe the Federal record-keeping requirements in general terms. In addition, the Grant Agreement provides additional guidance to grantees on

records to be maintained. At a minimum, the grantee's records must provide a full description of each activity assisted, including its location, the amount of funds budgeted, obligated and expended, and the category of eligible activity(ies) being undertaken (pursuant to Subpart C of 24 CFR 570). The records must also be sufficient to document compliance with all other applicable State and Federal requirements. Grantees must have the capacity to provide the various reports periodically required by DHCD, particularly those specified in Exhibit D of the Grant Agreement. The CDBG project records must be maintained for a period of three years after the close-out date of the State CDBG grant from HUD; in the event of litigation, claims, or other unresolved legal or audit issues, however, the three-year period is extended.

The on-site review typically will involve the following types of activities:

- Interview grantee's management, program, and administrative staff (and/or those of their subrecipients, as relevant).
- Inspect project sites, both for completed and on-going CDBG activities.
- Conduct a general review of the project records.

DHCD staff must review the grantee's (and/or subrecipient's) files to determine whether adequate documentation is being maintained to show compliance with the applicable Federal and State requirements. In regard to the local record-keeping system, the Reviewer should look for the following:

- The record-keeping system should be divided into categories that logically correspond to the key components and compliance areas of the project (e.g., citizen participation, environment review, documentation of national objectives, etc.); it should be updated regularly, and maintained in an orderly manner.
- Responsibility for maintaining the CDBG project files may be divided among several individuals. The Reviewer should identify those individuals who have responsibility for maintaining the CDBG files.
- All CDBG files must be secure and safeguarded.
- The records must be easily accessible to appropriate and authorized grantee (or subrecipient) staff, as well as State and Federal officials or their designees (e.g., the files may not be kept in someone's home or automobile).
- The files must contain adequate source documentation.

As part of their review, DHCD staff complete checklists to document their review and conclusions concerning projects and activities. Projects delayed due to circumstances beyond the grantee's control are discussed with the grantee and appropriate rescheduling is agreed upon.

Projects/activities for which little or no progress has been made, or which appear to be ineligible or inconsistent with national objectives, or which exhibit non-compliance with other pertinent State or Federal requirements result in a finding or matter of concern. DHCD monitoring staff considers and offers proposed remedies (including technical assistance) and/or required corrective actions that will remove impediments to progress or address non-compliance.

A written report is completed and issued to the Chief Elected Official within 60 days of the visit. The report stipulates the required corrective actions and the time frame for completion.

Follow up continues until all findings and matters of concern are adequately addressed and resolved.

Emergency Shelter Grants Activities

DHCD will also monitor the ESG program. Monitoring Requirements shall include:

1. Grantees will be monitored at least annually. The monitoring visit will be conducted by one or more staff members of DNR's Community Services Unit.
2. The visit may occur during or after the grant period. Grantees will receive two weeks notice of the monitoring visit; the notice will include a copy of the monitoring report form.
3. The visit will entail reviews of the fiscal and programmatic aspects of the grant as administered by both the grantee and sub-grantee. Grantees will make all records, administrative offices and personnel available upon request during the monitoring visit.
4. Within 60 days following the visit DHCD will forward a report to the grantees. The report will summarize grant progress and may include concerns with recommendations for further action as well as findings which will require corrective action.
5. Local government grantees which contract with nonprofit organizations under this program will also monitor the sub-recipient(s) to determine project progress and adherence to the sub-recipient grant agreement. Monitoring reports of the local government's grantee(s) will be subject to review by DHCD's Office of Community Services staff upon request.

HOPWA Monitoring and Evaluation

DHMH is primarily responsible for monitoring the State HOPWA program. Monitoring activities include requiring quarterly reports that include budget expenditures, programmatic narrative and performance measures. These reports include performance measures, narrative of program successes, challenges and barriers and a budget expenditure report. Also monitored is the coordination of services between HOPWA and Ryan White-funded programs, such as attendance of HIV case management and regional CARE Consortia meetings. The AIDS Administration also conducts sub-grantee site visits on a routine basis to monitor adherence to programmatic and fiscal standards and guidelines, client confidentiality and the quality and accessibility of services. Areas identified for improvement during the monitoring process may require that agencies develop corrective action plans. The HOPWA Coordinator at the AIDS Administration carefully monitors progress implementing the corrective action plans. In order to facilitate improvement, the AIDS Administration will provide technical assistance to its sub-grantees, as needed.

The purpose of the program's evaluation plan is twofold. Firstly to examine process indicators and quality improvement measures to assess program performance. Secondly is to evaluate the outcomes and impact of HOPWA assistance on the housing stability and health status of participating consumers. The data for both evaluation purposes will come from quarterly reports by project sponsors and by targeted qualitative and quantitative data collection.

The outcomes to be measured include:

1. Increased supply of HIV/AIDS housing meets unmet housing needs
2. Increased client access to housing related community services and resources
3. Funded project sponsors demonstrate ability to comply with HOPWA, HUD and other housing-related laws and regulations
4. Funded project sponsors have increased access to AIDS-related resources and information
5. Grantee and funded project sponsors are in compliance with HOPWA and other applicable HUD and housing-related regulations
6. HOPWA resources leverage additional AIDS-specific funding needed to address community housing-related needs.
7. HOPWA funds are made available to eligible community-based and local sponsors in an efficient and effective manner.
8. HOPWA grantee and local partners work together to assess housing needs, recognize barriers and identify solutions and achievable strategies

STATE OF MARYLAND ACTION PLAN

INTRODUCTION

Maryland's Consolidated Plan is a joint planning document and funding application required by the U.S. Department of Housing and Urban Development (HUD) under the National Affordable Housing Act. The Plan covers a five-year period and is updated annually in order for the State to apply for HUD funding under several different HUD programs, as well as to set planning goals for the coming year.

This document is the annual update (the Action Plan) for Federal Fiscal Year 2005 funding, which covers the period July 1, 2005 through June 30, 2006, AKA State Fiscal Year 2006. It contains the goals and objectives for the fifth year of the State's 5-year plan. As a planning document, the Consolidated Plan is designed to coordinate Federal (and to a lesser extent State) resources to provide all Maryland citizens with:

- **Decent housing,**
- **Economic opportunities, and**
- **An acceptable living environment.**

Its main thrust as a planning document is to develop policies and procedures and to target resources to carry out these three main goals.

As an application for funding, the Consolidated Plan must be submitted to HUD in order to receive funding for the following programs:

- **Community Development Block Grants (CDBG),**
- **HOME Investment Partnerships Program (HOME)**
- **Emergency Shelter Grants (ESG), and**
- **Housing Opportunities for Persons With AIDS (HOPWA)**

In addition, the Plan makes it possible for State agencies, local governments, nonprofit developers, Community Action Agencies and others to apply for funding under competitive HUD programs. These include the competitive portion of the Housing Opportunities for Persons With AIDS program, as well as Lead Paint Abatement, Section 202 (Elderly Housing), Section 811 (Housing for the Disabled), McKinney Act (Homeless) and HOPE (Public Housing) funds, among others.

CITIZEN PARTICIPATION

For this Action Plan update, the Maryland Department of Housing and Community Development (DHCD) undertook extensive citizen participation efforts. In order to gain public input, a total of eight public hearings were held on the Plan throughout the State. The first four hearings were held before the draft Plan was written, so that comments and recommendations could be made early in the planning process. The hearings were held at the following dates, times, and places: Wednesday, February 2, 2005 at 1:30 p.m. at the Denton Community Center in Denton; Thursday, February 3, 2005 at the Fairview Branch Library in Owings; Friday, February 4, 2005 at 1:30 p.m. at the Allegany County Office Complex in Cumberland and Monday, February 7,

2005 at 7:00 p.m. at the Maryland Department of Housing and Community Development in Crownsville. It should also be noted that all hearings were held in accessible locations, and that DHCD offered interpretive services for the hearing impaired and/or for persons who speak English as a second language

Notice of these hearings was published in the Baltimore Sun, Baltimore Afro-American, Daily Mail (Hagerstown), Capital Gazette (Annapolis), Star Democrat (Easton), Dorchester Star, Caroline Times-Record, Kent County News, Bay Times, and Record Observer. In addition, DHCD sent out a mass mailing to nonprofit and for-profit housing developers, municipal and county executives, public housing authorities, community action agencies, advocacy organizations, AIDS/HIV organizations, and local housing and community development contacts, among others, to apprise them of the upcoming hearings and encourage their participation in the development of the new Plan.

After the draft Action Plan was completed, the State published the Plan for 30 days of public comment starting on Monday, April 4, 2005, with written comments accepted through COB Wednesday, May 4, 2005. Advertisements were placed in all the newspapers listed above regarding the opening of the public comment period. These advertisements stated the Plan's goals, as well as notifying the public of four additional hearing that would be held to game further public comment and input on the draft Plan. The advertisements also let the public know that they could obtain free copies of the draft Action Plan either by calling or writing DHCD, or visiting DHCD's website. In addition, the advertisement let people know they could obtain copies of the draft Plan through the State's regional lending libraries, including the Enoch Pratt Free Library in Baltimore, the Blackwell Library in Salisbury, the Washington County Free Library in Hagerstown, the Lewis J. Ort Library in Frostburg, the Frederick Douglas Library in Princess Anne, and the Southern Maryland Regional Library in Charlotte Hall. The advertisements also noted that a large print version of the Action Plan was provided to the Maryland Library for the Blind and Physically Handicapped. Finally, these advertisements also informed the public that they could submit comments on the draft Plan in writing via either traditional or e-mail.

DHCD posted the draft Plan on its web-site and mailed out another set of notices to all of the organizations noted above. This notice also let these groups and organizations know that they could also obtain a free copy of the Plan by simply requesting it from DHCD or downloading it from the web. Finally, several weeks into the comment period, the State held four more public hearings at the following locations, places, and times: Tuesday, April 19, 2005 at 7:00 p.m. at the Maryland Department of Housing and Community Development in Crownsville; Wednesday, April 20, 2005 at 1:30 p.m. Denton Community Center in Denton; Thursday, April 21, 2005 at 10:30 a.m. at the Fairview Library in Owings; Friday, April 22, 2005 at 1:30 p.m. Allegany County Office Complex in Cumberland.

Lastly, DHCD also worked with other state agencies to help identify goals, objectives, and resources the State would use during the coming year to carry out its Action Plan. These agencies included the Department of Health and Mental Hygiene (DHMH), the Department of Human Resources (DHR), the Department of Business and Economic Development (DBED), the Maryland Department of Environment (MDE) and the Maryland Department On Aging (MDOA)

COMMUNITY VISION

Working with partners, DHCD -

- revitalizes communities,
- encourages home ownership, and
- expands the supply of decent affordable housing

As such, revitalizing communities, encouraging homeownership, and expanding the supply of decent affordable housing are the three over-arching goals of the State's Consolidated Plan.

PRIORITIES

Based on the needs identified in the five-year plan, the Governor's Housing Policy Commission, the Analysis of Impediments to Fair Housing Choice, and by citizen participation at the hearings, DHCD's priorities for the coming year are as follows:

Housing Priorities: Priorities for federally funded housing assistance will be provided to:

- **Extremely Low-Income Renters,**
- **Low-Income Renters,**
- **Extremely Low-Income Homeowners,**
- **Low-Income Homeowners,**
- **Moderate-Income Renters, and**
- **Moderate-Income Homeowners,**

Housing assistance to be provided will include 1) encouraging renters to become owners through use of DHCD's homeownership programs; 2) financing the acquisition, new construction or rehabilitation of multi-family housing; and 3) direct tenant assistance through State and federal rent subsidy programs. DHCD will also assist homeowners with the rehabilitation of owner-occupied properties and assist persons with special needs to obtain supportive housing. DHCD also will work to encourage the preservation of affordable housing.

Non-Housing Priorities: Priorities for State funded infrastructure are:

- **Water, Sewer, and drainage,**
- **Streets and roads,**
- **Street lighting, landscaping, sidewalks, and public space improvements,**
- **Electric utility improvements,**
- **Solid waste transfer, conversion and disposal facilities,**
- **Government office and meeting facilities,**
- **Police, fire, transportation, recreation, maintenance, and other facilities for the delivery of public services,**
- **Public parking structures**

Public Facilities and Essential Human Services Priorities: Priorities for public facilities and essential human services are:

- **Head Start, Day Care and Family Support Centers,**
- **Youth and Senior Centers,**
- **Community Facilities,**
- **Health Centers,**
- **ADA improvements, and**
- **Public Services.**

Public facilities and essential human services programs will be financed through federal programs, such as DHCD's CDBG program, as well as State programs administered by DHCD, DHR and DHMH. The State Infrastructure Bond Financing Program often finances facilities that are other ineligible for federal funding due to statutory or regulatory program restrictions.

ONE YEAR GOALS

As a result of the planning process, the following overall goals were set for the coming year:

35 Year Mortgage Product – DHCD will offer a new 35 year homeownership mortgage product to help families buy their first homes. The first five years of the loan will require interest only payments on the mortgage. The remaining 30 years of the mortgage will include payments on both principal and interest. This will support DHCD's goal of expanding homeownership.

40 Year Mortgage Product – DHCD will offer a new 40 year homeownership mortgage product to help families buy their first homes. This product will require payment of both principal and interest during the life of the loan. This will support DHCD's goal of expanding homeownership.

Bridge Subsidy Rental Assistance – DHCD will fund a one year pilot project for \$700,000 to provide a rental assistance bridge subsidy for disabled persons on local Section 8 waiting lists. Other cabinet agencies are expected to fund the project in future years. This will support the goal of expanding the supply of affordable housing.

Public Housing Rehabilitation Bond – DHCD will work with the State's public housing agencies to issue a new Capital Fund Securitization Revenue Bond. This bond will be used to rehabilitate public housing throughout the State. This will support DHCD's goals of expanding decent affordable housing.

Section 8 for Homeownership – DHCD will expand its Section 8 homeownership program. This will support DHCD's goal of expanding homeownership.

Employer Partnership Matching Grant – DHCD will work with local business to create a new Employer Partnership Program to help people become homeowners. Under this proposal, employers would contribute funds toward their employees purchasing a home. DHCD would give the employees a DSELP loan for \$3,000, and would provide up to an additional \$3,000 in DSELP funds on a dollar for dollar basis, for a total loan by the State of up to \$6,000.

SHOP Program – DHCD will re-open the Special Housing Opportunities Program (SHOP). This program provides funding to build supportive housing for persons with disabilities and/or other persons who need supportive housing. The loans will be guaranteed by the Maryland Housing Fund.

Community Legacy – DHCD will continue to operate the Community Legacy Program. In order to receive funding under the Community Legacy Program, communities must be in a priority funding area. In addition, communities will need to demonstrate evidence of decline, such as decreasing homeownership rates or increasing commercial vacancy, while at the same time demonstrating signs of strength such as partnerships with local banks, businesses, educational institutions, or cultural organizations. Funds under the program will be awarded competitively based on locally developed comprehensive revitalization strategies that are both ambitious and achievable. Operation of funding of this program supports DHCD's goal of community revitalization.

Federal Funds and Grants - DHCD, in collaboration with other agencies, will apply for competitive grants to increase resources available to carry out its housing, revitalization, and other goals. The Department also will support applications for grants by other agencies, including grants expanding housing opportunities for persons with disabilities. This goal supports all three of DHCD's over-arching priorities related to housing and community development efforts.

Homeownership for Persons with Disabilities – DHCD will continue to offer homeownership loans for persons with disabilities to purchase existing or new houses through the Homeownership for Persons with Disabilities Program. Eligible applicants must be disabled and have incomes below 55 percent of median income. Funding and operation of this program supports DHCD's homeownership goal.

Homeownership for Persons with Disabilities – DHCD will work with the Department of Disabilities as well as other State agencies on possibly increasing the acquisition and/or mortgage loan limits under the Homeownership for Persons with Disabilities Program. DHCD will also work with these agencies on the possibility of combining grant funds and/or soft seconds with the mortgage. This will support DHCD's goal of increasing homeownership.

Rental Housing Production – DHCD will continue to offer a streamlined review option for qualifying multi-family rental projects that are financed only with tax-exempt bond funds. Under the streamlined option, CDA review time will be reduced from the current average of about 9 months to 90 days because CDBG will defer to the credit enhancer's underwriting and construction review process. This option will make it easier for experienced developers of affordable housing to utilize the Department's multi-family bond program, and, in turn, expand the supply of affordable rental housing. Undertaking this action supports DHCD's goal of expanding the supply of decent affordable housing.

Rental Housing Production – DHCD will continue to offer its new Rate Lock option for the Multi-family bond program. The purpose of the Rate Lock is to provide another tool for the development of affordable multi-family rental housing and increase the flexibility of the Multi-Family Bond Program. Rate Locks allow a developer to control interest rate risk by locking in the Community Development Administration (CDA) published interest rate 30-90 days prior to loan closing. The Developer must execute a Rate Lock Agreement and pay the Rate Lock Fee to

CDA. Undertaking this action supports DHCD's goal of expanding the supply of decent affordable housing.

Preservation of Affordable Housing – DHCD will continue its efforts to preserve affordable housing including units in projects where owners can opt out of the Section 8 project based program. We will use our existing housing finance resources including State funding, tax credits, HOME and bond authority. This activity supports DHCD's goal of expanding the supply of decent affordable housing.

DHCD Catalyst – DHCD will provide customized training to public and private organizations and individuals through DHCD Catalyst. With Catalyst's 13 Partners, a sample of offerings offered by Catalyst includes training on CDBG funding, implementing a revitalization plan, undertaking large scale development projects, nonprofit formation, how to do project pro formas, proposal writing, rehabilitation of historic structures, responding to Requests for Proposals, small business development, marketing business tax credits and understanding State Programs 101, among others. The Catalyst program supports DHCD's goal of revitalizing communities by increasing the capacity of individuals and organizations, the Department's customers, to both access and then successfully utilize DHCD program resources.

Historic Preservation Tax Credits - DHCD will continue to operate the State's newly revised and reauthorized Historic Tax Credit Preservation program. The program provides Maryland income tax credits equal to 20% of the qualified capital costs expended in the rehabilitation of certified heritage structures. Operation of the Historic Tax Credit program supports DHCD's goal of revitalizing communities.

Down Payment Assistance – DHCD will continue to assist persons to become homeowners through the State's Down Payment and Settlement Loan Program (DSELP), as well as through the federal government's ADDI program. Operation of both the State funded and federally funded downpayment programs supports DHCD's goal of expanding homeownership.

One Year Housing Goals

In addition to the overall goals stated above, DHCD also has set forth specific goals for the provision of housing and community development activities. The table on the following page shows housing activities the State plans to undertake in the next year with HOME funds.

HOME ASSISTED UNITS – PROJECTED FFY 2005/SFY 2006						
Tenure Type	Household Type	Housing Problem	Income			Total
			0-30%	31-50%	51-80%	
Renter	SMALL RELATED	CB>30%	5	39	-	44
		CB>50%	9	43	-	52
	LARGE RELATED	CB>30%	12	5	4	21
		CB>50%	24	5	4	33
	ELDERLY	CB>30%	25	12	-	37
		CB>50%	45	12	-	57
	ALL OTHER	CB>30%	43	12	5	60
		CB>50%	62	18	5	85
Owner		CB>30%	30	25	15	70
		CB>50%	30	25	15	70
		SUBSTANDARD	73	44	35	152
		OVERCROWDED	5	4	1	10

The following table shows housing activities DHCD plans to undertake in the next year with State Funds, Mortgage Revenue Bonds, Tax Credits, and the HOME program. It does not include approximately 45-50 units annually that will be developed or rehabilitated with CDBG funds.

One Year Housing Goals			
Program	Household Type		Units
Rental Housing	Family	1,431	2,700
	Elderly	1,161	
	Special Needs	108	
Rental Subsidy	Family	1,678	1,753
	Special Needs	75	
Homeownership	Family	2,200	2,245
	Special Needs	45	
Special Loans	Family	1,479	1,536
	Special Needs	57	
Total			8,234

NOTES: DHCD's rental housing programs are competitive, estimates are based on past performance. Rental Subsidy, Homeownership, and Special Loans programs do not target by elderly versus family. Special Needs Units under rental housing are units produced through the QAP, under Rental Subsidy they are households assisted under the new Bridge Subsidy Program, under Homeownership they are households assisted under Homeownership for Individuals With Disabilities Program, and for Special Loans they are Group Home beds.

Section 215 Goals

Section 215 goals are units that meet HOME program income limits for rental housing, and both HOME program income limits and HOME recapture provisions for owner-occupied housing. Because virtually all units DHCD finances under the rental housing programs have incomes below 60% of median income, and all families assisted under the Rental Allowance Program earn less than 30% of median income, almost all rental units will meet Section 215 goals. Most of our homeownership loans would meet the Section 215 **income** limits (80% of median income or less). However, because we do not recapture our funding when a homeowner's income increases (we raise their interest rates) most units financed under the Homeownership programs do not meet the Section 215 requirements.

One Year Non-housing Goals

It is anticipated that the CDBG program will fund the following activities during the next year:

ESTIMATED CDBG ACTIVITIES – FFY 2005/SFY2006		
CDBG ELIGIBLE ACTIVITY	Number of Projects	Estimated Funding
INFRASTRUCTURE		
Water/Sewer/Streets/Parks/ Playgrounds	6	\$3,775,800
Planning Studies	2	\$62,000
PUBLIC FACILITIES AND ESSENTIAL HUMAN SERVICES		
Adult Day Care/Family Support Services/Developmentally Disabled Centers/Public Services	6	\$1,878,655
ECONOMIC DEVELOPMENT		
Acquisition/Clearance for Economic Development	2	\$1,650,000
Infrastructure	1	\$268,000
Capital Equipment	-	-
Planning		

ESIMATED STATE/LOCAL INFRASTRUCTURE BOND PROGRAM ACTIVITIES		
Type of Activity	Number or Projects	Estimated Funding
Department of Public Works Improvements	2	\$1,250,000
Electric Utility Work	1	\$3,000,000
Vehicle Purchases	2	\$1,866,500
Facility Improvements	17	\$6,335,900
Refinancing existing capital project debt	5	\$6,435,673
Street Improvements	2	\$1,626,300
Sidewalk Improvements	1	\$25,000
TOTALS	30	\$20,539,373

COMMUNITY LEGACY PROGRAM		
Commercial	<u>2</u>	\$289,975
Demolition	<u>5</u>	\$515,000
Economic Development	<u>3</u>	\$115,000
Facade Program	<u>7</u>	\$486,875
Infrastructure	<u>6</u>	\$487,946
Mixed-use	<u>6</u>	\$646,429
Operation Support	<u>2</u>	\$65,000
Planning	<u>1</u>	\$15,000
Public Safety	<u>2</u>	\$135,625
Recreational	<u>2</u>	\$117,950
Social Services	<u>1</u>	\$14,425
Redevelopment	<u>3</u>	\$207,000

Note that these numbers are subject to change based upon actual applications received and amount of funds available. The projections are based on projects funded in the prior year, excluding housing.

GEOGRAPHIC TARGETING

Housing data provided by HUD revealed a similarity of need from jurisdiction to jurisdiction in Maryland. For example, if the percentage of "small, very low-income renter families" with housing needs was 65 percent statewide, virtually every jurisdiction within the State was within a few percentage points of the statewide average. In the survey of needs completed for the five-year Plan, questions about infrastructure, community development, and economic development needs also indicated a similarity of need from jurisdiction to jurisdiction.

Since similar needs exist throughout the State, the State will not target its funds to certain jurisdictions, except as established by law. For example, the State's allocation of CDBG funds may only be used in non-entitlement areas. Since there is a major emphasis on directing resources to growth areas and areas in need of revitalization, we will generally be targeting funds to projects located in Priority Funding Areas (PFAs) as well. The information below provides an outline of how funds will be targeted:

Programs (or parts of programs) that are not required to fund projects located only in PFAs

- Federal and State Lead Paint Reduction Programs
- Weatherization for Low Income Persons
- Indoor Plumbing
- Single Family Rehabilitation (MHRP: 1-4 units)
- Group Home Financing
- Shelter and Transitional Housing Facilities Grants
- HOME – for single family existing homes only
- Maryland Mortgage Program – for existing homes

- Local Government Infrastructure Financing
- Rental Allowance
- Emergency Shelter Grants
- CDBG – for single family housing rehabilitation only
- CSBG
- Maryland Appalachian Housing
- Accessory Shared and Shelter Housing
- Section 8 Voucher/Certificate
- Section 8 Moderate Rehabilitation
- Federal and State Historic Tax Credits
- Federal Historic Preservation Grants
- Museum Assistance Grants

Programs required by law to fund projects located only in Smart Growth Areas

The Smart Growth – Priority Funding Areas Act of 1997 requires that the following DHCD programs be used exclusively in Priority Funding Areas (PFAs):

Neighborhood Revitalization

- Community Investment Tax Credit
- Main Street Maryland
- Community Legacy Program
- Neighborhood BusinessWorks – *in Designated Neighborhoods only*
- Live Near Your Work – *in Designated Neighborhoods for non-State employees and in PFAs for State employees*

Homeownership

- Maryland Mortgage Program (MMP) – *excluding O.B.O. – for new construction*
- Maryland Home Financing Program – *for new construction*
- Preferred Interest Rate Loan Program – *for new construction*
- HOME – *for new construction*

Rental Housing

- Elderly Rental Housing – *for new construction*
- Rental Housing Production – *for new construction*
- Multifamily Housing Revenue Bond Financing – *for new construction*
- HOME – *for new construction*

In addition, HUD also asks if or how funds will be specifically targeted to areas of minority concentration. In its Analysis of Impediments to Fair Housing Choice, the State defined a "high concentration" of minority households as a census tract where the percentage of minority households is at least 10% greater than the county average. Based on this definition, of the 346 census tracts in Maryland's non-entitlement areas in the time of the Analysis, only 25, or just over 10%, had census tracts of high minority concentration. As noted above, DHCD targets its funds to Priority Funding Areas. Of the 25 tracts with concentrations, 15 have concentrations due to institutions such as Historically Black Colleges and Universities, hospital centers, military bases, or prisons. Of the remaining 10, 9 all are located in PHAs. Because of DHCD's

emphasis on targeting funds to PFAs, areas of minority concentration are already targeted for assistance through the State's housing and community revitalization programs. (The one concentration outside of a PFA is located in Charles County and is minority, but not low-income. See the Five-Year Plan's discussion of concentrations for more information.)

LEVERAGING

The Maryland General Assembly appropriated about \$37.2 million in general, special and general obligation bond funds in the coming year to provide low-income housing through the State's homeownership, rental housing, special loan, and rental subsidy programs. This does not include public purpose bond funds that DHCD will leverage to help carry out efforts to address the priorities identified in its Five-Year Plan. The table below shows State funds appropriated for housing in SFY 2006

State Appropriations for Housing, SFY 2006	
PROGRAM	FUNDING
Rental Housing Funds	\$13,000,000
Partnership Funds	\$6,000,000
Shelter and Transitional	\$1,000,000
Rental Allowance Program	\$1,700,000
Homeownership Programs	\$7,500,000
Special Loan Programs	\$8,000,000
TOTAL	\$37,200,000

Additional leveraging will be provided through DHCD's bond financing programs. DHCD will issue bonds for special needs housing, homeownership, and rental housing during the coming year. Bond funds are expected to provide approximately \$300 million in resources for homeownership and approximately \$150 million for rental housing during SFY 2006.

In addition to bond funds, DHCD expects to receive about \$2.9 million in U.S. Department of Energy (DOE) weatherization funds which will help leverage other housing funding. The weatherization funds DHCD receives from DOE will be used in conjunction with weatherization funds the Department receives from BGE and Washington Gas to carry out weatherization activities.

Other leveraging will come from the State's allocation of Federal Low-Income Housing Tax Credits. The State's federal low-income housing tax credit allocation will be approximately \$10.3 million for CY 2005 (tax credits are allocated on a calendar year basis). DHCD will also use Section 8 Vouchers, which are provided by HUD but not covered directly by the Consolidated Plan, to work in conjunction with all of the housing programs mentioned above.

Another source of leveraging will be the State's Historic Preservation Tax Credit program. Re-authorized in the spring of 2004, the program will provide \$20 million in tax credits to individuals or developers who rehabilitate historic structures under the program's guidelines. The credits can be used for both housing and community development projects.

Significant community economic development leveraging is generated by Maryland's premier small business program, Neighborhood BusinessWorks (NBW). NBW provides gap financing of

up to \$500,000 to small businesses and microentrepreneurs located in designated revitalization areas. Historically, NBW levers \$3.16 dollars for each one it invests through a loan or grant to a for profit or nonprofit business. DHCD will have \$6 million available for loans and grants in SFY 2006. Another major tool of the Department for community development leveraging is the Community Legacy (CL) program, which historically leverages \$3 of other private and public resources for every \$1.00 that CL invested. The CL program will be funded at \$5 million in SFY 2006.

DHCD administers another tax credit program, the Community Investment Tax Credit (CITC) Program, which provides tax credits to nonprofits for projects located in Priority Funding Areas or which primarily serve residents of such areas. Annually, the Department awards \$1 million of CITCs to nonprofits through a competition similar to that for the federal low-income housing tax credit. The nonprofits market the tax credits to businesses to raise funds to support critical community services and/or a capital project. Any business in Maryland which contributes cash or good to support any approved CITC project, earns state tax credit equal to 50 percent of the contribution. The types of activities and projects funded include: tutoring, employment services, child development, health care, adult literacy, community policing, and home health care programs, youth center, food pantry, emergency shelter, transitional shelter support, historical and cultural programs, capacity building and the renovation of single family and multi-family housing to provide new homeownership and rental housing to very low-income persons.

In addition to the above, DHCD also administers a bond pooling program. The Infrastructure Financing Program issues bonds on behalf of local governments enhancing market access for small or infrequent issuers. The bonds finance every form of public infrastructure, such as roads and sidewalks, water and sewer systems and their supporting facilities, parks, storm drains, and schools, town halls, fire stations, and other public buildings. Since the inception of the program in 1987, a total of \$163 million in bonds has financed or refinanced 193 projects for 52 municipalities, 4 counties, and 2 instrumentalities of counties.

Leveraging to housing and community development projects is also available from sources outside of DHCD. For example, as part of its efforts to improve Maryland's infrastructure, the State operates several programs aimed at helping local governments repair or build infrastructure. The Maryland Department of Transportation operates several programs which build roads and sidewalks. The Department of the Environment operates a number of infrastructure programs which are primarily targeted toward water and sewer system construction, repair, and replacement. The Department of Health and Mental Hygiene, the Department of Human Resources, and the Maryland Department on Aging also will provide housing assistance, typically in the form of supportive housing.

Lastly, In addition to the funds the Department expects to receive itself, DHCD strongly supports and encourages applications by all eligible entities for competitive funds for which those entities are eligible. These include all of the programs currently covered by the Consolidated Plan (the HOPWA program, Section 202 housing, Section 811 housing, homeless funds, etc.) as well as any funds that may come under the plan in the future, such as the Farmer's Home programs.

ANTI-POVERTY STRATEGY

The State of Maryland is strongly committed to reducing the number of households in Maryland living in poverty. The citizens of Maryland recognize that persons who live in poverty need a combination of social services and economic opportunities to get back on their feet.

No single tactic will address the problem of poverty in Maryland. Key components of the State's Anti-poverty Strategy include:

- Providing quality education and job training,
- Focusing economic growth and revitalization on areas where persons in poverty are most likely to reside,
- Increasing the supply of affordable housing,
- Providing supportive services such as transportation and childcare to assist low-income individuals in getting and keeping a job.

As part of Maryland's anti-poverty efforts, DHCD operates the Community Services Block Grant Program (CSBG). The State was awarded \$8.7 in CSBG funds for FFY 2004. In addition, the State provided an additional \$86,584 in funding for CSBG core capacity programs.

CSBG funds are granted to states in order to ameliorate the causes of poverty. To this end, the State allocates the CSBG funds to the 17 local Community Action Agencies (CAAs) and two Limited Purpose Agencies (LPAs) Statewide which in turn:

1. Provide a range of services and activities having a measurable and potentially major impact on causes of poverty within a community.
2. Undertake activities that assist low-income participants to:
 - Secure meaningful employment,
 - Attain an adequate education,
 - Make better use of available income,
 - Obtain adequate housing and a suitable living environment,
 - Remove obstacles and solve problems which block the achievement of self-sufficiency,
 - Achieve greater participation in the affairs of the community, and
 - Obtain emergency assistance for urgent individual or family needs.
3. Provide the services of food pantries, soup kitchen and emergency food distribution on an as needed basis. These services are necessary to counteract conditions of starvation and malnutrition among the poor.
4. Establish linkages between government and other social service programs to assure the effective delivery of services to low-income individuals.
5. Encourage the use of entities in the private sector to ameliorate poverty in the community.

Furthermore, the State emphasizes that actions undertaken with the CSBG program:

1. Focus resources toward the most needy.
2. Provide employment opportunities for low-income persons.

3. Close service gaps.
4. Enable low-income persons to participate in community action programs and projects.

In addition to the above actions undertaken with the CSBG program, in June 2002, the Maryland Department of Housing and Community Development (DHCD) became a sponsoring agency for an AmeriCorps*VISTA project. The project was renewed in 2004, and we anticipate receiving a \$15,000 support grant from the Corporation for National Service and Community Service (CNCS) in SFY 2006. This will allow us to continue supporting AmeriCorps*VISTA project..)

Founded in 1964 as a domestic counterpart to the Peace Corps, VISTA was launched as part of the War on Poverty. AmeriCorps*VISTA members support volunteer activities of community-based organizations through volunteer recruitment, training and capacity-building. Administered by DHCD's Division of Neighborhood Revitalization, the VISTA project compliments DHCD's capital programs and projects by providing the "social mortar" to strengthen community-based revitalization efforts and help ensure their long-term success.

The CNCS grant DHCD received is being used to pay for service-related travel expenses for VISTA members and the DHCD staff time associated with the project. The Neighborhood Revitalization staff currently supervises 12 AmeriCorps*VISTA members at nine (9) Maryland Volunteer Centers. CNCS has also authorized a VISTA Leader for the project. The VISTA Leader is responsible for coordinating training and networking opportunities among the VISTA members and providing staff support for the newly formed Maryland Volunteer Center Association.

Each VISTA member has the goal of recruiting and placing 50 volunteers at local community based organizations. The volunteers are placed in organizations addressing a broad range of critical needs including education, environment, public safety-homeland security, and unmet human needs. AmeriCorps*VISTA members recruit volunteers for human service organizations addressing the needs populations ranging from children and teens to adults, families and seniors. These volunteer efforts, tied into CSBG funding as well as funding from other sources, will help the State lift people out of poverty.

THE CONTINUUM OF CARE

Maryland has long been an advocate of the "Continuum of Care" approach of serving homeless persons and persons threatened with homelessness. The three principal features of Maryland's Continuum of Care are:

1. **Preventing low-income individuals and families from becoming homeless, providing outreach to homeless persons, and addressing their individual needs;**
2. **Addressing the emergency shelter and transitional housing and service needs of homeless individuals and homeless families; and**
3. **Helping homeless people make the transition to permanent housing and independent living.**

Since Maryland implemented this approach in the mid-1980s, it has become a national model for resolving the problems of the homeless. Homeless persons to be assisted include homeless individuals, homeless families with children, the severely mentally ill homeless, homeless

persons with alcohol or other drug addiction problems, homeless fleeing domestic violence, homeless youth, homeless individuals diagnosed with AIDS and other related diseases, and any other homeless individuals or persons at risk of becoming homeless. Activities to be undertaken during the coming year include undertaking new construction, substantial rehabilitation, acquisition, moderate rehabilitation, preservation, lead paint abatement, and infrastructure improvements for rental housing, providing rental (tenant) assistance, and supportive facilities and services.

One of the most challenging aspects of addressing homelessness is determining the kinds of resources needed and ensuring that the diverse agencies responsible for providing those resources coordinate their response. While many State government agencies have responsibility for one or more "pieces" of the homeless puzzle, three agencies have major responsibility for assisting homeless people: DHR, DHMH, and DHCD.

DHR has primary responsibility for assisting the homeless in the State of Maryland. Within DHR, the Office of Transitional Services (OTS) administers four State-funded programs that provide housing and services for homeless people. DHMH focuses on people with physical and mental disabilities and illnesses, with the AIDS Administration within DHMH having a specific focus on people with AIDS. In terms of meeting housing needs in general, DHCD has the broadest role: to support the development, acquisition and maintenance of affordable, decent housing for low-income people. DHCD provides federal and State funds for rehabilitation of buildings for use as shelters, operation of shelters, and prevention of homelessness. DHR has a similarly broad mandate in terms of services. It is responsible for assisting low-income people with income maintenance, including income supplements, food stamps, and coordinating education and employment training through Project Independence. All of DHCD's, DHR's, and DHMH's homeless assistance programs can be categorized within the principles of Maryland's "Continuum of Care."

1. Preventing Low-Income Families (especially those with incomes below 30 percent of median) From Becoming Homeless.

A central component to the DHR/OTS homelessness assistance strategy is preventing the onset of homelessness. This approach focuses on providing resources to families and individuals prior to their becoming unsheltered and in emergency situations. While funds under the Emergency and Transitional Housing and Services (ETHS) Program can be used for limited rent and mortgage assistance, and the Housing Counselor program can be used effectively to keep people in housing, the key program in OTS in this prevention effort is the Homelessness Prevention Program.

DHCD operates a number of programs designed to prevent persons from becoming homeless. For example, as noted above, under the ESG a portion of the annual allocation (30 percent) may be used to support homelessness prevention activities. In addition to operating the federal Section 8 programs, DHCD also operates the State funded Rental Allowance Program which provides rent subsidies to homeless persons and families whose incomes are less than 30 percent of Statewide median. This is in addition to the Department's numerous housing production programs, all of which help prevent homelessness by financing the new construction or rehabilitation of affordable housing for lower income households. Finally, the State has committed to targeting its federal allocation of HOME funds to provide rental housing to serve persons earning 30 percent of median or less.

Homelessness Prevention Program

This program was funded in fiscal year 1993 in partial replacement for the terminated State-funded Emergency Assistance Program (a portion of which had been used for homelessness prevention activities). OTS was designated to administer the Homelessness Prevention Program given the interrelationships between eviction prevention and that portion of the ETHS Program that can be used for the same purpose.

Activities may include direct grants to families and individuals to prevent eviction, landlord-tenant mediation, and early intervention services for at-risk households and seed money for a revolving loan fund for renters. Funds may not be used to assist people who already have been evicted. The program's target populations are families and individuals in crisis who are without resources to meet an impending eviction. Local jurisdictions are required to track and evaluate their programs.

Outside of the Office of Transitional Services, but within DHR, are two programs that assist in preventing homelessness: the Family Investment Program and the Temporary Cash Assistance (TCA) program.

2. Emergency Shelter and Transitional Housing Needs of Homeless Individuals and Homeless Families

A key component of Maryland's Continuum of Care is meeting emergency and intermediate needs of people who have become homeless. In addition to the numerous programs operated by DHCD which may be used to finance construction of emergency shelters or transitional housing, programs are administered by both DHCD and DHR which support shelter maintenance and operating costs and fund delivery of homeless services.

Homeless Services Program

DHR's Homeless Services Program (HSP) was created by the General Assembly in 1984 to provide funding for emergency and transitional shelter and services to homeless families and individuals. Eligible activities include costs associated with emergency shelter, transitional housing, motel placements and eviction prevention. Funds may assist all people who are homeless and in need of assistance. The Office of Transitional Services administers HSP funds. Throughout the program's operation, OTS has worked to ensure interagency cooperation on project development and implementation at the State and local level.

Shelter and Transitional Housing Grants Program

Created in fiscal year 1991, the Shelter and Transitional Housing Grants Program has provided for the acquisition, renovation and rehabilitation of homelessness assistance facilities throughout Maryland. Originally administered by DHR, this program is now operated by DHCD. DHCD has financed 35 projects utilizing \$12,374,104 in funding to provide 935 units and/or beds.

Freezing Weather Plans

In fiscal year 1991, the State of Maryland encouraged local governments to plan formally for the needs of homeless people during periods of freezing weather. All 23 Maryland counties and

Baltimore City prepare Freezing Weather Plans that outline resources, facilities and procedures for assisting homeless citizens during the coldest days of the winter months.

Each local jurisdiction submits their freezing weather plan to DHR as part of its homeless services funding request. This ensures that local jurisdictions review and amend their freezing weather plans annually. OTS provides local jurisdictions with guidelines on plan preparation, model examples of freezing weather plans, and comments on completed plans. Plans submitted share a key characteristic: the formation of partnerships among a wide range of local government agencies that previously had very little involvement in homelessness. Over the years these partnerships have grown and strengthened.

Domestic Violence Program

DHR's Office of Victim Services provides safe refuge and support services to victims of domestic violence and their children. Services are provided by community agencies through purchase of service contracts/agreements. There are 21 domestic violence programs serving 24 jurisdictions (15 programs directly provide shelter; 6 arrange housing through safe home networks, hotels or motels). Each program maintains a 24-hour crisis hotline. In order to prevent homelessness, the Domestic Violence Program provides crisis counseling, advocacy and court accompaniment to victims, helping them either to set up a new living situation or to get a court order to have the abuser removed from the home.

Emergency Shelter Grants Program

DHCD's Emergency Shelter Grants Program (ESG) provides federally funded competitive grants to local governments to support the following costs of emergency and transitional shelters: maintenance and operations, case management and essential services, and a portion of staffing costs. A portion of the grant may be used for homelessness prevention activity, such as for one-time cash assistance to prevent eligible families from being evicted. Typically, Community Action Agencies or nonprofit organizations operate these homeless programs, although some are administered by agencies of local governments.

3. To Help Homeless Persons Make the Transition to Permanent Housing (including persons with special needs who require services to achieve and maintain independent living)

A final critical component of the State's Continuum of Care is helping families and individuals transition to permanent housing. DHCD operates several programs to help homeless persons make the transition to permanent housing. One is the Rental Allowance Program which provides rent subsidies to homeless families and individuals who are homeless or are threatened with becoming homeless. In addition, the Department operates the Group Home Financing Program which can be used to help homeless persons with special needs make the transition to permanent housing. Also, the Emergency Shelter Grants Program supports transitional shelters and services, including case management services, to help people attain self-sufficiency.

Housing Counselor and Aftercare Program

DHR's Housing Counselor Program also assists the homeless in moving to permanent housing. The program began in July 1989 to fund housing counselors in three Maryland counties,

Baltimore, Prince George's, and Washington. In 1993, the Program was broadened in scope to include serving single homeless people in Baltimore City. In 1995, it was expanded again to include Montgomery County.

Housing counselors are responsible for assisting families experiencing a housing crisis to locate, obtain and maintain safe, decent affordable housing. Counselors also perform resource development activities, such as working with landlords and overseeing roommate referrals, to help expand the availability of affordable housing.

Emergency and Transitional Housing and Services Program

DHR's Office of Transitional Services provides housing and supportive services to help homeless individuals and families make the transition to permanent housing. The table below provides a summary of expected activity to assist the homeless during the coming year. It does not include persons to be assisted under federal competitive grants.

HOMELESS ASSISTANCE - DEPARTMENT OF HUMAN RESOURCES	
UNITS OF MEASUREMENT	FFY 2005/SFY 2006 EST. ASSISTANCE
EMERGENCY AND TRANSITIONAL HOUSING SERVICES	
Bednights in Emergency Shelters	80,000
Bednights in Transitional Facilities	65,000
Shelters and Transitional Facilities	80
Emergency Services	27
HOMELESS PREVENTION	
Housing Counseling	500
Eviction Prevention	12,000
Service Linked Housing	2,000
EMERGENCY FOOD ASSISTANCE	
Occasions of Service Annually	450,000
Pounds of Food Distributed	4,500,000
DOMESTIC VIOLENCE PROGRAM	
Bednights for Domestic Violence Victims and Their Children	65,000
WOMEN'S SERVICES PROGRAM	
Bednights for Women and Children	85,000

*SEE THE DHR ANNUAL REPORT ON HOMELESSNESS SERVICES FOR ADDITIONAL INFORMATION.

PERSONS WITH SPECIAL NEEDS

The mentally ill, physically disabled, developmentally disabled, persons with alcohol or other drug addictions, persons with AIDS and related diseases, the elderly requiring supportive services, and the frail elderly are special need groups requiring housing assistance. Activities to be undertaken to assist persons with special needs include new construction, substantial rehabilitation, acquisition, moderate rehabilitation, preservation, lead paint abatement, or related infrastructure improvements for rental housing, rental assistance, and supportive facilities and services.

The Elderly and Frail Elderly

The Maryland Department On Aging (MDoA) supports many programs designed to meet the housing and supportive service needs of Maryland's elderly, and especially frail elderly. DHCD is seeking partnership opportunities with the MDoA, DHR and DHMH to expand affordability in the assisted living market. The table below shows the number of persons MDoA expects to serve during SFY 2006:

MARYLAND DEPARTMENT OF AGING	
UNITS OF MEASUREMENT	ESTIMATED ASSISTANCE FFY 2005/SFY 2006
Congregate Housing Program Participants	885
Senior Assisted Living Group Home Participants	800
Medicaid Waiver Participants	3,135
Senior Care (in home care) Program	3,954

Persons with HIV/AIDS

In order to improve housing opportunities for persons with HIV/AIDS, DHCD works with the AIDS Administration of DHMH to provide housing assistance and supportive services to persons with HIV/AIDS. The HOPWA program is carried out in Allegany, Caroline, Cecil, Dorchester, Garrett, Kent, St. Mary's, Somerset, Talbot, Washington, Wicomico, and Worcester Counties (the State's remaining areas receive HOPWA funding directly). DHCD uses its portion of the HOPWA grant to operate a tenant based rental assistance program. The AIDS Administration provides supportive services through the HOPWA program. Linkages formed with local social service providers support the social service needs of persons with HIV/AIDS.

Activities undertaken with the grants are carried out in accordance with the guidance required of grant recipients under the Ryan White Comprehensive Emergency (CARE) Act, and the Statewide Coordinated Statement of Need (SCSN) for the State of Maryland. The activities DHCD and DHR are carrying out build on previous competitive grants the State has received to provide supportive services and short term housing assistance. In addition, DHCD will continue its existing policy of assisting persons with HIV/AIDS through its group home programs. (NOTE: See the "Specific Information" section below for a detailed write up on how the State of Maryland will operate the HOPWA entitlement program.)

Individuals with Mental Illness

The Mental Hygiene Administration of the Department of Health and Mental Hygiene through its public mental health system provide services to individuals with mental illness including inpatient and outpatient services. Currently the Mental Hygiene Administration funds 2,347 adult residential rehabilitation program (RRP) beds in the community. Many of these RRP sites have been financed by DHCD and HUD (811 grant). Downsizing at the state hospitals over the past five years has added to the number of persons receiving residential services throughout the state. Over the next five years at minimum, five hundred additional mental health consumers will be in need of affordable housing services in order to be discharged from state hospitals. This is based on the Statewide Needs Assessment for Mental Health Services and the Mental Hygiene Administration's Five-Year Plan for Downsizing and Consolidating of State

Psychiatric Hospitals. The Mental Hygiene Administration also reports that they currently have over 800 adults on the waiting list for beds, and that an additional 500 patients in the RRP program are in need of affordable housing.

MHA is developing Evidence Based Practice projects in the area of Assertive Community Treatment (ACT). The goal is to provide a team approach to intensive treatment and case management for individuals with severe persistent mental illness. These individuals may be homeless or living in temporary living situations. Safe, stable and affordable housing is a key component to a successful outcome in this project. The table below shows the number of persons with mental illness that are served through the Public Mental Health System.

DEPARTMENT OF HEALTH AND MENTAL HYGIENE Mental Hygiene Administration	
UNITS OF MEASUREMENT	ESTIMATED ASSISTANCE FFY 2005/SFY 2006
Individuals Discharged from Inpatient Treatment – Adults	4,967
Individuals Discharged from Inpatient Treatment – Children	2,542
Persons with SMI receiving Employment Services	1,151
Persons with SMI receiving Residential Rehab	2,953
Number of Adults receiving psychiatric support	8,123
Number of Adults who receive public mental health	45,283
Number of Children receiving community based services	44,147
Number of Children receiving psychiatric support	9,134

Persons With Developmental Disabilities

The DHMH's Developmental Disabilities Administration (DDA) plans, develops, and directs a statewide comprehensive system of services for persons with developmental disabilities and their families. Services include programs for individuals with mental retardation, cerebral palsy, spina bifida, epilepsy, and severe communicative disorders. The DDA coordinates its work with other government, voluntary, and private health, education, and welfare agencies.

The DDA operates residential facilities and also provides funds for purchased care, group homes and apartments, small residential centers, and daytime programs for developmentally disabled persons. In addition, the Administration funds Family and Individual Support Services, and Supported Employment Programs. DHCD works with the DDA by financing group homes for persons with developmental disabilities. As with persons with mental illness, DHMH coordinates service delivery to persons with developmental disabilities through DHMH's Long Term Managed Care Committee. The table on the next page shows projected activities of both housing and supportive services that the DDA expects to provide in SFY 2005:

DEPARTMENT OF HEALTH AND MENTAL HYGIENE Developmental Disabilities Administration	
UNITS OF MEASUREMENT	ESTIMATED ASSISTANCE FFY 2005/SFY 2006
Number of Individuals Served	22,020
Number of Individuals receiving home based services	7,783

Number of Individuals moved out of State Centers	13
Clients receiving community residential services	4,847
Clients in Day programs	5,557
Summer Program	1,882
Family Support Services	2,862
Individual Family Care	225
Individual Support Services	5,251
Behavioral Support Services	1,300
Community Supported Living Arrangements	1,179

Persons With Alcohol and Drug Addictions

The Alcohol and Drug Administration (ADA) of the Department of Health and Mental Hygiene will provide supportive services to individuals on both an in-patient and outpatient basis, and will provide housing with supportive services in residential homes and halfway houses. DHCD also finances group homes for persons with drug and alcohol addictions. Also, as with persons with developmental disabilities and mental illness, DHCD and DHR work together through DHMH's Long Term Management Care Interagency Committee to work toward the best possible care for persons with alcohol and drug addictions. The table below shows the number of persons the ADA will assist in the next year:

DEPARTMENT OF HEALTH AND MENTAL HYGIENE Alcohol and Drug Abuse Administration		
UNITS OF MEASUREMENT	PROGRAMS/ FACILITIES	ESTIMATED ASSISTANCE FFY 2005/SFY2006
Outpatients	65	27,000
Residential Clients	25	6,000
Halfway House	19	570
Methadone Maintenance	18	7,000

BARRIER REMOVAL

The State of Maryland's barrier removal efforts will focus on a number of issues this year. This includes continuing work on building codes, continuing to carry out fair housing activities, and continuing work to help provide housing to persons with disabilities through the Olmstead Housing Task Force, the Group Home Financing Program, and the Homeownership for Persons with Disabilities programs.

First, the Department through Maryland Codes Administration will continue its work on building codes to provide fair housing, to help provide housing for persons with disabilities and, to provide decent, safer, accessible and more energy efficient housing.

Second, the Department will continue its work on the State's new rehabilitation code to make it easier to rehabilitate older buildings. This should help overcome some of the barriers that limit the supply of affordable housing as identified in the Five-Year Plan. This effort will also support

the revitalization of Maryland's older communities, another goal of the Five-Year Plan. Specifically in the coming year:

- The Department will provide technical assistance to communities undertaking housing rehabilitation activity.
- The Department will evaluate rehabilitation projects to determine how best to provide assistance in code compliance and permitting.
- The Rehab Code Hotline (a toll free number for technical assistance on code-related issues) will continue to be used to help people determine the code requirements for their projects.
- DHCD will evaluate the model rehabilitation codes recently developed on the national level by the International Code Council and the National Fire Protection Agency. Both of these codes are based in part on the Maryland Code, and may offer additional benefits to rehabilitation projects in Maryland.

In addition, in its Analysis of Impediments to Fair Housing Choice, DHCD's (aside from offering a wide range of programs to help providing fair housing for minorities, families, persons with disabilities and other protected classes) continues to focus on fair housing education, with the MCHR carrying out enforcement actions. DHCD will implement its fair housing plan to ensure that everyone has equal access to housing without regard to race, sex, religion, national origin, handicap, sexual preference, or marital status. Specifically, DHCD has awarded a grant to the Greater Baltimore Community Housing Resource Board, Inc. (GBCHRB), to provide fair housing education and training to residents of the non-entitlement counties in Maryland. The project is aimed at increasing the awareness of residents of these communities about their rights against housing discrimination. Fair housing outreach plans in the coming year include:

- Distribution of free fair housing posters and basic resource guidebook in libraries, community centers, nonprofit organizations, governmental agencies, banks, and other businesses. (Brochures and posters will be made available in English, Spanish, Korean, and Russian.)
- A toll-free telephone line (800-895-6302) available statewide for fair housing counseling, information, and referral.
- Development, distribution and support of an individualized *Housing Curriculum* (K-12) for each of the counties.
- Development and distribution of individualized *Self-Help Guides to Fair Housing* for each county.
- Developing and conducting fair housing training for real estate personnel, realtors, developers, lenders and insurers, and
- Highlighting the issue of fair housing on GBCHRB's cable-TV show *Neighborhood Beat* on each county's cable system.

In addition to the above, DHCD will continue to use its Group Home Financing Program (GHFP), Special Housing Opportunities Program (SHOP), and its Homeownership for Individuals with Disabilities Programs to help integrate persons with disabilities into the community. GHFP and SHOP are specifically designed to assist the State with setting up small residential homes in the communities for special needs populations. The majority of homes financed under the program are to DHMH licensed providers who are caring for developmentally disabled or mentally ill many of whom previously resided in institutions. Very few other States provide this financing tool. The majority of homes financed under the program are for DHMH licensed providers who are caring for developmentally disabled or mentally ill, many of whom previously lived in institutions. While the Olmstead decision only addressed the right of the

mentally ill to live outside of institutions, GHFP encompasses a much broader definition of special needs populations ranging from the developmentally disabled, juveniles, homeless, mentally ill, etc. The Homeownership for Individuals with Disabilities program provides mortgages at 3% for disabled individuals to purchase their home. In addition, as noted above, DHCD will also implement a new bridge subsidy demonstration program to assist persons with disability with temporary housing while they await full time housing assistance.

While DHCD is undertaking these efforts, the Maryland Commission on Human Relations (MCHR), which has primary responsibility for carrying out fair housing activities, will continue its work toward providing fair housing opportunities to all of Maryland's citizens. Activities the MCHR will carry out include fair housing testing, complaint investigation, and legal action as appropriate where fair housing violations are found and not otherwise resolved.

COORDINATION

During the next year, the State of Maryland will undertake a number of efforts to improve coordination among State agencies, local governments, and nonprofit organizations.

- To improve the ability of non-profits to deliver housing and/or other services, DHCD will continue to set aside money from its HOME program to assist CHDOs build their capacity to better serve low-income persons. Some of these entities are also Community Action Agencies that carry out anti-poverty programs.
- DHCD is working with the AIDS Administration to administer the HOPWA program. The State became a HOPWA entitlement earlier last year (see the "Specific Information" section below). The AIDS Administration is the primary operator of the grant, but subgrants a portion of the funds to DHCD to carry out housing activities. . Funds will be used in non-entitlement jurisdictions through a network of local administrators. (NOTE: The State's HOPWA entitlement jurisdictions already receive HOPWA funding under the non-competitive portion of this program.)
- DHCD will work with MDE to continue to abate lead paint, including applying for HUD lead paint abatement funds. These funds will be coordinated with the State's own lead paint abatement programs (see below).
- DHCD will continue to fund its Homeownership for Individuals with Disabilities Program, working with DHMH and other agencies to enable persons with disabilities to purchase their own home.
- DHCD will work with the State's Public Housing Authorities to assess interest in the issuance of additional Grant Anticipation Revenue Vehicle (Garvee) Bonds to help them rehabilitate their properties. (See the discussion on Public Housing below.)
- DHCD's Division of Neighborhood Revitalization will collaborate with the 13 organizational partners of the Department's Catalyst Training Academy to provide state of the art education and technical assistance on best practices and financial products to respond to clients' changing needs.
- DHCD's Division of Neighborhood Revitalization will coordinate with the Governor's Office of Business Advocacy and Small Business Assistance (GOBA) and the Office of Minority Affairs to increase their awareness of the Neighborhood BusinessWorks (NBW) and MD Capital Access Program (MCAP) and the gap financing and credit assurance/loan loss reserves available for start-up and expanding small and micro businesses located in revitalization areas across the State.
- DHCD's Division of Neighborhood Revitalization will continue to collaborate with the US

Small Business Administration on its annual Small Business Awards Breakfast and Trade Show to promote the Neighborhood BusinessWorks Program and celebrate the small businesses in the state which NBW assists.

- DHCD's Division of Neighborhood Revitalization will work with the Small Business Development Center Network and other providers of support to small and micro business (e.g., Morgan State University) in order to generate new referrals of small businesses seeking gap financing.
- DHCD's Division of Neighborhood Revitalization will coordinate with the MD Dept of Environment and the US Dept of Agriculture to cross refer infrastructure projects to the most appropriate funding source.
- DHCD's Division of Neighborhood Revitalization will continue to coordinate marketing of the Community Business Tax Credits with the MD Comptroller's Division of Revenue Administration and with business membership organizations including the MD Bankers Association, MD Society of Accountants, MD Association of Certified Public Accountants, MD Chamber of Commerce
- DHCD's Division of Neighborhood Revitalization will continue to coordinate with the MD Departments of Natural Resources, Health and Mental Hygiene, Aging and Transportation regarding projects that can be joint funded
- DHCD's Division of Neighborhood Revitalization will continue to coordinate with the MD Department of Planning in assisting with well planned development and community revitalization across the state
- DHCD's Division of Neighborhood Revitalization will continue to coordinate with its primary customers - local governments, community development corporations, nonprofit organizations, and small businesses to provide a variety of technical and financial resources
- DHCD's Division of Neighborhood Revitalization and the State's Office of Minority Affairs (OMA) will coordinate to increase the awareness of minority and women owned businesses and those with disabilities who contact their Office about MBE certification about nontraditional financing. This includes the loans, loan guarantees and lines of credit that Neighborhood BusinessWorks offers for both small businesses and micro entrepreneurs. OMA will add a link to NBW on its web site.

OTHER ACTIONS

The State of Maryland will undertake a number of other actions to help implement the goals of the Consolidated Plan in the coming year:

Local Government Revitalization Strategies. DHCD will continue to provide technical assistance to help local governments designate their Smart Growth and revitalization areas.

Institutional Structure. The State will use inter-departmental forums to coordinate resources, develop consistent policies and methods to achieve stated goals and objectives. As noted above, DHCD will enact two new policies this year to improve the ability of developers to provide affordable rental housing, through both the streamlined bond program and the interest rate lock-in program.

Low Income Housing Tax Credits. DHCD has a uniform application and process for allocating tax credits that is also used in the award of rental housing funds from State and federal resources. The uniform application and allocation process was developed in 1995 to improve coordination of all programs providing funding for multifamily rental housing projects.

Federal Low-Income Housing Tax Credits will continue to be awarded through DHCD's uniform allocation process for multi-family housing.

One or more competitive rounds are held annually and awards are based on the criteria outlined in the state's "Qualified Allocation Plan" (QAP) and in the Multifamily Rental Financing Program Guide. These plans are reviewed periodically and updated in accordance with the department's goals, industry standards and periodic revisions to Section 42 of the Internal Revenue Code. An update to the QAP and Guide will become effective in the Spring of 2005 and will guide financing and allocation decisions for the next year. In addition to maintaining the Department's goal of financing projects with experienced development teams, high development quality, a strong market demand, and high public purpose, notable changes in the latest update include:

- Mandating the installation of hard wire or wireless data transmission technology for high-speed internet access for projects
- Increased maximum thresholds for construction costs
- Tightening criteria considered in evaluating development and management company experience, and
- Encourage development of affordable housing in community revitalization areas, near transit and metro locations, and in vibrant communities as evidenced through homeownership, employment, and education indicators.

Public Housing. DHCD does not operate public housing. However, it does work with Public Housing Agencies (PHAs) to help them construct or rehabilitate affordable rental housing through its Partnership Rental Housing Program. PHAs have also completed for State funds and tax credits to rehabilitate or develop public housing units.

For the past several years, DHCD has worked with HUD, and the City of Baltimore, and private developers to repair or replace all of Baltimore City's public housing high-rises. This effort cost an estimated \$293.5 million with DHCD providing \$65.3 million in Partnership Rental Housing funds, as well as other State funds, federal low-income housing tax credits, and tax-exempt bond proceeds. The federal government, the City, and the private sector paid the rest. All of the high-rises that have been scheduled for demolition have been demolished. and new, low-density units will be built either on the sites of the old high-rises or on scattered sites throughout the Baltimore area. Three of the four on-site replacement developments are complete and the other one is under construction. Construction of the scattered site projects is nearing completion.

The goal of the initiative is to change not only the physical environment for residents through lower density, high quality, mixed-income housing which is architecturally integrated with surrounding communities, but also to address the personal development of individuals and families through supportive services and the promotion of self-sufficiency. A community and support services plan, a requirement of both the federal and State funds, has been developed for all projects. The focus of these plans is job training, education, and employment. The Baltimore City Housing Authority is responsible for tracking progress made toward self-sufficiency.

The development of resident initiatives is also part of this program. Residents have consistently been included in the planning of the new communities, primarily through resident councils. They will continue to work with the Housing Authority and management companies to help screen residents, undertake community projects and serve as an advisory group. The annual income

of most of the public housing families living in the redeveloped communities will range from about \$8,000 to \$17,000 per year. Lastly, in recognition that welfare reform will have an impact on the majority of residents in the redeveloped properties, partnerships with the private sector and numerous training and employment programs have also been developed to assist residents become self-sufficient.

In addition to the above, DHCD has been a financing partner for other PHA's HOPE VI projects and will work with the State's PHAs to issue the State's second round of Garvee Bonds. DHCD became the first State to issue Garvee bonds in partnership with PHAs earlier this year. Garvee bonds are bonds financed against future capital appropriations. In the case of PHAs, these bonds would be issued against federal Public Housing Capital Grant funds. Funds from the bonds would be used to rehabilitate and repair local public housing units. DHCD expects that the next round of Garvee bonds will be issued in 2005.

Preservation of Affordable Housing. According to HUD the average household income for residents of federally assisted private rental housing is about \$7,000 a year. Because few other housing programs are capable of such deep subsidies, preservation of Maryland's stock of project-based Section 8 housing is a major goal of DHCD. DHCD will work pro-actively with federal and other public and private partners to preserve this valuable affordable housing resource.

Preservation efforts will be carried out through existing programs that finance the acquisition and rehabilitation of existing low-income properties. These programs include the Maryland Assisted Housing Preservation Act which provides for ample notice, relocation and other protections for residents of assisted housing. The notice requirements will allow DHCD time to work with local government and other stakeholders on a case-by-case basis to provide incentives for owners, who would otherwise opt-out of the Section 8 program, to keep their projects affordable. The department also expects to strengthen its existing multifamily portfolio through the use of bonds by re-capitalizing projects in order to provide capital improvement and capital reserve funds.

Lead Paint Abatement. The State of Maryland will be pro-active in its efforts to address the lead paint issue. DHCD received a \$3 million, 3 year lead paint grant from HUD last year which will be used to abate lead hazards in both single family and multi-family housing. Actions to be taken will include:

- Providing grants to property owners to abate lead paint
- Providing technical assistance to property owners to abate lead paint
- Improving the screening of children as required under Medicaid regulations
- Improving outreach to families and screening children through local health departments, and
- Stepped up enforcement of existing lead laws included increasing the properties to be registered, enforcing risk reduction standards in registered properties and ensuring units with unacceptable lead levels are not re-occupied until the lead hazards have been abated.

SPECIFIC INFORMATION

The information below provides detailed guidance on how the State will operate the HOME, CDBG, and ESG programs during the coming year. Included is information on the application process, threshold criteria, rating and ranking, and other program requirements to be met by HOME, CDBG, or ESG program applicants.

DHCD expects to receive the following FFY 2005/SFY 2006 allocation of funds from HUD for the CDBG, HOME, and ESG programs:

- CDBG - \$8,979,468
- HOME - \$7,814,492
- HOME ADDI - \$191,464
- ESG - \$599,886
- HOPWA - \$335,000

COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

The Maryland Community Development Block Grant Program is a federally funded program designed to assist units of local government with activities directed toward neighborhood revitalization, housing opportunities, economic development and improved public facilities and services. Congress initiated the program in Title I of the Housing and Community Development Act of 1974 and provides funds to non-entitlement areas of the State. Non-entitlement areas are non-urban counties with populations less than 200,000 and municipalities of less than 50,000 population. The Maryland CDBG program is administered jointly by the Departments of Housing and Community Development (DHCD) and Business and Economic Development (DBED).

State Fiscal Year 2006 Allocation

For SFY 2006 (FFY 2005), Maryland anticipates an allocation of \$8,979,468. The allocation is divided into the following categories:

STATE OF MARYLAND CDBG ALLOCATION – FFY 2005	
State Administration (2% + \$100,000)	\$279,589

Technical Assistance (1%)	\$89,795
Community Development (72% - \$600,000)	\$5,865,217
Special Projects	\$500,000
Economic Development (25%)	\$2,244,867
TOTAL	\$8,979,468

In addition to the formula allocation, DHCD expects to receive about approximately \$660,000 in program income for the CDBG program in the coming year. As per our discussion on CDBG program income below, program income will be used for the same purposes from which it was generated.

CDBG Match Requirements

The State will match the two- percent administrative allowance with State general funds. The one percent Technical Assistance funds will be used to provide technical assistance to grantees and potential CDBG recipients, aid in the development and implementation of revitalization strategies in non-entitlement areas, increase the capacity of local recipients and subrecipients to utilize CDBG funds and compile infrastructure needs within nonentitlement areas.

Program Objectives

The primary objectives of the Maryland CDBG program are to provide decent housing and necessary supporting infrastructure, preserve and develop viable communities through the expansion of economic opportunities, and meet the critical needs of Maryland's communities. The Maryland CDBG program provides public funds for activities that meet at least one of the following national objectives as required by Title I of the Housing and Community Development Act of 1974, as amended:

- gives maximum feasible priority to activities that will benefit low and moderate (LMI) persons and households having an income equal to or less than the Section 8 lower income limits established by HUD;
- aids in the prevention or elimination of slums or blight; or
- meets community needs that are of an urgent nature or an immediate threat to community health and welfare.

Additional Maryland CDBG program objectives include:

- revitalizing older neighborhoods and established communities;
- leveraging CDBG funds with other public assistance programs and private resources;
- directing growth to existing population centers;
- providing essential public services to low and moderate income persons
- encouraging collaboration with Maryland State and local programs focused on community development efforts

COMMUNITY DEVELOPMENT PROJECTS

Application Process

Applications for community development projects are accepted annually on a competitive basis. The funding round is announced in advance of program opening, and applicants are given a minimum of 45 days to prepare their applications. Five hundred thousand dollars of the community development set aside are reserved for special projects. Any funds not awarded in the round will be announced to eligible jurisdictions and distributed on a first come, first served basis to projects meeting the minimum standard and approved by the Department. The maximum amount an applicant may seek in the competitive round of CDBG funds distributed by DHCD is \$800,000.

Applications are evaluated in a three-step process: threshold review, project evaluation, and funding recommendations. Only projects that meet threshold requirements set forth in these guidelines and have complete applications submitted by the application deadline date will be rated and ranked in any competitive round.

Threshold Review

Applications in the competitive process are pre-screened by Maryland CDBG program staff for compliance with minimum thresholds. At the completion of the threshold review, applicants whose proposed project applications are not complete or do not meet basic eligibility and threshold requirements will be notified by mail that project review has been terminated.

Each application must meet the following minimum eligibility requirements:

- The applicant is an eligible non-entitlement jurisdiction;
- The proposed activities are eligible under Title I of the Housing and Community Development Act of 1974, as amended;
- The proposed project meets a national objective as required under 24 CFR Part 570;
- The project is located in a Priority Funding area, except for single family housing rehabilitation, where the Secretary determines that the project is necessary to protect public health, alleviate personal economic hardship in an emergency situation or promote economically integrated housing, or where an exception has been approved through the Department of Planning process;
- The applicant meets performance thresholds on prior CDBG grants including timely drawdown of funds, submission of Progress Reports and resolution of monitoring issues.

Performance Thresholds:

Expenditure of certain minimum percentages of previous grants must be met by the last Friday of the week preceding the deadline for submission of the application in the competitive process. These percentages will be announced at the opening of each round and are more fully described in the CDBG Project Evaluation Guide. They will apply to open Maryland CDBG program grants in the Community Development category. Exceptions will be made only under extenuating circumstances, particularly where funds are targeted for recapture by the State but no formal letter has been issued.

Monitoring issues will be reviewed on a case by case basis, taking into consideration the significance of the finding(s) or concern(s), the corrective action(s) taken by the grantee or subrecipient to resolve the issue(s), and the timeliness of the grantee in responding.

For funding of community development projects for which a Project Feasibility and Planning grant was awarded, a required portion of the study must be completed. Waivers of threshold requirements may be granted on a case by case basis when requested in writing prior to the submission deadline for the application.

Resource Allocation Model (RAM)

All CDBG applications are subject to a modified review under a resource allocation model to determine the economic impact of the project. All applicants will be asked to provide additional information for this review.

Project Evaluation

All applications that meet the threshold criteria will be rated and ranked competitively by a review committee composed of Maryland CDBG program staff and other departmental staff with participation from other government agencies when appropriate. Applicants will be given an opportunity to answer the committee’s questions either via phone or e-mail.

Rating is based on a 175-point scale. Point ranges have been established for each criterion to gauge the extent to which the applicant meets the criterion. The following factors will be considered in determining the points assigned. A copy of the rating form is included with the Project Evaluation Guide.

RANKING FACTOR	MAXIMUM POINTS
PUBLIC PURPOSE Consistency (10) Severity of Need (30) Community Support (5)	45 Points
PROJECT IMPACT Impact on Need (10) Benefit to LMI Households (15)	25 Points
PROJECT MANAGEMENT Readiness (35) Accuracy of Costs (10) Capacity (10)	55 Points
LOCAL COMMITMENT/LEVERAGING Local Commitment (15) Leveraging (10) Financial Need (25)	50 Points

Public Purpose/Local Need (45 maximum points)

Severity of Need (30 maximum points). Based on the information in the application, the degree of distress and examples provided will determine the number of points awarded. Distress factors considered include the quality and quantity of existing facilities, including the need for rehabilitation or replacement, condition description, age, adequacy or absence of facilities, services, housing etc. Up to twenty (20) points are awarded where there is indication of unmet need for new or additional services or facilities such as housing rehabilitation, head start centers, streets and sidewalks or developmental centers. Up to five (5) points are awarded where existing physical health and safety conditions are documented. Up to five (5) additional points are given to projects that address imminent health and safety issues such as contaminated wells, failing septic or emergency housing repairs.

Community Support and Involvement (5 maximum points). Maximum points may be awarded based on evidence of community support and involvement in the project, its development and implementation. Letters of general support and participation may include local interest or neighborhood groups, local public or non-profit agencies and individuals that might directly benefit from the project.

Consistency with Local Needs/Plans/Strategies (10 maximum points). Points are awarded based on the degree to which the project fills a need in the community and is specifically identified and consistent with a locally developed revitalization strategy or comprehensive plan (up to 5 points). Maximum consideration is given to projects that are consistent with local plans and most effectively re-use existing buildings and infrastructure (up to 5 additional points).

Project Impact (25 maximum points)

Impact on Need (10 maximum points). Points may be awarded based on the extent to which the project will address the needs and alleviate the existing problems described by the applicant.

Benefit to Low and Moderate Income (LMI) Households (15 maximum points). Maximum points may be awarded to projects where there is a direct benefit to LMI households. Moderate points will be awarded to projects where there is an area wide benefit to LMI households. No points will be given for slum/blight projects where there is no benefit to LMI persons, or where benefit cannot be determined.

Project Management (55 maximum points)

Readiness to Proceed (35 maximum points). Points may be awarded for the extent to which the project is ready to proceed and the implementation schedule is reasonable. The assessment is based on the relative progress of elements such as site control/easements, architectural design or preliminary engineering, other project financing or the development of rehabilitation guidelines. Maximum points (30) may be awarded to applicants that have completed preliminary design and/or engineering, can document that all funding sources are committed, can complete the environmental review process within 60 days of the award date or can otherwise demonstrate an immediate readiness to proceed.

Twenty (20) points are awarded to applicants that can complete the environmental review process and commence the project within 90 days of the award date.

Ten (10) points are awarded for projects that can complete the environmental review process within 90 days and commence the projects within 91-120 days of the award date.

No points are awarded when completion of the environmental review cannot be completed within 90 days or project commencement is projected beyond 120 days of the award date.

Up to five (5) points are awarded based on the reasonableness of the projected implementation schedule.

Accuracy of Costs (10 maximum points). Maximum points may be awarded to projects which best document that project costs have been carefully estimated. Estimates should reflect the applicability and impact of Davis-Bacon wage rates, acquisition, relocation or replacement housing requirements. Preliminary professional studies, appraisals, tax assessments, wage rate determinations are some examples of acceptable documentation. No points will be awarded if documentation of costs is not submitted.

Administrative Capacity (10 maximum points). Points may be awarded for projects based on the general stability and track record of the local government (5 points maximum) and the subrecipient where applicable, as well as the adequacy of staff to implement the project (5 points maximum).

Local Commitment and Leveraging (25 points maximum)

Local Commitment (15 maximum points). The Department will consider the extent to which local funds will be contributed to the project. Maximum points (15) may be awarded to applicants whose local contribution exceeds 20% of the total project costs. Local contribution of 10%-19% of total project costs receives 10 points. Where there is some local contribution but less than 10% of the total project costs, 5 points are awarded. No points will be given where there is no local contribution.

Local funds include cash and any in-kind contributions which materially contribute to the project completion. In-kind contributions must be documented and may include the donation or long term lease of land or buildings, appropriation of local revenues, site improvements or installed infrastructure, deferral of real estate taxes, abatement or payment in lieu of taxes, payment of debt service (including federal and state loans to the local government) or operation and maintenance expenses, provision of public services without charge and administration. The contribution may be provided by the local government or directly by a non-profit sub-recipient.

Leveraging (10 maximum points). The Department will consider the extent to which local and CDBG funds are used to leverage other public and private funds. Points will be awarded based on the documented commitment of funds specifically identified to supplement CDBG funds. Maximum points (10) will be awarded for projects where 50% or more of the project costs are from sources other than local or CDBG. If less than 50% of the project costs are from sources other than CDBG and the locality, five (5) points are awarded. The application will receive no points for leveraging if other funding sources are available but are not sought. Leveraged funds include other public or private grant funds, individual or corporate donations, or public loan funds made directly to the beneficiary.

Financial Need (25 maximum points). Because of the declining availability of grant resources, the Department will consider the extent to which the applicant has sufficiently documented and justified its financial need for CDBG grant funding. Points will be awarded based on the applicant's diligence in seeking alternate funding sources and evidence that the requested grant amount is necessary and reasonable to complete the project. Up to 25 points are awarded to applicants who can provide underwriting analyses, loan/grant determinations from other funding sources, or other substantive proof of financial need by the applicant or subrecipient for grant funds.

Funding Recommendations

The highest rated applications are recommended for funding until the allocation for the round is exhausted or the next highest rated project requests more funds than are available and the project cannot be phased. In that case, the next highest scoring project may be funded. In case of a tie score, the application with the highest combined score on Public Purpose/Local Need and Project Management is funded first.

The committee may recommend an award less than the requested amount with a recommendation to decrease the size, scope and/or costs of the project. A planning grant may be awarded in lieu of project funding where further study is deemed necessary.

Those applications not funded are rejected and are not reconsidered unless the applicant reapplies in a later round or is considered for special projects at the discretion of the Secretary. The application then is competitively rated against the applications received in that round. The Maryland CDBG program has established a minimum point standard of 105 (70%). Applications that receive less than 70% of the total points are not recommended for funding.

Committee recommendations (both for approval and rejection) are reviewed by the Assistant Secretary for Neighborhood Revitalization and forwarded to the Secretary of Housing and Community Development for final approval. In addition to the rating criteria, the Assistant Secretary for Neighborhood Revitalization or the Secretary of DHCD may consider other factors in making funding determinations, including:

- The State's CD objectives and priorities
- The availability of alternate or contributing funding sources for the total project or some of its components
- A reasonable distribution of projects among regions of the State
- The ability to respond to a locality's special needs, and
- The degree of community commitment for the project.

Awards are expected to be announced within approximately 90 days of the application submission deadline.

Special Projects and Planning Applications

Special projects applications may be submitted anytime and are reviewed independently by Maryland CDBG program staff. Five hundred thousand dollars of the CD set-aside is reserved for special projects and planning grants.)

Applications may be submitted for special projects funds based on:

- high priority and emergency need;
- timing of the request is out of cycle; or
- the need for supplemental funding for an existing project.

Planning applications also may be submitted anytime, are reviewed independently by Maryland CDBG program staff and are subject to the minimum point standard. No specific amount is allocated for planning, nor is there a limit on the amount of a planning grant. However, a twenty percent (20%) match is required, of which no more than 5% can be in-kind. (Planning grants for economic development activities can be funded from the economic development set-aside.)

Special project and planning grant funding recommendations are made on a case by case basis to the Assistant Secretary for Neighborhood Revitalization to the Secretary of Housing and Community Development for final approval.

ECONOMIC DEVELOPMENT PROJECTS

Economic Development (ED) funding may be awarded to Maryland's non-urban counties and municipalities for a variety of economic development activities. CDBG-ED is a financing resource to support local economic development initiatives either by direct public improvements to facilitate new industry or through loans to assist businesses. Job creation through business expansion in Maryland's rural communities is the primary objective of the economic development category of CDBG. Additionally, economic development funds may be used by local governments to assist with commercial revitalization projects that will address downtown deterioration and that will promote economic vitality.

Prior to submission of an application to DBED, a pre-application conference is required. If the project proposal is accepted for funding consideration, the conference is followed by an internal review by the Credit Committee. There is no limit to the number of applications a jurisdiction may submit each year in the ED category. There is no maximum grant amount.

The economic development criteria are:

- a. Compatibility with the State's overall ED strategy; contained in the Maryland Economic Development Commission Report, "Strategic Directions for Increasing Maryland's Competitiveness", with emphasis upon the targeted growth industry sectors.
- b. project feasibility;
- c. sources and uses of funds;
- d. LMI benefit - Costs per job;
- e. readiness to proceed;

- f. local commitment;
- g. capacity to administer a grant; and
- h. prior performance in administering grants.

The following are additional areas under which prospective projects are accepted for funding consideration:

- a. projects that diversify the economy of the local region or community, particularly those with defense impacted businesses and industries, to the extent that a significant percentage of jobs are saved or created;
- b. projects that prevent a major plant shutdown; or
- c. projects that foster the development and growth of small and minority businesses including micro-enterprises.

ED applications initially are reviewed by DBED and DHCD for eligibility requirements. Additional reviews are based on criteria established for the category and on benchmarks which determine the "best" ED projects. These include:

- a. amount or percentage of local commitment;
- b. leveraging ratio of owner invested capital, private and other public funds to CDBG is 3:1 or greater;
- c. CDBG cost per job is \$25,000 or less;
- d. number of jobs created for or retained by LMI persons;
- e. percentage of the CDBG financing used for working capital to the total working capital need does not exceed 25 percent;
- f. negotiated interest rate and terms of a loan will reflect the most appropriate amount necessary to make the project feasible;
- g. quality of collateral;
- h. the highest degree to which ED goals are achieved by the project as it pertains to the overall ED strategy.

Deviation from the above criteria will be based on justifiable circumstances and in consideration of the merit of the project as it relates to public benefit and/or increased economic stability.

If the project includes a loan to a for-profit business, the loan is underwritten for an "appropriateness" determination, which includes financial analysis and determination of public benefit.

A site visit may be made to obtain additional supporting information. Recommendations are made and final approval is determined by the DBED Secretary.

The DBED Secretary may approve or reject a recommendation based on the following additional factors:

- a. degree to which the project supports the State's small businesses, especially those owned by minorities;
- b. support of industry that exports goods or services outside the State; or
- c. increased economic vitality and physical attractiveness of downtowns and other concentrated commercial areas.

If two or more projects are evaluated equally, the higher rated project will be the one which ranks first among these priority criteria:

- a. creates the most jobs for LMI persons;
- b. business site is within an enterprise zone; or
- c. makes the greatest impact on the identified needs of the community.

Community Legacy or Local Infrastructure Financing Program Activities Transferred to CDBG

The Community Legacy Program is a State funded initiative to assist local governments and community development organizations to undertake comprehensive neighborhood revitalization strategies. The Program provides funding for both planning and capital projects. It also attempts to leverage other State and federal funds where possible.

Under the Local Infrastructure Financing Program, the Maryland Department of Housing and Community Development (DHCD) issues bonds on behalf of counties, municipalities, and their instrumentalities to finance public purpose infrastructure projects. The program generates savings in the costs of borrowing by pooling the local demand and managing the bond issue.

Eligible portions of approved community legacy applications or infrastructure projects from non-entitlement units of local government that meet a national objective can be funded with CDBG funds at any time. Community Development funds not obligated in a competitive round, special projects or economic development funds may be used to fund eligible community legacy or infrastructure bond activities. While submission of a separate application is not required, recipients must follow all applicable rules, regulations and statute governing the CDBG program.

PROGRAM POLICIES AND PROCEDURES

Funds Transfer

No later than eight months from the award date of the State allocation, DHCD and DBED will consult regarding the status of funds and pending projects to assess the need for transfer of unobligated funds between categories. With mutual concurrence of the Secretaries of DHCD and DBED, unobligated funds remaining in the ED category will be made available for funding CD projects. If sufficient qualifying CD applications are not then pending, the funds may be awarded to the next qualifying special project or rolled into a future competitive funding round.

With concurrence of both agencies, funds also may be transferred between categories at any time during the year to meet additional demand for funds for special projects or community legacy projects.

A review of the Special Projects balance will occur prior to the announcement of the annual CD competitive round. If sufficient projects have not been funded or are not expected to obligate the entire one million dollars set aside, all or a portion of the funds can be used to fund competitive projects.

Administrative Costs

Applicants for community development funds may request that up to 15 percent of the grant be used for general administrative costs. Applicants for economic development funds may request up to 10 percent for administrative costs.

Other Policies and Requirements

1. Applicants may not submit the same project for funding to both DHCD and DBED simultaneously. However, DHCD and DBED may decide to jointly fund an application.
2. Applications submitted on forms from one department or category may be funded from the other without resubmitting the proposal, should DHCD or DBED transfer the application between departments. When applications are transferred from one department or category to another, projects are reviewed against the criteria for the particular category to which they are transferred.
3. DHCD and DBED reserve the right to negotiate with the applicant for elimination of certain portions of the proposed project which do not make a strong contribution and/or for reducing the grant amount, and for the determination of payment terms and schedules when loans are involved.
4. Financial Penalty - The Environmental Review and Request for Release of Funds must be submitted for approval by DHCD within 5 months of the award date. Failure to do so may result in a 10% financial penalty of the grant award. The penalty will be assessed initially from administrative funds awarded. If no administrative funds were awarded, then project funds may be recaptured. The exception shall be for projects with issues identified through screening letters where the CDBG Environmental Officer has been notified in writing.

Further delay in completing the Environmental Review and obtaining a Release of Funds could result in the termination of the grant.

Requests for Additional Funding

A jurisdiction may not apply to DHCD or DBED for additional funds for a previously funded project, unless there are extenuating circumstances surrounding the shortfall. The locality must provide a written explanation of the reasons for the shortfall, including:

1. the reasons for the request for additional funds;
2. verifiable documentation of a significant increase in beneficiaries, if applicable (i.e., job creation), tax revenues, and/or private sector leverage;
3. proof that all alternate funding sources have been exhausted; and
4. documentation of any negative impact on the community if the project is not completed.

All requests for additional funds are subject to review by DHCD or DBED, in accordance with evaluation criteria applicable to the year from which additional funding, if awarded, is allocated. This does not apply to projects that are anticipated to be completed in clearly identifiable stages.

Project Amendments

Circumstances or conditions may develop during the course of a project's implementation which could prompt the grantee to request, in writing, an amendment to the grant. Accordingly, grantees must obtain DHCD or DBED's approval for amendments in the following instances:

1. if the addition of a new, or deletion of an existing activity or project is proposed;
2. if activities in an area other than the approved target or project area are proposed;
3. if the scope of the existing project or activities will change (i.e., number of beneficiaries);
4. if a budget revision is proposed resulting in a transfer between approved projects and activities of a cumulative amount in excess of ten percent of the grant award;
5. in other instances where DHCD or DBED determine an amendment to be appropriate, such as where technical changes in legal or administrative terms occur.

The request for a project amendment shall provide sufficient information to explain and justify the proposed changes. An amendment to a grant agreement resulting from 1. 2., or 3., is subject to the following requirements:

1. citizen participation;
2. State clearinghouse review;
3. environmental clearance.

The request for a project amendment will be reviewed on the basis of eligibility and the evaluation criteria applicable at the time of the amendment request.

A time extension may be granted, generally for one year, when it is determined by DHCD that as a result of unforeseen circumstances, the grantee will not complete a project by the completion date established in the grant agreement. The time extension is processed internally by DHCD and is not subject to the requirements of project amendments listed above.

Funds Recapture

Any funds recaptured through project cancellation, misuse, failure to expend funds in a reasonable period of time, or completion of an activity at a cost savings will be returned to the category from which they were awarded, less any amount eligible for State administration and technical assistance costs, for redistribution to an eligible project. Recapture funds may be transferred to another category or set-aside with the concurrence of the program administrator or the agency, if applicable.

Program Income

Program income is defined as gross income received by the recipient or a sub-recipient directly generated from the use of CDBG funds. It includes, but is not limited to, the following:

1. proceeds from the disposition by sale or long term lease of real property purchased or improved with CDBG funds;
2. proceeds from the disposition of equipment purchased with CDBG funds;
3. gross income from the use or rental of real or personal property acquired by the recipient or a sub-recipient with CDBG funds, less the costs incidental to the generation of the income;
4. gross income from the use or rental of real property owned by the recipient or a sub-recipient that was constructed or improved with CDBG funds, less the costs incidental to the generation of the income;
5. payments of principal and interest on loans made using CDBG funds;
6. proceeds from the sale of loans made with CDBG funds;
7. proceeds from the sale of obligations secured by loans made with CDBG funds;
8. interest earned on funds held in a revolving loan fund account;
9. interest earned on program income pending disposition of the income;
10. funds collected through special assessments made against properties owned and occupied by households not of LMI, where the assessments are used to recover all or part of the CDBG portion of a public improvement.

Program income may be retained by the grantee provided the grantee pledges its general funds to reimburse the State for any financial liability related to negative findings by HUD with regard

to the re-use of income and if:

1. the program income is targeted for an eligible CDBG activity that meets a national objective and for which DHCD or DBED has given approval; or
2. the program income is targeted for use for the "same activity". "Same activity" is defined as one with the same purpose and same location as the activity generating the program income; and
3. completion of the proposed activity will meet time constraints established by DHCD.

A re-use plan for program income, which includes a description of the proposed method to manage the funds and the capacity of the grantee to comply with State and federal regulations, must be submitted as part of the application and approved by DHCD or DBED, depending on the category. The decision to permit retention of program income by the grantee will be made on a case-by-case basis.

Upon the written instructions of DHCD or DBED, a grantee and any sub-recipient shall permit an authorized agent of DHCD to collect, distribute, or in any other manner deal with program income in accordance with such written instructions.

CDBG regulations provide that program income generated by a local government in an amount of less than \$25,000 per year is excluded from CDBG program requirements. The State may use two percent of any program income returned to the State or received and retained at the local level during the program year for administration.

Remaining program income received by the State will be distributed in an expeditious manner for activities in the same category and/or set-aside from which it is derived unless it is transferred to another category or set-aside with the mutual concurrence of both agencies. The distribution will be in accordance with the criteria and method of distribution for the category as set forth in the Consolidated Plan. Any program income that is distributed by the State during the period beginning with the date HUD awards the annual grant to the State and ending with the following year's grant award date is considered to be covered by the current Consolidated Plan. The State is exploring, and may elect to create, a State Revolving Loan Fund in which to collect and distribute program income.

CDBG Monitoring

Every CDBG grant is monitored at least once during the lifetime of the project. Monitoring of planning grants is accomplished through a desk monitoring in which grantees submit a completed checklist and supporting documentation. Staff reviews the information and writes a summary report which is then mailed to the Chief Elected Official within 60 days.

All other CDBG grants are monitored through a visit to the grantee and review of the records on-site. Monitoring of a grantees' capacity to meet compliance, project performance and national objective requirements includes an assessment of the following:

- Overall CDBG management structure;
- Internal procedures and controls;
- Capacity to track projects and activities from the planning stage through applicable major milestones (e.g., release of funds, contract bid and award, etc.) to completion;
- Consistency of the implemented project with the approved plan (as reflected in the grant application, Grant Agreement, and any amendments);
- Capacity of the grantee (and/or its subrecipients) to ensure compliance with the relevant programmatic and compliance requirements.

24 CFR 570.490 and 24 CFR 570.506 describe the Federal record-keeping requirements in general terms. In addition, the Grant Agreement provides additional guidance to grantees on records to be maintained. At a minimum, the grantee's records must provide a full description of each activity assisted, including its location, the amount of funds budgeted, obligated and expended, and the category of eligible activity(ies) being undertaken (pursuant to Subpart C of 24 CFR 570). The records must also be sufficient to document compliance with all other applicable State and Federal requirements. Grantees must have the capacity to provide the various reports periodically required by DHCD, particularly those specified in Exhibit D of the Grant Agreement. The CDBG project records must be maintained for a period of three years after the close-out date of the State CDBG grant from HUD; in the event of litigation, claims, or other unresolved legal or audit issues, however, the three-year period is extended.

The on-site review typically will involve the following types of activities:

- Interview grantee's management, program, and administrative staff (and/or those of their subrecipients, as relevant).
- Inspect project sites, both for completed and on-going CDBG activities.
- Conduct a general review of the project records.

DHCD staff must review the grantee's (and/or subrecipient's) files to determine whether adequate documentation is being maintained to show compliance with the applicable Federal and State requirements. In regard to the local record-keeping system, the Reviewer should look for the following:

- The record-keeping system should be divided into categories that logically correspond to the key components and compliance areas of the project (e.g., citizen participation, environment review, documentation of national objectives, etc.); it should be updated regularly, and maintained in an orderly manner.
- Responsibility for maintaining the CDBG project files may be divided among several individuals. The Reviewer should identify those individuals who have responsibility for maintaining the CDBG files.
- All CDBG files must be secure and safeguarded.
- The records must be easily accessible to appropriate and authorized grantee (or subrecipient) staff, as well as State and Federal officials or their designees (e.g., the files may not be kept in someone's home or automobile).
- The files must contain adequate source documentation.

As part of their review, DHCD staff complete checklists to document their review and conclusions concerning projects and activities. Projects delayed due to circumstances beyond the grantee's control are discussed with the grantee and appropriate rescheduling is agreed upon.

Projects/activities for which little or no progress has been made, or which appear to be ineligible or inconsistent with national objectives, or which exhibit non-compliance with other pertinent State or Federal requirements result in a finding or matter of concern. DHCD monitoring staff considers and offers proposed remedies (including technical assistance) and/or required corrective actions that will remove impediments to progress or address non-compliance.

A written report is completed and issued to the Chief Elected Official within 60 days of the visit. The report stipulates the required corrective actions and the time frame for completion. Follow up continues until all findings and matters of concern are adequately addressed and resolved.

Suspension of Method of Distribution for Presidential Disaster Declarations

In the event of a Major Disaster Declaration by the President of the United States for a city, town, or unit of local government located in the State of Maryland, the Secretary of DHCD shall have the authority to waive the Method of Distribution or any other State policies for the CDBG program to address emergency needs of impacted communities. This will be done in consultation with HUD and the program will operate within the parameter of the law or laws addressing the CDBG program.

HOME INVESTMENT PARTNERSHIP PROGRAM

Maryland will use the majority of its HOME funds in conjunction with ongoing State programs to fill gaps in State funding, make projects feasible and increase the number of low-income persons to be served in State-funded projects. HOME funds will be used in conjunction with projects utilizing any combination of State appropriated and bond-issued funds, or low-income housing tax credits administered by the Community Development Administration (CDA). CDA's Single Family Housing Programs consist of the Homeownership Programs and Special Loans Programs units; and the and the Multifamily Housing Programs consist of the Housing Development Programs, Rental Services Programs and Contract Administration Unit.

HOME FUNDING ALLOCATION

DHCD expects to receive a total of \$8,005,956 HOME funding during the coming year. The FFY 2005 allocation includes: \$7,814,492 from the HOME formula allocation and \$191,464 from the FFY2005 ADDI allocation.

STATE OF MARYLAND HOME ALLOCATION - FFY 2005/SFY 2006	
Multifamily Housing Programs	\$4,300,000
Single Family Housing Programs	\$1,533,782
HOME Initiatives	\$1,000,000
CHDO Operating Assistance	\$390,725
Administrative Fees [^]	\$781,449
TOTAL	\$8,005,956
<i>CHDO Set Aside*</i>	<i>\$1,172,174</i>

*As required by federal law, a minimum of 15 percent of the State's formula HOME allocation, or \$1,172,174, will be reserved for use by Community Housing Development Organizations (CHDOs). Included within that amount, up to 10 percent, or \$117,217, may be used for predevelopment costs for CHDOs. The required set aside(s) will be met within the HOME program uses as set forth in the above table.

[^]The amount shown for administrative fees includes 10% of the FFY2005 regular HOME allocation. The statute governing FFY2005 ADDI allocation (and all future year ADDI allocations) does not permit using 10% for administrative fees.

In addition to the regular HOME allocation, DHCD expects to receive about \$800,000 in HOME program income in the coming year. This estimate is based on historical amounts of program income we have received in previous years. HOME program income is required to be spent on a "first come, first served" basis. Based on our use of HOME funds, we would estimate that two-thirds of the program income would be used to construct or rehabilitate multi-family rental housing, and one third of the program income would be used for providing new homeownership opportunities and single family rehabilitation.

The State will administer HOME funds allocated to State programs by directly funding projects which receive State resources and by competitively allocating funds directly to projects or programs proposed by local governments, nonprofit organizations, and housing sponsors and developers. HOME funds may also be used in conjunction with the Community Legacy Program.

HOME funds may be requested by sponsors and/or local governments as part of a project application. CDA staff may also propose the use of HOME funds during project underwriting. HOME funds will be awarded to projects either as individual projects or as part of a financing package. All projects using HOME funds are presented to DHCD's Housing Finance Review Committee (HFRC).

In addition, HOME funds will be awarded where possible to stimulate new ideas and projects that meet the needs identified in the Consolidated Plan. These HOME Initiatives funds will be used for new and creative ideas worth testing, model pilot programs and projects and activities not permitted within regular State programs or for which there is no State funding.

Funds for Initiatives projects will be allocated in competitions with at least one round of awards each year. Awards will be made on a priority ranking system using criteria including:

- **Project readiness**
- **Extent that the project addresses documented needs**
- **Preference for projects which include local government resources**
- **Local and community support**

- **Demonstrated capacity**
- **General geographic distribution, with highest points for projects located in designated growth/revitalization areas.**
- **Preference for CHDOs with CHDO eligible activities**
- **Preference for nonprofit organizations, local governments and joint venture partnerships**
- **Preference for lowest income served, and**
- **Preference for longest term low-income occupancy**

The beneficiaries to be served are very low-income renters, homeless persons, persons with special needs, low-income renters, very low-income homeowners, and low-income homeowners.

Funds Transfer

The HOME funds to be used in conjunction with on-going DHCD housing programs and the HOME Initiatives Program will be allocated to these uses for up to eight months. After that time, unencumbered funds may be moved to any other HOME uses to meet additional demand for funds or for special projects, including the Community Legacy Program.

Geographic Areas for Use of State HOME Funds

The State will primarily use its funds in HOME non-participating jurisdictions. There are six local participating jurisdictions within the State which have their own HOME funds. They are Baltimore City, and Anne Arundel, Baltimore, Harford, Howard, Montgomery and Prince George's Counties. State HOME funds for the non-participating jurisdictions are restricted to PFAs except as outlined in the geographic targeting discussion provided earlier in the Plan.

Community Housing Development Organizations (CHDOs)

The State of Maryland will reserve not less than 15 percent of its HOME allocation for use by CHDOs. Within the CHDO set-aside, 10 percent may be used for project specific technical assistance and pre-development costs for nonprofit organizations. Although the set-aside above the minimum requirement by law is not provided for nonprofits, nonprofits will be given additional preference in the competition for funds. In addition, up to 5 percent of the State's HOME allocation will be made available for operating expenses of CHDOs.

The set-aside for use by CHDOs will be administered in the same manner as other HOME funds, that is, they will be awarded either as part of the existing program funding or through the HOME Initiatives competition process. It is anticipated that CHDOs will use funding for acquisition, moderate and substantial rehabilitation and construction of housing for low and moderate-income persons. The State does not anticipate any barriers to utilizing the CHDO set aside; however, if funding is being committed more slowly than necessary to use the required amount, extra measures will be taken to promote the use of the set-aside. The measures will include aggressive marketing for applications, expedited processing and ultimately, if need be, reservation of the balance of uncommitted HOME funds solely for projects that meet the required set-aside.

The funds set-aside for project-specific technical assistance and pre-development costs will be administered by CDA. CDA will solicit participation by potential CHDOs and will certify CHDO

eligibility by determining that applicants meet the criteria outlined in the HOME program regulations. Certified CHDOs will be eligible for HOME Seed Money and Technical Assistance loans. A CHDO may apply to use HOME funds to pay reasonable and customary pre-construction costs of a project. All costs must be related to a specific project, which, if deemed feasible, would be eligible to receive HOME funds for development. HOME Seed Money and Technical Assistance loans will be provided to CHDOs on a first-come, first-served basis. The loans will be zero percent interest with deferred principal. Repayment will be due at settlement of the construction or permanent loan. CDA has developed loan documents consisting of a Loan Agreement and a Promissory Note, and funds will be released upon execution of loan documents with CDA.

Guidelines for Homeownership Assistance

The State of Maryland will use HOME funds to assist individuals and families purchasing units in approved single family housing projects. HOME funds will reduce the cost of buying affordable housing in conjunction with the State administered first mortgage programs and through projects approved under the Initiatives Program. Households with incomes at or below 55 percent of the Statewide median for a family of four will be targeted. The State has elected to recapture the HOME Investment if the property is sold within the affordability period.

Definition of Modest Housing

Homeownership units assisted with HOME funds must be “modest housing”. The State defines housing to be modest if the sales price (when a property is purchased) or the after-rehabilitation value (when a homeowner property is rehabilitated) does not exceed 95% of the median sales prices for housing in the area per the FHA Section 203(b) single family mortgage limits.

Form of Subsidy

HOME funds will be used in homeownership programs to directly assist the home buyer with down payment and closing costs or to reduce the sales price of the home by providing a deferred payment mortgage. HOME funds may be provided to developers to reduce the cost of land or development costs, the benefits of which would be passed on to the homebuyer. If HOME funds are provided in the form of development subsidies, the resale requirements pursuant to Section 92.254(a) (5) (i) must be imposed.

METHOD TO ENSURE COMPLIANCE WITH RECAPTURE REQUIREMENTS

Pursuant to Section 92.254(a)(4)(ii) of the regulations, the State has selected the option to recapture the full HOME investment from the net proceeds of the sale of a house which was purchased with the assistance of HOME funds. The net proceeds from the sale of a house will be distributed as follows:

- 1) a) To pay the balance due on any superior loan and to pay any required closing costs;
- b) To pay the HOME funds, subject to (2) below;
- c) To pay the balance due on any subordinate loan;
- d) To repay the homeowner for the amount of any homeowner payments; and

- e) To pay the remaining balance to the homeowner.
- 2) If there are insufficient proceeds from the sale of the house to repay the amount of HOME funds and to pay the homeowner for the amount of any homeowner payments, the State will forgive a portion of the loan made with HOME funds, calculated by multiplying the amount of the HOME loan by the fraction equal to the number of years the homeowner owned and occupied the house times the affordability period, where HOME funds per unit equal:
- (i) under \$15,000, 1/5 per year
 - (ii) \$15,000 - \$40,000, 1/10 per year; and
 - (iii) over \$40,000, 1/15 per year.
- 3) With respect to loans made with HOME funds to assist homebuyers, "Homeowner Payments" means the following:
- a) The amount of the down payment made by the homeowner on the house;
 - b) The amount of any principal payments or prepayments on any loan on the property; and
 - c) The cost of all capital improvements to the house made by the homeowner.

Additionally, the State will consider more restrictive terms for recapture and forgiveness provided it determines such action is necessary through established underwriting criteria.

HOME funds used to assist homebuyers that are recaptured according to these guidelines will be used to carry out other HOME eligible activities.

Legal Method

Covenants describing the recapture restrictions will be included in the recorded loan documents to ensure that the HOME funds will be recaptured at the time of transfer or refinance of the HOME-assisted unit.

Tenant Based Rental Assistance

The State of Maryland will use HOME funds for tenant based rental assistance on a limited basis, including using HOME funds for security deposit assistance. Rental assistance programs through the Initiatives Fund will select households to receive assistance in accordance with written tenant selection policies and criteria. In addition, if families selected are currently residing in units that are designated for rehabilitation or acquisition under the HOME program, they will not be required to meet the written tenant selection policies and criteria. Families so selected may use the tenant-based assistance in the rehabilitated or acquired unit or in other qualified housing.

TYPES OF INVESTMENT BY THE STATE OF MARYLAND IN THE HOME PROGRAM

Maryland expects primarily to invest funds in projects through grants, as well as interest bearing and non-interest bearing loans. Depending on the circumstances of each project, the State may use other forms of subsidies including equity investments, interest subsidies consistent with the purposes of this program, and deferred payment loans with interest.

HOME Matching Fund Requirements

The State of Maryland is under a match waiver for FFY 2005 due to Hurricane Isabel. However, DHCD will continue to provide match during FFY2005 in order to build up its match account. Specifically, the State will provide HOME match through DHCD's Rental Allowance Program, although other sources of State funds may be used if needed.

Program Income

The State may receive program income from time to time as a result of the prepayment of loans or from debt service payments. Any program income received will be used in accordance with the requirements of 24 CFR Part 92.

HOME Monitoring

Two offices within Maryland's Department of Housing and Community Development are responsible for monitoring housing loans and grants made by the Department with both State and federal (including HOME) funds. The office of Multifamily Housing Programs in the Division of Development Finance is responsible for income monitoring of tenants. The Asset Management unit in the Division of Credit Assurance is responsible for monitoring the physical and financial condition of DHCD-financed properties, including those assisted with HOME.

Multifamily Housing performs annual audits and reviews of grantees in the delivery of rental subsidies, as well as annual audits for compliance with tenant income and rent restrictions of properties with HOME funding. Multifamily Housing will perform additional audits, if needed, to ensure that problems are corrected. Multifamily Housing and grantees are subject to HUD audits. Reviews and audits will ensure that all State and federal regulations are being followed.

Asset Management undertakes physical inspections of DHCD-financed properties, as well as ensuring the financial stability of loans and assets management by the Department. Generally, Asset Management is responsible for conducting annual inspections on all properties for which the original loan amount was \$750,000 or greater and all HUD insured and subsidized projects. Inspections are conducted every two years on properties with original loan amounts between \$350,000 and \$750,000. Inspections are conducted every three years on projects whose original loan amount was less than \$350,000, but more than \$75,000. On multifamily loans of less than \$75,000, no inspection is conducted by DHCD. Some inspections may be completed by the Contract Servicer.

In addition, annual physical inspections are performed on projects that do not meet **all** of the following criteria:

- The loan is current and has not been delinquent in the prior twelve months.

- The debt service coverage ratio for the loan including any superior debt, if applicable is greater than 1.0.
- Vacancy is less than 10%.
- There are no significant outstanding violations of the Regulatory Agreement or other loan or program requirements.
- The project does not exhibit deferred maintenance. Deferred maintenance is defined as a condition exhibiting the continued failure by a management agent or an owner to perform routine or day-to-day tasks associated with the repair or upkeep of the property.
- The project received a Satisfactory or better rating on its most recent physical inspection and administrative review by Asset Management.
- The surrounding market is stable or appreciating.

On-Site Monitoring for HOME-Assisted Projects

On-site monitoring is conducted to ensure that HOME-assisted projects are operated in compliance with the HOME regulations. On site monitoring responsibilities are conducted in accordance with the HOME regulations. Inspections of HOME-assisted rental units are scheduled as follows:

Number of Total Units in HOME-assisted Projects	Required Frequency of Inspections
1-4	Every 3 years
5-25	Every 2 years
26 or more	Annually

The on-site monitoring elements include:

- maintenance of appropriate records;
- evidence that the property's written tenant selection policy has been followed;
- acceptable lease documents;
- evidence of affirmative marketing and conformance with fair housing policies;
- review of rent adjustments;
- review of treatment of rents for tenants who no longer qualify as low-income families;
- review of corrective procedures dealing with temporary noncompliance caused by increases in the incomes of existing tenants;
- ensure compliance with the written agreement between the owner and DHCD;
- physical inspections for compliance with property standards; and,
- verification of accuracy of information submitted by owners on eligible tenant incomes and HOME rents.

Suspension of Method of Distribution for Presidential Disaster Declarations

In the event of a Major Disaster Declaration by the President of the United States for a city, town, or unit of local government located in the State of Maryland, the Secretary of DHCD shall have the authority to waive the Method of Distribution or any other State regulations for the HOME program to address emergency needs of impacted communities. This will be done in consultation with HUD and the program will operate within the parameter of the law or laws addressing the HOME program.

AMERICAN DREAM DOWNPAYMENT INITIATIVE

The American Dream Downpayment Initiative (ADDI) will be administered as a part of the HOME Investment Partnerships Program. ADDI aims to increase the homeownership rate, especially among lower income and minority households, and to revitalize and stabilize communities. ADDI will help first-time homebuyers with the biggest hurdle to homeownership: downpayment and closing costs. The program was created to assist low-income first-time homebuyers in purchasing single-family homes by providing funds for downpayment, closing costs, and rehabilitation carried out in conjunction with the assisted home purchase.

ADDI will provide downpayment, closing costs, and rehabilitation assistance to income-eligible individuals who are first-time homebuyers. The amount of ADDI assistance provided may not exceed \$10,000 or six percent of the purchase price of the home, whichever is greater. The rehabilitation must be completed within one year of the home purchase. Rehabilitation may include, but is not limited to, the reduction of lead paint hazards and the remediation of other home health hazards.

To be eligible for ADDI assistance, individuals must be first-time homebuyers interested in purchasing single family housing. A first-time homebuyer is defined as an individual and his or her spouse who have not owned a home during the three-year period prior to the purchase of a home with ADDI assistance. ADDI funds may be used to purchase one- to four- family housing, condominium unit, cooperative unit, or manufactured housing. Additionally, individuals who qualify for ADDI assistance must have incomes not exceeding 80% of area median income.

ADDI funds used for rehabilitation may not exceed twenty percent of the State's total ADDI allocation. The rehabilitation assisted with ADDI funds must be completed within one year of the home purchase.

DHCD will administer ADDI in conjunction with existing DHCD housing loan programs and with the HOME Initiatives Fund. It is anticipated that DHCD's partners in the communities, including for profit and non profit housing development organizations and public housing agencies, may apply for ADDI funds to be used in conjunction with homebuyer assistance programs. Such programs may include, but are not limited to, Section 8 Homeownership Voucher, Self-Help Homeownership, Individual Development Accounts and, general First-Time Homebuyer Programs. Applicants for funds will be asked to provide a plan for conducting targeted outreach to residents and tenants of public housing, trailer parks, and manufactured housing, as well as to other families assisted by public housing agencies and, a description of the actions to be taken to ensure the suitability of families receiving downpayment assistance under the section to undertake and maintain homeownership.

The State's Federal Fiscal Year (FFY) 2005 allocation of ADDI funds consists of \$191,464. According to HUD guidance, HUD will track the use of ADDI funds, through IDIS, by crediting ADDI with all first-time homebuyer downpayment assistance completed during the grant period until a participating jurisdiction's ADDI funds are depleted. Once all the ADDI funds are depleted, HUD will credit regular HOME funds for any subsequent downpayment assistance activities.

EMERGENCY SHELTER GRANTS (ESG) PROGRAM

The Emergency Shelter Grants (ESG) Program provides funds to prevent homelessness and to help improve the quality of existing emergency and transitional shelters for the homeless, to help make available additional shelters, to help meet the costs of operating such shelters and of providing certain essential, direct client services to homeless individuals. Such assistance is designed to assure that homeless persons and those at risk of homelessness have access not only to decent, safe and sanitary shelter, but also to the supportive services needed to improve their situations.

For SFY 2006 (FFY 2005), Maryland's allocation for the 19 non-entitlement counties of the State is \$599,886 under the ESG program. Based on previous activity, DHCD expects that the funds will be used as follows (these numbers may change based on applications received):

STATE OF MARYLAND ESG ALLOCATION – FFY 2005	
Homeless Prevention (30%)	\$179,965
State Administration (4%)	\$23,996
Local Administration (1%)	\$5,999
All Other – Maintenance and Operating, Essential Services, Other Staffing, Etc. (65%)	\$389,926
TOTAL	\$599,886

ESG Match Requirements

ESG funds must be matched on a 50/50 basis (one dollar of matching funds must be provided for every dollar of ESG funds). Match may be in the form of cash as well as in-kind contributions. Cash contributions may come from private sector sources, including donations from individuals, groups, corporations or other private entities, and/or local government. In-kind contributions may include: the value of any donated material or building, the value of the lease on a building, any salary paid to staff of the applicant or nonprofit organization in carryout out the shelter or homelessness program, and the time and service contributed by volunteers to carry out the shelter or homelessness program.

Due to the competitive nature of the State's ESG Program, the State is not able identify the sources of ESG match at the time that the action plan is submitted. The State acknowledges its responsibility to ensure that ESG match contributions are made to the level required by the federal program regulations.

Selection Criteria

To make ESG Program funds available to units of general local government, DHCD conducts an annual competitive round of funding in which eligible local governments are invited to submit applications. Applicants receiving the highest cumulative points will be recommended for funding until all ESG Program funds are exhausted. Funds may be allocated so that the awards are distributed among eligible applicants taking into consideration the level of need in the service area and the capacity of the grant recipient, and sub-recipient if applicable, to conduct the program effectively and administer the grant efficiently. Consideration may be given to the desirability of funding a variety of projects and serving as many geographic areas of the State

as possible. Each unit of general local government may submit only one application for up to \$75,000. The application may request funding for one or more projects.

All applications will be reviewed, rated and recommended for funding based on the following factors. Figures in parentheses indicate the maximum number of points that may be awarded to any given factor. Applicants receiving the highest cumulative points will be recommended for funding until all ESG Program funds are exhausted.

1. Statement of Homeless Problems This Project Addresses (10)
 - (a) Projected number and income level of homeless and at risk individuals to be assisted;
 - (b) A description of the need or problem, noting local factors and trends which impact on the level of homelessness, and the extent to which documentation is offered in support of the need or problem; and
 - (c) The appropriateness of the applicant's proposed project/activity to address the need or problem.

2. Proposed Project Design (25)
 - (a) The feasibility of the project/activity in terms of financing, location and site control and neighborhood/community acceptance;
 - (b) The extent to which it is documented that the costs have been carefully estimated and are reasonable;
 - (c) The extent to which the amount of matching funds is provided and verified;
 - (d) The likelihood of project/activity completion in a timely manner, and
 - (e) The extent to which an agency participate in the local continuum of care.

3. Past Experience/Organizational Capacity (25)
 - (a) The extent to which the applicant has the organizational capacity and staff expertise to undertake and administer the project/activity described in the application;
 - (b) The extent to which the applicant has been involved in homeless shelters, programs or services in the past and the track record indicates these activities have been accomplished in an efficient and effective manner;
 - (c) The extent to which the applicant is committed on a long term basis to serving the shelter needs of the homeless; and
 - (d) The extent to which the applicant will involve homeless clients in the planning, developing, constructing, renovating, maintaining and operating of homeless facilities and programs.

4. Supportive Services (20)

The extent to which beneficiaries are given assistance under a continuum of care, facilitating their progress to self-sufficiency. This methodology includes providing assistance in obtaining appropriate supportive services including permanent housing, medical and mental health treatment, counseling, supervision, and other services essential for achieving independent living.

5. Additional Considerations (20)

A 50/50 match is federally mandated. Funding priority will be given for applicants meeting the following additional match stipulations:

- (a) At least 20 percent of the match (10 percent of total project cost) must be in cash from private sector resources or local government, and not from State or federal resources.
- (b) A cash contribution by the local government applicant is strongly encouraged and can be counted as part of the 50/50 match.

Under federal guidelines the match requirement is waived for \$100,000 of the allocation, and the State is required to pass this waiver on to those grantees least able to afford a match. Therefore, upon program startup DHCD waives all or a portion of the match requirement for those local government grantees in the jurisdictions where residents have the lowest per capita incomes.

Monitoring and Evaluation

Monitoring activities include requiring 180 day reports and at least 10 percent of the Service Providers along with the cognizant oversight agency in local government will be monitored on-site annually. The visit may occur during or after the grant period. All grantees will receive at least a two week notice prior to the monitoring visit. The visit will entail reviews of the fiscal and programmatic aspects of the grant as administered by both the grantee and the subgrantee. Grantees and subgrantees will make all ESG records, administrative offices and personnel available upon request during the monitoring visit. Within approximately 60 days after the visit, DHCD will forward a report to the grantee. The report will summarize grant progress and may address concerns and recommendations for further action, as well as findings for corrective action. Local government grantees that contract with non-profit organizations who act as Service Providers shall monitor each such subgrantee to determine project progress and adherence to the sub-recipient sub-agreement. Monitoring reports of the local government's grantees shall be subject to review by DHCD upon request.

Suspension of Method of Distribution for Presidential Disaster Declarations

In the event of a Major Disaster Declaration by the President of the United States for a unit of local government located in the State, the Secretary of DHCD shall have the authority to waive the Method of Distribution or any other State requirements governing the ESG program to address emergency needs of affected communities. This will be done in consultation with HUD and the program will operate within the parameter of the law or laws addressing the ESG program.

HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA) PROGRAM

Background

The Maryland Department of Health and Mental Hygiene is a FY05 grantee of \$335,000 per year in HOPWA formula funds for a comprehensive program designed to prevent homelessness and to help low-income people with HIV/AIDS to live independently by providing permanent supportive housing in the rural counties of the state. These funds are intended to cover counties who are not recipients of HOPWA funds from another eligible metropolitan area. These include: Allegany, Caroline, Dorchester, Garrett, Kent, Somerset, Charles (as fiscal agent for St. Mary's County), Talbot, Washington, Wicomico and Worcester.

In order to address the needs of persons living with HIV/AIDS since the introduction of combination therapies, a stable and supportive housing situation is critical. The Rural HOPWA Program is part of Maryland's statewide plan to address the housing needs of low-income people with HIV/AIDS and their families. It complements the Ryan White Title II programs and State funded HIV Programs that are currently operating in the rural areas of the state. The Program combines rental assistance, short-term rent, emergency mortgage and utility payments with support services, such as case management, primary medical care, and treatment adherence to allow persons with HIV/AIDS to live independently in HUD-funded permanent supportive housing programs. This Initiative provides housing assistance and supportive services identified as priority needs of persons living with HIV/AIDS in rural Maryland.

Maryland reports almost 1,500 new AIDS cases per year and at the end of 2003 had approximately 28,000 living cases of HIV and AIDS, almost 13,000 of which had AIDS. The majority of cases were between 20 and 44 years of age at diagnosis. Approximately 80% of cases were African-American, which stands in contrast with their percentage of the general population (28%). Males comprise two-thirds of the HIV and AIDS cases. The most common exposure category among the AIDS cases is injection drug use (IDU) at 45%. However, among the HIV cases, the most common category is heterosexual contact (43%).

For 2003, urban Baltimore City had an HIV/AIDS prevalence rate eleven times that of the most populous jurisdiction in the State, suburban Montgomery County (2134.5 and 243 per 100,000 population, respectively). The next two most populous jurisdictions, suburban Prince George's and Baltimore counties had prevalence rates of 535 and 254 cases per 100,000 population, respectively, while rural Dorchester County, ranked 20th in population, had a 2003 HIV/AIDS prevalence rate of 339 per 100,000 population, the third highest in the State. This demonstrates that while the disease is concentrated in urban areas, there are highly disproportionate concentrations of cases in specific urban, suburban, and rural regions of the State. In addition,

underserved populations, especially women and minorities, are heavily represented in the rural AIDS cases. Of the reported cases in rural Maryland, twenty-six percent are women. Sixty-five percent of the cases occur among minorities. In addition, the Eastern Shore counties and St. Mary's County have a large seasonal migrant population.

The eleven counties served by the Rural HOPWA Program account for 46% of the State's territory and over 11% of the population, according to the 2000 Census. The Eastern Region (Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, and Worcester Counties) reported 3% of all living cases. The Western Region (Allegany, Frederick, Garrett, and Washington Counties) reported 2% of all living HIV and AIDS cases and the Southern Region (Calvert, Charles, and Saint Mary's Counties) contributed 1% of all living HIV and AIDS cases.

Current Network of Services

As noted above, the eleven rural counties included in the Rural HOPWA Program are: Allegany, Caroline, Dorchester, Garrett, Kent, Somerset, Charles (as fiscal agent for St. Mary's County), Talbot, Washington, Wicomico and Worcester. The Department of Housing and Community Development (DHCD) provides tenant-based rental assistance to eligible HOPWA clients. DHCD has considerable experience in providing housing opportunities to low income people and also to those with special needs such as people who are physically disabled, developmentally disabled, deaf and hard of hearing, mentally ill, and those with drug and alcohol addictions.

With Ryan White Title II and state general funding, the local health departments in these counties have been providing case management, medical care, supportive services, and emergency assistance, including short-term rental assistance, to persons with HIV/AIDS for more than 12 years.

The AIDS Administration monitors the performance of all grant awards to local and state government agencies.

Work Plan

To meet the shortage of affordable housing with available funds, the Rural HOPWA Program offers tenant-based rental assistance (TBRA) to prevent homelessness. Consumers needing housing assistance are matched with the program that best fits their individual needs.

To provide housing assistance to consumers effectively throughout rural Maryland, housing assistance is provided to consumers through project sponsors statewide, regionally and locally. Tenant-based rent assistance is currently made available through DHCD. This allows eligible consumers and their families throughout the Eastern Shore and Western regions of Maryland to have equal access to these funds, regardless of their county of residence.

The AIDS Administration proposes to maintain the current caseload of households being covered under the competitive grant-funded TBRA activity, by continuing its Memorandum of Understanding with DHCD with the formula HOPWA funds.

The following FY05 allocations are proposed with the new formula funding:

- AIDS Administration Administrative Cost: \$10,350
- DHCD for Tenant-based Rental Assistance in both the Eastern and Western regions: \$324,650

Goals and Objectives

Note: Objectives apply to HIV-positive consumers; however, HOPWA funds improve the standard of living for the families and dependents of HOPWA consumers as well so it is a much broader impact.

Goal: To assist low-income people living with HIV/AIDS to achieve housing stability by providing supportive housing in underserved rural areas of Maryland.

Objective 1: To provide tenant-based rental assistance using a projected number of 42 units			
Key Action Steps/Activities	Timeline	Benchmark	Evaluation/Monitoring Method
Case managers identify and refer low-income persons living with HIV/AIDS who need tenant-based housing assistance	Year-round	# of households/rental units	Quarterly reports including review of budget expenditures and attendance at regional case managers meetings. This activity is dependent upon there being available slots due to attrition.

Objective 2: To monitor sub-grantee compliance with HOPWA regulations and the quality of services through a minimum of quarterly oversight measures			
Key Action Steps/Activities	Timeline	Benchmark	Evaluation/Monitoring Method
Conduct technical assistance and monitoring site visits	Spring and Fall	# of TA/site visits conducted	Site visit reports, technical assistance visit reports
Include in HOPWA conditions of award, requirement for HOPWA sub-grantees to attend quarterly regional HIV CARE consortia and case management meetings	Included in annual MOU and/or contract	Disseminated conditions of award with attendance clause	Signed MOU and/or contract that agrees to conditions of award
Include in HOPWA conditions of award, requirement for quarterly submission of budget expenditures, performance measures and program narrative to monitor sub-grantee activities	Included in annual MOU and/or contract	Disseminated conditions of award with reporting clause	Signed MOU and/or contract that agrees to conditions of award

Objective 3: Evaluate the outcomes of HOPWA assistance on the housing stability and health status of participating consumers			
Key Action Steps/Activities	Timeline	Benchmark	Evaluation/Monitoring Method
Collect necessary client-level data to conduct an outcomes evaluation following the three stated goals of the HOPWA program	Quarterly	# of HOPWA records abstracted; # of on-going evaluation activities	Quarterly reports, evaluation reports, summary of special analysis

Objective 4: Assessment of community housing needs, available housing and related resources to establish priorities for new or expanded housing efforts			
Key Action Steps/Activities	Timeline	Benchmark	Evaluation/Monitoring Method
Conduct regional meetings to solicit input from subsidized housing providers, HIV care providers, Department of Social Services staff and other relevant partners to obtain feedback and develop approaches for FY05	On-going	# of open forum/planning meetings held with housing partners in the Eastern and Western regions	Reports, summary of special analysis, content of FY06 Consolidated Plan

Method of Distribution

The State's emphasis for using the HOPWA funds it receives will focus on maintenance of existing efforts rather than expansion of the program. This is because the State received less funding this year than last, while rents increased. In the event funds become available to assist new clients, funding will be allocated on a first-come, first-served basis.

Monitoring and Evaluation

Monitoring activities include requiring quarterly reports that include budget expenditures, programmatic narrative and performance measures. These reports include performance measures, narrative of program successes, challenges and barriers and a budget expenditure report. Also monitored is the coordination of services between HOPWA and Ryan White-funded programs, such as attendance of HIV case management and regional CARE Consortia meetings. The AIDS Administration also conducts sub-grantee site visits on a routine basis to monitor adherence to programmatic and fiscal standards and guidelines, client confidentiality and the quality and accessibility of services. Areas identified for improvement during the monitoring process may require that agencies develop corrective action plans. The HOPWA Coordinator at the AIDS Administration carefully monitors progress implementing the corrective action plans. In order to facilitate improvement, the AIDS Administration will provide technical assistance to its sub-grantees, as needed.

The purpose of the program's evaluation plan is twofold. Firstly to examine process indicators and quality improvement measures to assess program performance. Secondly is to evaluate the

outcomes and impact of HOPWA assistance on the housing stability and health status of participating consumers. The data for both evaluation purposes will come from quarterly reports by project sponsors and by targeted qualitative and quantitative data collection.

The outcomes to be measured include:

1. Increased supply of HIV/AIDS housing meets unmet housing needs (Workplan Objectives 1 & 3)
2. Increased client access to housing related community services and resources (Workplan Objective 1)
3. Funded project sponsors demonstrate ability to comply with HOPWA, HUD and other housing-related laws and regulations (Workplan Objectives 2 & 3)
4. Funded project sponsors have increased access to AIDS-related resources and information (Workplan Objective 2)
5. Grantee and funded project sponsors are in compliance with HOPWA and other applicable HUD and housing-related regulations (Workplan Objective 2)
6. HOPWA resources leverage additional AIDS-specific funding needed to address community housing-related needs. (Workplan Objective 4)
7. HOPWA funds are made available to eligible community-based and local sponsors in an efficient and effective manner. (Workplan Objective 4)
8. HOPWA grantee and local partners work together to assess housing needs, recognize barriers and identify solutions and achievable strategies (Workplan Objective 4)

Consumer/Community Input

Consumers and providers have input into how HOPWA funds are expended through several means on a regional and local basis. Ryan White Title II sponsors regional CARE consortia in each region of the state. The consortia consist of consumers and providers and meet quarterly to discuss changing regional HIV care and services priorities and as a venue for an annual open community forum. Membership to the consortia is open to the public and funds are available for transportation and childcare to reduce consumers' barriers to participation. Project sponsors receiving HOPWA funds are required to attend these consortia meetings each quarter. HOPWA recipients are also invited to attend as service consumers. The majority of HOPWA consumers also receive Ryan White funds. All Ryan White funded-agencies, including local health departments, conduct annual client satisfaction surveys to obtain consumers' feedback on the services they have received at that site. The rural HOPWA program is exploring additional means of obtaining consumer input, beyond those consumers who are active members of various advisory and planning bodies. Housing-specific forums are planned to engage a greater number of housing partners and advocates to both identify untapped local resources and consolidate planning on a local level to reduce homelessness and housing instability.

PUBLIC COMMENTS

February Hearings

During the public hearings in February, 2005, DHCD received a number of public comments. Most of these fell under three main areas: homeownership, rental housing and homelessness.

Homeownership Comments

Under the Disabled borrowers program, DHCD was asked to raise the current mortgage limit of \$100,000 on a loan, as this was too low a price to purchase a home. After further discussion, it was determined that there were possibly a number of issues regarding program operation. For example, the problem may not be the loan limit but the need to close the gap between what a borrower can afford for a loan and actual acquisition costs. There may be some need to raise the loan limit, but the real problem would be obtaining soft seconds or other forms of assistance to making actually acquiring a home possible. In that light, DHCD put in its one year goals that it will work with the Department of Disabilities as well as other interested parties to determine how the disabled borrowers program needs to be modified to continue being a good product for eligible households.

Another homeownership issue discussed was DHCD decision to start issuing 35 year mortgages. Several people testified that DHCD needed to develop a 40 year product given the disparity between incomes and house prices. As part of our one year goals, DHCD intends to start offering 40 year mortgages on homes as well.

Several people testified about the need for housing counseling. It was felt many more people could use and access our program if we paid for counseling. In addition, some people felt DHCD should explore not just funding agencies that can provide housing counseling, but also certifying individuals to do it as well. In rural areas such as the Eastern Shore, there are not many agencies that can do this. If Individuals (such as the local housing contact) was trained and/or certified to do counseling, it would help get many more people into our programs.

In examining the issue, DHCD will not be changing its current policies. DHCD currently provides some funding for housing counseling, such as using HOME funds for counseling when HOME funds are used to help a low-income person buy a house. Other funds are available to counseling agencies through HUD, or through housing counseling DHCD receives on a pass through basis. Organizations who lack funds for counseling should pursue funds from HUD or other agencies to meet these needs.

In regard to allowing individuals, but not agencies to provide counseling, this idea does not appear to pass legal requirements on how DHCD allocates pass through funds. Consequently, we will not be allocating funds directly to individuals to provide counseling.

There was also some comment that CDA's (the Maryland Housing Funds) mortgage servicer is not following the proper procedures for foreclosure and loss forbearance when families get behind on their mortgage payments. We examined this, but did not find a problem. DHCD did consolidate operations by moving from using 14 separate servicers to a single entity. We have received complaints along the lines of "I don't like their service book" or "I don't like having to make a payment to "y" instead of "z", but we found no evidence that the new servicer was not following proper foreclosure or forbearance requirements required by both DHCD and HUD.

Rental Housing Comments

There were a number of comments that DHCD should put more emphasis on developing mixed use rental housing. It was felt that providing more mixed use housing would help make this option more attractive to developers, as well as prevent potential stigmatization of housing developments (and their residents) who might be identified as living in "the projects".

In response, we would say that DHCD used to provide incentive points to developers for mixed use housing, but no one took advantage of them. We understand that communities like mixed income but Tax Credit syndicators do not like them. Further, many times these projects don't make sense financially as in a lot of our markets where there is not much difference between market rents and tax credit rents.

That said, most of our projects do have a variety of incomes among the affordable range -- units at 30%, 40% 50% and 60% of income. We also have some developers that hold 5-10% of their units at market rents, particularly on rehabs to avoid displacement of over income tenants. In addition, we have become more flexible in our Tax Exempt bond program by allowing and encouraging projects that just meet the federal tax credit requirements of 20% at 50% AMI or 40% at 60% AMI without the additional CDA restriction for 51% of the units at 85% of AMI. Unfortunately, developers still have not been interested in undertaking this easier standard for developing mixed-income properties.

Other comments we received focused on the physical look of rental developments DHCD finances. It was commented that rental housing projects are often inappropriate in rural areas as they "stick out" in rural communities, and, similar to the above, stigmatize residents who come from "the projects". With many run down and vacant single family housing units in rural communities, it was felt CDA should fund more scattered site rental housing developments that repair/rehabilitate these vacant SF homes. This would not only encourage community revitalization, but mixed communities. It would also prevent people being stigmatized since poor people would live in the same type of housing as everyone else. (Some people also said this would be cheaper than new construction.)

In response, DHCD actually gives points for projects that are architecturally appropriate for the community and have for some time. Scattered site projects have always been eligible under our programs. They tend to be more costly and difficult to manage. We also give preferences for both small projects (30 units or less) and for rural projects. Consequently, small projects in rural areas generally compete very well. We are adding language to the Qualified Allocation Plan to require a developer of a scattered site project to have scattered site development experience to address one of the problems we have with scattered site. We also do give points for projects that contribute to a community revitalization plan. In our view, our developments are assets to the communities in which they are placed -- we've done quite a bit of development in rural areas in recent years and we're proud of these developments and doubt the residents are stigmatized by the size of the development. Finally for this topic, we would note that rehabilitation projects do get extra points

Lastly in the area of rental housing, it was commented that DHCD should explore offering State tax incentives to developers of affordable housing. We have the federal low-income housing tax credit, but many states have State tax credit programs as well. In response, we looked at this several years ago. State credits generally are not that marketable and the legislature is anti-tax credits. Many states don't get the generous State appropriations we get for gap financing, so we will not be pursuing this option.

Homelessness Comments

There were some comments that DHCD routinely provides ESG funding or other funding (such as transitional housing funding) to homeless providers who are not part of the local continuum of care. This makes it more difficult for local continuums to develop plans, coordinate resources

and address the needs of the homeless. It was stated that DHCD should mandate that any organization who receives homeless funding through the ESG program or the transitional housing grant program should be required to be part of the local continuum of care.

In response DHCD will not mandate the local providers join local continuums of care. However, we have changed the rating and ranking criteria for the ESG program to give more points to organizations who participate in local continuums of care, which should encourage participation for organizations who seek funding under the ESG program.

One person commented that DHCD should allow HOME funds to be used to fund the operations of transitional housing. Some persons suggested DHCD should use CDBG funds to finance capacity building and staff positions for local governments to hire homeless/housing positions. These local staff could then carry out better and more effective housing and homeless programs.

In response, DHCD does not agree with these proposals. There are several reasons for this. First, there are federal limits on the amount of funds DHCD can use for administrative costs and public service costs for programs like CDBG. DHCD is already at those limits, so funding more administrative costs at the local level for homelessness would result in cutting administrative costs elsewhere, a zero sum game for locals that would leave them no better off than when they started. Second, if DHCD were to fund more operations costs out of programs like HOME (or CDBG) it would result in fewer units of affordable housing being built. We will not be helping the homeless if we spend more for local staff and reduce the amount of affordable housing we build to pay for staff costs.

Other Comments

There were a number of other comments on a broad range of issues, including persons voicing support variously for STAR, NBDP (now Neighborhood BusinessWorks) and micro enterprise, DHCD is continuing all of these programs.

April Hearings/public comment period

No written comments were received on the Five-Year Plan during the public comment period. Only four persons showed at the second set of hearings, and they offered no substantive comments. There was some discussion at the Cumberland hearing about Section 8 payment standards by HUD, which were referred to DHCD's Rental Housing office.

APPLICATION FORMS

The forms on pages 192, 193, 194 and 195 are legal forms (HUD Form 424) which serve as the State's applications for funding to HUD for the CDBG, HOME, and ESG programs.

CERTIFICATIONS

The legal certifications stating on page 196 are certifications of programmatic activities the State promises to undertake in accordance with legal requirements for administering the HOME, CDBG, ESG and HOPWA programs.

Consolidated Plan Community and Economic Development Needs Assessment Survey

1

Do you consider yourself or your organization/agency to be:

- A non-profit developer
- A for-profit developer
- A trade or professional organization
- A Community Action Agency
- A Public Housing Authority
- A unit of local government
- A unit of State government
- An elected official
- An advocacy group
- Other, Please Specify



Survey Page 1

Consolidated Plan Community and Economic Development Needs Assessment Survey

2

Please identify the county or counties served by your organization. (For municipal officials, please check the county in which your municipality is located)

- Statewide
- Allegany
- Anne Arundel
- Baltimore City
- Baltimore County
- Calvert
- Caroline
- Carroll
- Cecil
- Charles
- Dorchester
- Frederick
- Garrett
- Harford
- Howard
- Kent
- Montgomery
- Prince George's
- Queen Anne's
- Saint Mary's
- Somerset
- Talbot

Washington

Wicomico



Consolidated Plan Community and Economic Development Needs Assessment Survey

3

Please rank the following Public Facility Needs in your community:

1 2 3 4 5
very low need low need moderate need high need very high need

Senior Centers

Youth Centers

Neighborhood Community Facilities

Child Care Centers

Parks and Recreation

Cultural Centers/Museums

Health Facilities

Parking Facilities

Police Stations/Substations

Fire Stations/Substations

Libraries



Survey Page 3

Consolidated Plan Community and Economic Development Needs Assessment Survey

4

Please rank the following Infrastructure Needs in your community:

1 2 3 4 5
very low need low need moderate need high need very high need

Sewer Collection and Treatment Facilities

Water Production, Treatment, Storage and Distribution Systems

Flood Drain Improvements

Street/Road Improvements

very low need low need moderate need high need very high need

Sewer Collection and Treatment Facilities

1 2 3 4 5

Water Production, Treatment, Storage and Distribution Systems

1 2 3 4 5

Flood Drain Improvements

1 2 3 4 5

Street/Road Improvements

1 2 3 4 5

Sidewalk Improvements

1 2 3 4 5

Asbestos Removal

1 2 3 4 5

Handicap Accessibility Improvements

1 2 3 4 5

Vehicle Purchases

1 2 3 4 5

Equipment Acquisition

1 2 3 4 5

Bridge Construction

1 2 3 4 5

Electric Utility Systems

1 2 3 4 5

Government Offices and Meeting Facilities

1 2 3 4 5

Land Acquisition

Street Lighting Improvements

Public Parking Structures

School Construction

Bulkhead, Piers, Wharves and Ramps



Survey Page 4

Consolidated Plan Community and Economic Development Needs Assessment Survey

5

Please rank the following Public Service Needs in your community:

1 2 3 4 5
very low need low need moderate need high need very high need

Senior Services

Handicapped Services

Youth Services

very low need low need moderate need high need very high need

Senior Services

1 2 3 4 5

Handicapped Services

1 2 3 4 5

Youth Services

1 2 3 4 5

Services for Persons with HIV/AIDS

1 2 3 4 5

Services for the Mentally Ill

1 2 3 4 5

Services for Substance Abusers

1 2 3 4 5

Services for the Developmentally Disabled

1 2 3 4 5

Transportation Services

1 2 3 4 5

Employment Training

1 2 3 4 5

Crime Prevention

1 2 3 4 5

Housing Counseling

1 2 3 4 5

Day Care Services

1 2 3 4 5

After School Programs

Health Services



Survey Page 5

Consolidated Plan Community and Economic Development Needs Assessment Survey

6

Please rank the following Economic Development Needs in your community:

1 2 3 4 5
Very Low Need Low Need Moderate Need High Need Very High Need

Job Development/Creation

Commerical/Industrial Infrastructure

Commercial/Industrial Finance Assistance

Micro-Business Support

Small Business Loans

Facade Improvements

1 2 3 4 5

Streetscape Improvements

1 2 3 4 5

Brownfields Redevelopment

1 2 3 4 5

Technical Assistance to Small Business

1 2 3 4 5

Banking/Lending for Commercial Redevelopment

1 2 3 4 5



Survey Page 6

Consolidated Plan Community and Economic Development Needs Assessment Survey

7

Please provide any comments you might have:



Survey Page 7

Consolidated Plan Housing and Homeless Needs Assessment Survey

1

Do you consider yourself or your organization/agency to be:

- A non-profit developer
- A for-profit developer
- A trade or professional organization
- A Community Action Agency
- A Public Housing Authority
- A unit of local government
- A unit of State government
- An elected official
- An advocacy group
- Other, Please Specify



Survey Page 1

Consolidated Plan Housing and Homeless Needs Assessment Survey

2

Please identify the county or counties served by your organization. (For municipal officials, please check the county in which your municipality is located)

- Statewide
- Allegany
- Anne Arundel
- Baltimore City
- Baltimore County
- Calvert
- Caroline
- Carroll
- Cecil
- Charles
- Dorchester
- Frederick
- Garrett
- Harford
- Howard
- Kent
- Montgomery
- Prince George's
- Queen Anne's
- Saint Mary's
- Somerset
- Talbot

Washington

Wicomico



Consolidated Plan Housing and Homeless Needs Assessment Survey

3

Please rank the following Rental Housing Needs in your community:

1 2 3 4 5
very low need low need moderate need high need very high need

Acquisition

Moderate Rehabilitation

Substantial Rehabilitation

New Construction

Tenant-Based Rental Assistance (Section 8)

Tenant-Based Rental Assistance (Non Section 8)

Project-Based Rental Assistance

Preservation of Existing Stock

1 2 3 4 5

Energy Efficiency Improvements

1 2 3 4 5

Housing for Migrant Workers

1 2 3 4 5

Rental Housing for the Elderly

1 2 3 4 5

Rental Housing for Small Families (2 to 4 persons)

1 2 3 4 5

Rental Housing for Large Families (5 or more persons)

1 2 3 4 5

Handicapped Accessible Apartments

1 2 3 4 5

Rehabilitation of Public Housing Units

1 2 3 4 5

New Construction of Public Housing Units

1 2 3 4 5

Replacement of Public Housing Units

1 2 3 4 5



Consolidated Plan Housing and Homeless Needs Assessment Survey

4

Please rank the following Homeownership Needs in your community:

1 2 3 4 5
very low need low need moderate need high need very high need

Down Payment/Closing Cost Assistance

Affordable Mortgage Products

Moderate Rehabilitation

Substantial Rehabilitation

New Construction

Energy Efficiency Improvements

Housing Counseling

Handicapped modifications

Reverse Equity Mortgages



Consolidated Plan Housing and Homeless Needs Assessment Survey

5

Please rank the following Special Housing Needs in your community:

1 2 3 4 5
very low need low need moderate need high need very high need

Housing for the Frail Elderly

Housing for Persons with HIV/AIDS

Housing for Persons with Alcohol/Drug Addictions

Housing for Persons with Developmental Disabilities

Housing for Persons with Mental Illness

Housing for Children/Youths Graduating from Foster Care

Housing for Ex-offenders

Housing for Persons on SSI Disability



Consolidated Plan Housing and Homeless Needs Assessment Survey

6

Please rank the following homeless needs in your community:

1 2 3 4 5
Very Low Need Low Need Moderate Need High Need Very High Need

Emergency Shelters for Families

Emergency Shelters for Men

Emergency Shelters for Women

Transitional Housing for Families

Transitional Housing for Men

Transitional Housing for Women

Supportive Services for Families

Supportive Services for Men

Supportive Services for Women

1 2 3 4 5

Operations and Maintenance of Existing Facilities

1 2 3 4 5

Job Training for the Homeless

1 2 3 4 5

Case Management

1 2 3 4 5

Substance Abuse Treatment

1 2 3 4 5

Mental Health Care

1 2 3 4 5

Physical Health Care

1 2 3 4 5

Housing Placement

1 2 3 4 5

Life Skills Training

1 2 3 4 5



7

Please provide any additional comments you might have:



Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Allegany County Scattered Sites	Allegany	18	Family		0	0	0	14	4
Allegany Towers	Allegany	26	Family		2	18	8	0	0
Baltimore Avenue Apartments	Allegany	41	Family	yes	30	8	3	0	0
Bedford Street Rental Rehab	Allegany	4	Family						
Booth Towers	Allegany	114	Elderly	yes					
Cumberland Arms	Allegany	69	Elderly	yes					
Cumberland Manor	Allegany	102	Elderly	yes	0	102	0	0	0
Frostburg Apts.	Allegany	38	Family	yes	0	8	30	0	0
Frostburg Heights Apts (FM)	Allegany	110	Elderly	yes	0	110	0	0	0
Hammond Heights	Allegany	35	Elderly	yes	0	35	0	0	0
Lana Lu Apts.	Allegany	30	Elderly	yes	0	30	0	0	0
Mutual Self Help	Allegany	7	Family						
Old Town Manor Apts.	Allegany	138	Family						
Orchard Mews Apts.	Allegany	32	Family	yes	0	16	16	0	0
The Cascades	Allegany	71	Elderly						
Valley View Apts.	Allegany	30	Elderly	yes	0	30	0	0	0
Washington Ridge	Allegany	28	Family	yes	0	0	22	6	0
Washington-Allegany Residences II	Allegany					1			
Westernport Elderly	Allegany	35	Elderly	yes	0	35	0	0	0
Admiral Oaks	Anne Arundel	159	Family	yes	0	0	105	42	12
American Southdale	Anne Arundel	506	Family	yes					
Anchor House (Annapolis Area Ministries)	Anne Arundel	1	Family	no					
Annapolis Area Targeted Revitalization	Anne Arundel	12	Family						
Annapolis Roads Apts	Anne Arundel	282	Family	yes					
Autumn Woods at Piney Orchard	Anne Arundel	64	Family	yes					
Bay Ridge Gardens	Anne Arundel	198	Family	yes	0	0	101	97	0
Bywater I/II	Anne Arundel	308	Family	yes	0	0	107	115	86
Claiborne Place (FM)	Anne Arundel	175	Elderly	yes	0	127	29	0	0
College Parkway Place	Anne Arundel	170	Family	no					

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Forest Gardens	Anne Arundel	12	Family			6	6		
Glenview Garden Apts	Anne Arundel	57	Family	yes		15	30	12	
Greentree I	Anne Arundel	350	Family	yes					
Greentree II	Anne Arundel	239	Family	yes					
Greentree III	Anne Arundel	207	Family	yes					
Groves at Piney Orchard	Anne Arundel	258	Family	yes	0	48	174	36	0
Harper's Mill Apts.	Anne Arundel	29	Family	yes	0	0	29	0	0
Homes at the Glen	Anne Arundel	56	Family						
Hope House SRO	Anne Arundel	40	Individuals	yes	0	40	0	0	0
Lake Village (carriage)	Anne Arundel	99	Family	yes					
Lake Village (Disney)	Anne Arundel	540	Family	yes					
Lampighter Ridge Apts	Anne Arundel	168	Family	yes					
Langton Green	Anne Arundel	24	Elderly	yes					
Laurel Commons	Anne Arundel	38	Family	yes					
Mill Pond Apts	Anne Arundel	239	Family	yes					
Odenton Senior Housing	Anne Arundel	88	Elderly	yes					
Orchards At Severn pioneer city III	Anne Arundel	500	Family	yes			250	250	
Park View at Furnance Branch	Anne Arundel	100	Elderly						
Pumphrey House	Anne Arundel	14	Elderly						
Regatta Bay Apts	Anne Arundel	245	Family	yes					
St. Mary's Housing	Anne Arundel	24	Elderly	yes	0	24	0	0	0
Summerset Woods Townshomes warfield townhouses	Anne Arundel	200	Family	yes				200	
The New Bloomsbury Sqaure	Anne Arundel	43	Family						
The Regency Club I	Anne Arundel	196	Family	yes					
The Regency Club II	Anne Arundel	168	Family	yes					
Timothy House & Gardens	Anne Arundel	81	Elderly	yes	0	81	0	0	0
Village of Marley Station	Anne Arundel	757	Family	yes					
Washington Square Apt	Anne Arundel	181	Family	yes					
Westwinds Apts	Anne Arundel	168	Family	yes					

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Wiley H Bates Senior Housing	Anne Arundel	71	Elderly						
Willows Apts	Anne Arundel	352	Family	yes					
Woodside Gardens Apts.	Anne Arundel	144	Family	no					
908 Valley	Baltimore City	12	Family		0	0	0	0	0
Abundant Life Towers II	Baltimore City	60	Elderly	yes	0	60	0	0	0
Alameda IV	Baltimore City	52	Family		0	4	22	22	0
Alcott Place	Baltimore City	44	Elderly	yes	0	44	0	0	0
AHEPA Senior Housing	Baltimore City	57	Elderly						
Amity Ramble	Baltimore City	46	Family						
Apolistic Towers	Baltimore City	150	Elderly	yes					
Arbuta Arms II	Baltimore City	189	Family						
Argonne Apartments	Baltimore City	67	Family		21	40	5	0	0
Ashburton Apartments	Baltimore City	78	Family		0	0	78	0	0
Baltimore Schoolhouse Apts.	Baltimore City	132	Family						
Barclay Greenmount	Baltimore City	140	Family		0	61	29	39	10
Barclay Townhouses	Baltimore City	91	Family						
Barrister Court Apartments	Baltimore City	32	Elderly	yes	0	21	6	0	0
Basilica Place	Baltimore City	201	Elderly	yes					
Beaufort Crest	Baltimore City	40	Family						
Beechfield Apts.	Baltimore City	128	Family						
Bellevue-Manchester Apartments	Baltimore City	48	Elderly	yes	0	48	0	0	0
Belvedere Green	Baltimore City	94	Elderly	yes	0	94	0	0	0
Bentalou Court	Baltimore City	42	Family						
Berea Apolistic Towers	Baltimore City	101	Elderly	yes					
Bolton House	Baltimore City	260	Elderly	yes	0	207	12	0	0
Bolton House	Baltimore City	260	Elderly	yes					
Bolton North	Baltimore City	208	Elderly	yes					
Bon Secours Apartments West Baltimore	Baltimore City	30	Family		0	2	6	22	0
Bon Secours Apartments II	Baltimore City	30	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Bon Secours III	Baltimore City	30	Family						
Bon Secours Benet House	Baltimore City	101	Elderly	yes	25	76	0	0	0
Bon Secours Chesapeake Apartments	Baltimore City	30	Family						
Bon Secours Smallwood Summit	Baltimore City	89	Elderly						
Bond Street Apts.	Baltimore City	81	Family						
Boone Manor	Baltimore City	36	Family						
Broadway Court	Baltimore City	47	Elderly	yes	6	41	0	0	0
Broadway Homes	Baltimore City	130	Family						
Broadway North	Baltimore City	17	Family						
Bruce Street II	Baltimore City	13	Family		0	7	2	4	0
Canterbury House Apts.	Baltimore City	52	Family						
Canton Elderly Housing Project	Baltimore City	17	Elderly	yes	0	17	0	0	0
Centerpoint I & II	Baltimore City	176	Family						
CHAI Multi-Purpose Center	Baltimore City	17	Family/Office		0	16	0	0	0
Chapel NDP	Baltimore City	175	Family						
Charles R. Uncles Senior Plaza	Baltimore City	49	Elderly						
Cherry Hill Senior Housing	Baltimore City	80	Elderly						
Cherrydale Apts.	Baltimore City	186	Family						
Chesapeake Commons	Baltimore City	95	Family		0	50	38	2	0
Christ Church Harbor	Baltimore City	291	Elderly	yes					
City Homes I (West)	Baltimore City	101	Family		0	0	35	34	0
City Homes III	Baltimore City	69	Family		0	0	35	34	0
Claire Court	Baltimore City	30	Family						
Clay Courts	Baltimore City	145	Family						
Cole-Grant-Higgs Senior Center	Baltimore City	60	Elderly						
Coleman Manor Apts.	Baltimore City	50	Elderly	yes	0	50	0	0	0
Community Housing Assoc. II	Baltimore City	22	Family		0	5	1	16	0
Community Housing Project I	Baltimore City	24	Family		0	0	0	0	0
Concord Apts.	Baltimore City	231	Elderly	yes					

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Crossroads Apartments	Baltimore City	20	Elderly	yes	0	20	0	0	0
Dayspring House	Baltimore City	18	Family						
DePaul House	Baltimore City	109	Elderly	yes					
Dickey Hill Forest	Baltimore City	204	Family		0	34	132	38	0
Division Street	Baltimore City	21	Family		0	0	20	0	0
Druid Hill YMCA Family Residence	Baltimore City	13	Family						
Edmondson Common	Baltimore City	74	Family						
Ednor Apartments at Stadium Place	Baltimore City	110	Elderly						
Epiphany House	Baltimore City	33	Elderly	yes	0	29	0	0	0
Eutaw Place Apartments	Baltimore City	58	Family		0	48	9	1	0
Fairfax Gardens	Baltimore City	191	Family						
Flag House Courts Rental Phase I	Baltimore City	124	Family						
Flag House Courts Rental Phase II	Baltimore City	58	Family						
Forrest Street Apts.	Baltimore City	96	Family						
Foxwell Memorial Apts.	Baltimore City	154	Family						
Franklin Square	Baltimore City	72	Family						
Franklin Square/School 100	Baltimore City	65	Elderly	yes	0	65	0	0	0
Gallagher Mansion Rehab.	Baltimore City	41	Elderly	yes					
Greater New Hope	Baltimore City	80	Elderly	yes					
Greenhill Housing Apts.	Baltimore City	301	Family						
Greenwillow Manor Apts.	Baltimore City	147	Family						
Hanover Park Apartments	Baltimore City	118	Family		0	0	0	0	0
Hanover Park Apartments	Baltimore City	118	Family						
Hanover Square	Baltimore City	199	Elderly	yes	0	199	0	0	0
Har Sinai House	Baltimore City	186	Elderly	yes	0	186	0	0	0
Har Sinai West (Elderly)	Baltimore City	109	Elderly	yes					
Harbor City Townhomes	Baltimore City	195	Family		0	0	195	0	0
Harford Commons SRO	Baltimore City	30	Individuals		0	30	0	0	0
Harlem Gardens Senior Apartments	Baltimore City	96	Elderly						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Harlem Park Commons	Baltimore City	12	Family		0	0	2	8	0
Harvey Johnson Towers	Baltimore City	120	Elderly	yes	0	120	0	0	0
Heritage Crossing (Murphy Homes)	Baltimore City	75	Family						
Heritage Crossing (Murphy Homes) II	Baltimore City	72	Family						
Highlandtown Cooperative Apartments	Baltimore City	74	Elderly	yes	0	74	0	0	0
Hillside Park Apartments	Baltimore City	94	Family		0	0	0	0	0
Hillside Park Apartments	Baltimore City	94	Family						
Holden Hall SRO	Baltimore City	14	Individuals		0	14	0	0	0
Hollins Street Phoenix	Baltimore City	60	Family						
Indecco Apartments	Baltimore City	45	Elderly	yes	0	33	0	0	0
Irvington Place Senior Center	Baltimore City	41	Elderly	yes	0	41	0	0	0
Irvington Woods (Frederick Heights)	Baltimore City	71	Family						
Jenkins Apts.	Baltimore City	90	Elderly	yes	0	90	0	0	0
Johnston Square Apartments	Baltimore City	44	Family		0	0	0	0	0
Johnston Square Apartments	Baltimore City	217	Family						
Kensett House	Baltimore City	24	Family						
Lanvale Towers-Canal Court	Baltimore City	320	Family						
Lemko Elderly Housing	Baltimore City	110	Elderly	yes					
Lester Morton Court	Baltimore City	70	Family						
Lexington Terrace Senior Apartments	Baltimore City	88	Elderly						
Lexington Terrace Senior Housing	Baltimore City	88	Elderly	yes	0	0	0	0	0
Lexington Terrace Townhomes	Baltimore City	203	Family						
Lorelly Apts.	Baltimore City	79	Family						
Madison Park North Apts.	Baltimore City	202	Family						
Manhattan Park Apts.	Baltimore City	64	Elderly	yes					
Margaret J. Bennett House	Baltimore City	30	Single Adults						
Margaret J. Bennett House SRO	Baltimore City	30	Single Adults		30	0	0	0	0
Marlborough Apartments	Baltimore City	227	Elderly	yes	71	158	0	0	0
Maxwell I	Baltimore City	18	Family		0	0	0	12	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Maxwell II	Baltimore City	21	Family		0	0	0	21	0
Maxwell III	Baltimore City	20	Family		0	0	5	10	5
Medeso Manor	Baltimore City	56	Family						
Memorial Apts.	Baltimore City	286	Elderly	yes					
Mid Town Churches	Baltimore City	12	Family		0	0	0	0	0
Middlebranch Manor	Baltimore City	549	Family		0	84	418	22	0
Midtown Apartments	Baltimore City	36	Family		0	5	18	9	4
Monterey Apts.	Baltimore City	15	Family		0	0	15	0	0
Montpelier Apartments	Baltimore City	26	Family		0	9	15	15	0
Montpelier Apartments	Baltimore City	26	Family						
Monumental Gardens	Baltimore City	154	Family						
Morrell Park	Baltimore City	98	Elderly	yes					
Mosher Court Apts.	Baltimore City	64	Family						
Mt. Clair Overlook	Baltimore City	110	Elderly	yes					
Mt. Pleasant/Arbor Oaks	Baltimore City	212	Family		0	105	106	0	0
Mulberry Court Apartments	Baltimore City	62	Family		13	24	24	0	0
N.M. Carroll Manor Apts.	Baltimore City	100	Elderly	yes					
New Lafayette Courts	Baltimore City	98	Family		0	0	25	63	10
New Lafayette Courts	Baltimore City	98	Family						
New Lafayette Courts Senior Apartments	Baltimore City	110	Elderly						
Norman Lohn House Apartments	Baltimore City	12	Family		0	3	9	0	0
North Avenue Terraces	Baltimore City	67	Family		0	56	11	0	0
North Gilmore Street	Baltimore City	18	Family		0	0	0	0	0
NRS Townhouses I	Baltimore City	17	Family		0	0	12	3	2
NRS Townhouses II	Baltimore City	22	Family		0	0	22	0	0
Oakland SRO/Micah House	Baltimore City	33	Single Adults	no	33	1	0	0	0
Oaks at Liberty, The	Baltimore City	75	Elderly						
Ocala Apartments	Baltimore City	33	Family		0	0	0	0	0
Oliver Plaza	Baltimore City	45	Elderly	yes	0	45	0	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Orchard Gardens	Baltimore City	197	Family						
Orchard Mews	Baltimore City	101	Family						
Paca House	Baltimore City	106	Elderly	yes	0	106	0	0	0
Pall Mall Apts.	Baltimore City	46	Family		0	0	46	0	0
Panelized Housing Demonstration Project	Baltimore City	14	Family		0	1	6	5	2
Park Charles	Baltimore City	252	Elderly	yes	0	252	0	0	0
Park Heights Apts.	Baltimore City	100	Elderly	yes	0	100	0	0	0
Park Heights Elderly	Baltimore City	84	Elderly	yes	0	83	0	0	0
Park Heights Elderly	Baltimore City	84	Elderly						
Park Terrace	Baltimore City	101	Elderly	yes	0	101	0	0	0
Park View at Coldspring	Baltimore City	99	Elderly						
Park View at Taylor	Baltimore City	100	Elderly						
Patriots Smith	Baltimore City	76	Family		0	0	0	0	0
Pedestal Gardens (Bruce Manor)	Baltimore City	207	Family						
Pembroke Commons	Baltimore City	8	Family		0	4	4	0	0
Penn North Plaza	Baltimore City	66	Elderly						
Penrose-Payson Cooperative Housing	Baltimore City	30	Family		0	0	0	28	0
Pimlico Road Apts.	Baltimore City	13	Family		0	0	13	0	0
Polish National Alliance Senior Housing	Baltimore City	22	Elderly	yes	0	22	0	0	0
Polish National Alliance Senior Housing	Baltimore City	20	Elderly						
Poppleton Cooperative	Baltimore City	96	Family		0	7	61	7	21
Poppleton Place	Baltimore City	123	Family						
Printers Square Apartments	Baltimore City	60	Family						
Ready Avenue Ltd. Partnership	Baltimore City	21	Family		0	0	0	0	0
Redwood Square	Baltimore City	52	Family		0	50	1	0	0
Regent Apartments	Baltimore City	47	Family		1	2	44	0	0
Renaissance Plaza I	Baltimore City	95	Family		0	45	36	5	0
Renaissance Plaza II	Baltimore City	207	Family		0	119	52	20	0
Reservoir Hill IX	Baltimore City	30	Family		0	0	0	27	3

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Reservoir Hill IX	Baltimore City	30	Family						
Reservoir Hill Limited Partnership IV	Baltimore City	11	Family		0	0	3	8	0
Reservoir Hill Limited Partnership XI	Baltimore City	29	Family						
Reservoir Hill X	Baltimore City	15	Family						
Reservoir Hill X	Baltimore City	15	Family						
Reservoir Hill XI	Baltimore City	29	Family						
Reservoir Hill XII	Baltimore City	15	Family						
Ridgely's Delight	Baltimore City	46	Family		0	4	20	27	0
Rieman Block	Baltimore City	27	Family						
Robinwood Townhomes Apts.	Baltimore City	102	Family		0	0	87	15	0
Royal Oaks (Villa Ridge)	Baltimore City	207	Family						
Royalton Arms Apts.	Baltimore City	15	Family						
Ruscombe Gardens	Baltimore City	151	Elderly	yes	0	151	0	0	0
Sandtown Manor	Baltimore City	11	Family		0	0	0	11	0
School 148 Apts	Baltimore City	34	Family		1	24	9	0	0
School 71	Baltimore City	37	Family		0	8	16	13	0
Sharon Towers	Baltimore City	12	Family		0	2	10	0	0
Sharp Leadenhall II/Henrietta	Baltimore City	37	Family		0	0	30	4	3
Sharp-Leadenhall Assoc. I	Baltimore City	155	Elderly	yes	0	155	0	0	0
Sinclair Gate Apts.	Baltimore City	125	Family						
Southern High School	Baltimore City	49	Elderly	yes	0	49	0	0	0
St. Ambrose	Baltimore City	30	Family						
St. Elizabeth's Convent	Baltimore City	20	Elderly	yes	0	20	0	0	0
St. Francis Housing	Baltimore City	24	Elderly	yes	0	24	0	0	0
St. James Terrace	Baltimore City	151	Elderly	yes					
St. Martin's Renovation	Baltimore City	28	Family		4	11	8	4	1
St. Mary's Roland View 1&2	Baltimore City	361	Elderly	yes					
St. Philip & James	Baltimore City	22	Elderly	yes	0	17	1	0	0
St. Stephens Court	Baltimore City	72	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
St. Wenceslaus School	Baltimore City	26	Family		0	8	18	0	0
Stricker Street Apartments	Baltimore City	25	Family		0	4	8	13	0
Stuart Hills	Baltimore City	27	Family						
Target City Apts.	Baltimore City	86	Family						
Telephone Apartments	Baltimore City	20	Family		0	12	8	0	0
The Chateau	Baltimore City	47	Family						
The New Lexington Terrace	Baltimore City	203	Family						
The Munsey Building	Baltimore City	146	Family						
Turner's Station	Baltimore City	34	Family		0	12	18	4	0
Union Avenue	Baltimore City	54	Family		0	18	36	0	0
Upton Courts	Baltimore City	180	Family		0	0	84	77	19
Upton Druid Apts.	Baltimore City	78	Family						
Uptown Apartments	Baltimore City	38	Family		0	4	24	7	3
Virginia Bowen House	Baltimore City	15	Family		14	1	0	0	0
Virginia Bowen House	Baltimore City	15	Family						
Walker Avenue Nonprofit	Baltimore City	87	Elderly	yes					
Walker Daniels House	Baltimore City	23	Elderly	yes	0	23	0	0	0
Walker Mews aka walker mews	Baltimore City	167	Elderly	yes	0	167	0	0	0
Warwick Arms aka walker arms	Baltimore City	228	Family						
Waters Towers	Baltimore City	204	Elderly	yes	0	204	0	0	0
Weinberg Park Assisted Living Facility	Baltimore City	31	Elderly						
Weinburg Woods	Baltimore City	72	Family						
West Hills Square aka Westover Manor	Baltimore City	108	Family						
West Lexington Street Apartments	Baltimore City	44	Family		0	0	3	41	0
Westminster House	Baltimore City	304	Family		0	96	0	0	0
White Park Apartments	Baltimore City	24	Family						
Winters Lane Townhouses	Baltimore City	14	Family		0	8	9	2	0
Woodington Gardens Apts.	Baltimore City	352	Family						
Woodland Apts. 1	Baltimore City	24	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Woodland Apts. 2	Baltimore City	23	Family						
Woodland Apts. 3	Baltimore City	18	Family						
Woodland Street Apts.	Baltimore City	128	Family						
Zion Towers	Baltimore City	210	Elderly	yes	0	210	0	0	0
Cove Point Apartments	Baltimore Co.	100	Elderly						
Fairspring Senior Apartments	Baltimore Co.	100	Elderly						
Landsdown Apartments	Baltimore Co.	157	Family						
Morningside Heights Senior Apartments	Baltimore Co.	77	Elderly						
Owings Mills Apartments	Baltimore Co.	159	Family						
Park View at Taylor	Baltimore Co.	100	Elderly						
Randallstown Terrace	Baltimore Co.	102	Elderly	yes	0	102	0	0	0
Salony House Phase I	Baltimore Co.	30	Elderly						
Salony House Phase II	Baltimore Co.	30	Elderly						
Shakespeare Park Apts.	Baltimore Co.	82	Family						
St. Charles House	Baltimore Co.	24	Elderly	yes	0	24	0	0	0
St. Elizabeth Hall	Baltimore Co.	200	Elderly	yes					
St. Lukes Place	Baltimore Co.	125	Elderly	yes	0	125	0	0	0
St. Luke's Senior Residential Facility	Baltimore Co.	15	Elderly	yes	0	15	0	0	0
St. Mark's Apartments	Baltimore Co.	20	Elderly	yes	0	20	0	0	0
St. Martha's Housing	Baltimore Co.	24	Elderly	yes	0	24	0	0	0
Tabco Towers	Baltimore Co.	200	Elderly	yes	0	80	0	0	0
The Bethany Community	Baltimore Co.	30	Elderly	yes	0	30	0	0	0
Timbercroft 3	Baltimore Co.	162	Family						
Timbercroft 1	Baltimore Co.	122	Family						
Timothy House Apartments	Baltimore Co.	112	Elderly	yes	0	84	22	0	0
Trinity House	Baltimore Co.	82	Elderly	yes	0	82	0	0	0
Turner's Station	Baltimore Co.	34	Family						
Village Home Apartments	Baltimore Co.	64	Family		0	28	18	4	0
Village Oaks	Baltimore Co.	180	Family		0	180	0	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Village of Carrollwood	Baltimore Co.	54	Family						
Virginia Towers	Baltimore Co.	150	Elderly	yes					
Warren Place	Baltimore Co.	120	Elderly	yes	0	120	0	0	0
Weinberg Gardens	Baltimore Co.	84	Elderly	yes	0	84	0	0	0
Weinberg House	Baltimore Co.	116	Elderly	yes	0	116	0	0	0
Weinberg Terrace	Baltimore Co.	87	Elderly	yes	0	87	0	0	0
Weinberg Village II	Baltimore Co.	85	Elderly						
Calvert Pines I (FM)	Calvert	50	Elderly	yes	0	50	1	0	0
Calvert Pines II	Calvert	48	Elderly	yes	0	48	0	0	0
Calvertowne Townhouses	Calvert	34	Family	yes	0	0	18	16	0
Chapline House II	Calvert	30	Elderly						
Courtyards at Fishing Creek I	Calvert	30	Elderly	yes	0	30	0	0	0
Courtyards at Fishing Creek I	Calvert	80	Elderly						
Courtyards at Fishing Creek II	Calvert	30	Family						
Kellam's Marina Apartments	Calvert	80	Family		0	27	43	10	0
Prince Frederick Senior Village	Calvert	30	Elderly	yes	0	30	0	0	0
Prince Frederick Village	Calvert	26	Family	yes	0	12	14	0	0
Prince Frederick Villas	Calvert	25	Family	yes	0	6	13	6	0
Silverwood Farms	Calvert	180	Family		0	46	108	24	0
Silverwood Farms	Calvert	180	Family						
Southern Pines	Calvert	76	Elderly	yes	0	76	0	0	0
Town Center Apartments	Calvert	49	Elderly						
Yardley Hills Town Homes Phase I	Calvert	28	Family		0	0	14	12	2
Yardley Hills Town Homes Phase II	Calvert	76	Family						
Caroline Village Apts.	Caroline	31	Elderly	yes	0	31	0	0	0
Dayspring II	Caroline	20	Family		0	0	0	24	0
Dayspring Townhomes	Caroline	26	Family		0	1	1	24	0
Edenton Manor Apts.	Caroline	30	Elderly	yes	0	30	0	0	0
Fair Haven Manor Apts.	Caroline	32	Elderly	yes	0	32	0	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Fair Haven Manor II	Caroline	18	Elderly	yes	0	18	0	0	0
Federal Manor Apts.	Caroline	24	Family		0	12	12	0	0
Federal Manor Apts. II	Caroline	31	Elderly		0	31	0	0	0
Federal Manor Apts. III	Caroline	32	Family		0	16	16	0	0
Federalsburg Gardens	Caroline	63	Family		0	28	36	0	0
Greensboro Elderly Housing	Caroline	20	Elderly	yes	0	20	0	0	0
Laurel Grove Acres	Caroline	37	Family		0	6	12	11	8
Laurel Grove Acres II	Caroline	28	Labor Housing		0	0	8	20	0
Laurel Grove Acres III	Caroline	12	Family		0	0	10	2	0
Ridgely Meadows	Caroline	32	Elderly	yes	0	32	0	0	0
Riverview Gardens	Caroline	24	Family		0	0	24	0	0
Riverview Gardens II	Caroline	40	Family		0	16	24	0	0
Riverview Gardens III	Caroline	16	Family		0	0	0	6	10
Rolling Meadows Apt.	Caroline	32	Family		0	8	24	0	0
Rolling Meadows II Townhouses	Caroline	26	Family		0	6	20	0	0
Tanyard Branch Townhomes	Caroline	25	Family		0	0	7	18	0
Bishop's Garth	Carroll	72	Family		0	12	48	12	0
Carrolltown Village	Carroll	32	Family	yes	0	6	10	16	0
Hampstead School Senior Apartments	Carroll	84	Elderly						
Hope, Inc.	Carroll	11	Family		0	0	0	0	0
Locust House	Carroll	98	Elderly	yes	0	98	0	0	0
Myers Building Apartments	Carroll	22	Family		3	6	13	0	0
Ridge Residences	Carroll	80	Elderly	yes	0	80	0	0	0
Ridgely House I	Carroll	30	Elderly	yes	0	30	0	0	0
Ridgely House II	Carroll	20	Elderly	yes	0	20	0	0	0
Schoolhouse Road	Carroll	26	Family		0	0	0	26	0
Schriner Court/Union Bridge	Carroll	20	Elderly						
Spencer Village	Carroll	40	Elderly	yes	0	32	8	0	0
Taneytown Village	Carroll	24	Family	yes	0	0	24	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Timber Ridge Apts.	Carroll	100	Elderly	yes	0	100	0	0	0
Tremont II	Carroll	30	Family		0	30	0	0	0
Tremont II	Carroll	30	Family						
Tremont III	Carroll	12	Family		0	12	0	0	0
Tremont III	Carroll	12	Family						
Union Village	Carroll	20	Family	yes	0	0	10	10	0
Village House (Sykesville)	Carroll	54	Elderly						
Westminster Bond Senior I	Carroll	75	Elderly						
Westminster Bond Senior II	Carroll	75	Elderly						
Willowood Garden (Washington Court)	Carroll	120	Family						
Canal Town Village	Cecil	30	Elderly	yes	0	30	0	0	0
Cecilton Apts.	Cecil	20	Elderly	yes	0	20	0	0	0
Cedar Hill Apts.	Cecil	77	Family						
Chesapeake Apts.	Cecil	32	Elderly		0	32	0	0	0
Concord Apts.	Cecil	40	Family		0	40	0	0	0
Concord II Apts.	Cecil	24	Elderly		0	24	0	0	0
Concord III Apts.	Cecil	24	Family		0	12	12	0	0
Concord IV Apts.	Cecil	32	Family		0	16	16	0	0
Elk Chase Apartments	Cecil	60	Family		0	0	40	20	0
Elk Chase II	Cecil	66	Family		0	24	22	20	0
Elk River Manor Apts.	Cecil	24	Family		0	12	12	0	0
Elk River Manor II Apts.	Cecil	32	Family		0	16	16	0	0
Elk River Manor III Apts.	Cecil	23	Elderly	yes	0	23	0	0	0
Fairgreen Senior Community	Cecil	92	Elderly						
Fairview Senior Apartments	Cecil	75	Elderly						
Foxridge Manor Apts.	Cecil	34	Family		0	18	16	0	0
Foxridge Manor II Apts.	Cecil	24	Family		0	8	16	0	0
McKinley Apts.	Cecil	31	Elderly	yes	0	31	0	0	0
McKinley Apts. II	Cecil	16	Elderly	yes	0	16	0	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Meadowside Apts.	Cecil	38	Family		0	15	17	6	0
Perryville House	Cecil	20	Family						
Port Heights Apts.	Cecil	31	Family						
Richmond Hill Manor	Cecil	48	Family		0	12	36	0	0
Bannister Apts	Charles	208	Family						
Brookmont/Wakefield	Charles	104	Family						
Brookside Gardens Apartments	Charles	56	Elderly	yes	0	56	0	0	0
Carroll-Laplata Village	Charles	32	Family	yes	0	0	32	0	0
Charles Landing South	Charles	60	Family		0	0	50	10	0
Diggs Circle Apts.	Charles	20	Family	yes	0	0	7	13	0
Headen House Apartments	Charles	136	Family		0	120	16	0	0
Hunter's Run	Charles	104	Family		0	0	104	0	0
Huntington Apartments	Charles	204	Family		0	24	156	24	0
Indian Head Village	Charles	40	Family	yes	0	0	40	0	0
Jaycee House for the Elderly	Charles	36	Elderly	yes	0	28	8	0	0
La Plata Manor	Charles	103	Elderly	yes	0	103	0	0	0
Lakeview at Victoria Park	Charles	109	Elderly						
LaPlata Grande (OC II)	Charles	48	Family						
Melwood Charles Housing	Charles		Family						
Maples, The	Charles	75	Elderly						
Palmer House Apartments	Charles	152	Family		0	76	76	0	0
Victoria Park Jaycees Senior Housing	Charles	60	Elderly						
Village Green Apts.	Charles	60	Family	yes	0	4	56	0	0
Village Lake	Charles	122	Family	yes					
Wakefield Terrace	Charles	40	Family						
Amber Meadows	Dorchester	32	Family		0	8	24	0	0
Bradford House Apartments	Dorchester	121	Elderly		0	121	0	0	0
Cambridge Club Apartments	Dorchester	75	Family						
Cambridge Park 1	Dorchester	100	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Cambridge Park II	Dorchester	50	Family						
Carlton Court	Dorchester	40	Family	yes	0	0	40	0	0
Crusader Arms II	Dorchester	40	Family		0	40	0	0	0
Crusader Arms III	Dorchester	32	Family		0	16	16	0	0
Crusader Arms IV	Dorchester	32	Family		0	16	16	0	0
East New Market Apartments	Dorchester	19	Elderly	yes	0	19	0	0	0
East New Market Apartments	Dorchester	19	Elderly						
Glenburn Garden House	Dorchester	24	Elderly	yes	0	0	0	0	0
Glenburn Garden House	Dorchester	24	Elderly						
Greenwood Village II	Dorchester	20	Family		0	0	0	20	0
Harrison Ferry Apts.	Dorchester	32	Family		0	16	16	0	0
Hurlock Meadows	Dorchester	30	Elderly	yes	0	30	0	0	0
Hurlock Village	Dorchester	20	Family		0	8	12	0	0
Leonard's Grove Apts.	Dorchester	32	Family		0	16	16	0	0
New Horizons	Dorchester	32	Elderly	yes	0	32	0	0	0
Parkside Village	Dorchester	30	Family		0	4	16	0	10
Prospect Heights II	Dorchester	16	Family		0	0	0	12	4
Ramber Apts.	Dorchester	20	Family		0	10	10	0	0
De Paul Street Partnership	Frederick	20	Family		0	6	12	2	0
Frederick Villas	Frederick	40	Family	yes	0	16	24	0	0
Hickory Hill	Frederick	162	Family		0	12	13	8	0
Hunter's Glen	Frederick	108	Family						
Lafayette Square	Frederick	35	Family		2	17	6	0	0
North Market Street Manor	Frederick	12	Family						
Potomac Commons	Frederick	150	Family		0	45	59	0	0
South Mountain View	Frederick	40	Family	yes	0	24	14	2	0
Taney Village	Frederick	131	Elderly	yes	0	130	0	0	0
Thurmont Village Apts.	Frederick	22	Family	yes	0	0	22	0	0
Westerleigh Apartments	Frederick	28	Family		0	26	2	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Windsor Gardens	Frederick	58	Family		0	11	47	0	0
Winter Place Homes	Frederick	20	Elderly	yes	0	20	0	0	0
Cassel Ridge East	Garrett	36	Family						
Guardian Apts.	Garrett	26	Family	yes	0	9	8	9	0
Meadow View	Garrett	36	Family	yes	0	6	30	0	0
Meadow Woods East	Garrett	29	Elderly	yes	0	29	0	0	0
Meadows East	Garrett	65	Family	yes	0	29	36	0	0
Oakwood East	Garrett	32	Elderly	yes	0	28	4	0	0
Overlook North	Garrett	60	Family						
Parkwood Village East	Garrett	32	Family	yes	0	9	23	0	0
Pine Wood East	Garrett	36	Family	yes	0	0	26	10	0
Pleasant View East	Garrett	24	Family	yes	0	1	1	22	0
Pysell Crosscut Road	Garrett	2	Family						
Starner Hills Elderly	Garrett	18	Elderly	yes	0	18	0	0	0
Town View Village	Garrett	20	Elderly	yes	0	20	0	0	0
Underwood South	Garrett	32	Elderly	yes	0	32	0	0	0
Yough West	Garrett	32	Family		0	28	4	0	0
Alice Anne	Harford	12	Family		0	4	5	2	1
Baldwin Manor	Harford	104	Family		0	32	72	0	0
Burton Manor/Aberdeen Eldery	Harford	80	Elderly	yes	0	80	0	0	0
Corner House Apartments	Harford	20	Elderly	yes	0	20	0	0	0
Edgewater Village (Village of Lakeview)	Harford	218	Family						
Edgewater Village Apartments	Harford	223	Family						
Fairbrooke Apartments	Harford	122	Elderly	yes	0	114	8	0	0
Friendship Village Apts.	Harford	31	Elderly	yes	0	31	0	0	0
Graw, The	Harford	65	Family		0	65	0	0	0
Greenbrier Apts.	Harford	216	Family						
Harborside Village	Harford	150	Family						
Harford Commons (Beacon Terrace)	Harford	100	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Harford Senior Housing 1	Harford	133	Elderly	yes					
Harford Senior Housing II	Harford	21	Elderly	yes	0	21	0	0	0
Lafayette Elderly Apts.	Harford	15	Elderly	yes	0	15	0	0	0
Park View at Bel Air	Harford	101	Elderly						
Park View at Box Hill	Harford	100	Elderly	yes	0	0	0	0	0
Park View at Box Hill	Harford	100	Elderly						
Perrywood Gardens Apts.	Harford	184	Family						
St. John's Towers Elderly	Harford	68	Elderly	yes					
Wakefield Manor Apts.	Harford	185	Family						
Washington Park Apts.	Harford	178	Family						
Windsor Valley (Meadowood 1)	Harford	130	Family						
Windsor Valley (Meadowood II)	Harford	161	Family						
Windsor Valley (Meadowood III)	Harford	283	Family						
Woodbridge Commons	Harford	132	Family						
Woodsdale Senior Housing Center	Harford	130	Elderly	yes	0	119	0	0	0
Beech's Farm Apts	Howard	135	Family						
Chatam Gardens II	Howard	216	Family						
Chimneys of Cradlerock	Howard	198	Family		0	82	112	0	0
Colonial Landing	Howard	101	Elderly	yes	0	101	0	0	0
Columbia Commons	Howard	200	Family		0	52	136	12	0
Communities Homes	Howard	300	Family						
Courts at Guilford	Howard	60	Elderly	yes	0	60	0	0	0
Deep Run Mobile Hm Pk	Howard	306	Family						
Deep Run Mobile Hm Pk II	Howard	313	Family						
Ellicott Terrace	Howard	60	Family		0	5	55	0	0
Guilford Gardens Cooperative	Howard	100	Family		0	10	20	25	0
Harmony Lane Housing	Howard	16	Family		0	0	0	16	0
Hickory Ridge Place	Howard	108	Elderly	yes	0	108	0	0	0
Howard Hills Apts	Howard	134	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Howard Sheltered Homes	Howard	21	Elderly	yes	0	21	0	0	0
Huntington Downs	Howard	108	Family						
Lawyers Hill	Howard	84	Family						
Longwood Elderly	Howard	99	Elderly	yes	0	97	3	0	0
Normandy Woods Apts	Howard	348	Family						
Normandy Woods Apts II	Howard	240	Family						
Orchard Club Apts	Howard	196	Family		0	35	161	0	0
Orchard Crossing Apts	Howard	187	Family		0	47	140	0	0
Orchard Crossing Townhomes I	Howard	30	Family		0	0	0	30	0
Owen Brown II	Howard	104	Elderly	yes	0	98	0	0	0
Owen Brown Place	Howard	188	Elderly	yes	0	150	38	0	0
Park View at Ellicott City	Howard	81	Elderly	yes	0	0	0	0	0
Park Biew at Snowden River	Howard	100	Elderly						
Port Capital Village	Howard	84	Family						
St. Mathew's Housing Development	Howard	16	Elderly	yes					
Selborne House of Dorsey Hall Phase II	Howard	48	Elderly						
Storch Woods II	Howard	60	Family		0	24	36	0	0
Streamwood Apartments	Howard	61	Family		0	0	0	61	0
Streamwood Apartments	Howard	18	Family						
The Heartlands (Elderly)	Howard	160	Elderly	yes					
The Seasons	Howard	1088	Family						
Waverly Gardens	Howard	102	Elderly						
Briscoe Manor Apts. (I,II,III)	Kent	31	Elderly	yes	0	31	0	0	0
Brittany Bay Apts.	Kent	40	Family		0	12	24	4	0
Brookmeadow II	Kent	33	Family		0	9	24	0	0
Brookmeadow I	Kent	34	Family		0	10	24	0	0
Calvert Heights	Kent	22	Family		0	0	12	10	0
Chestertown Cove	Kent	34	Family		0	18	12	4	0
Chestertown Housing	Kent	30	Elderly	yes	0	30	0	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Chestertown Landing I	Kent	72	Family		0	0	0	0	0
Chestertown Landing I	Kent	72	Family						
Chestertown Landing II	Kent	60	Elderly	yes	0	0	0	0	0
Chestertown Landing II	Kent	72	Elderly						
Rock Hall Elderly/Chesapeake Manor	Kent	30	Elderly	yes					
Rock Hall Manor	Kent	12	Elderly	yes	0	0	12	0	0
Woods Edge Apts.	Kent	36	Family		0	18	18	0	0
Woods Edge Apts. II	Kent	36	Family		0	0	36	0	0
Woods Edge III	Kent	20	Family		0	0	0	10	10
64 MPDU	Montgomery	64	Family		0	0	1	31	0
Airpark Apartments	Montgomery	106	Family						
Alexander House (HOC)	Montgomery	311	Family		0	165	115	0	0
Ambassador Apartments SRO	Montgomery	162	Individuals		0	162	0	0	0
Aspen Crossing	Montgomery	192	Family						
Avalon Fields	Montgomery	192	Family		0	80	112	0	0
Avalon Fields	Montgomery	192	Family						
Barclay Apts	Montgomery	157	Family						
Bauer Drive Elderly (Bauer Park Apts)	Montgomery	142	Elderly	yes					
Beall's Grant Apts	Montgomery	74	Family		17	33	24	0	0
Bethany House	Montgomery	128	Family						
Bethesda Commons	Montgomery	369	Family		0	53	310	6	0
Bethesda Commons	Montgomery	369	Family						
Blair Park Apartments	Montgomery	52	Family						
Bucknell Apts	Montgomery	40	Family						
Burnt Mills Crossing	Montgomery	96	Family		0	0	78	18	0
Byron House	Montgomery	30	Elderly						
Byron Manor Apt	Montgomery	59	Family						
Camp Hill Square	Montgomery	51	Family						
Carleton, John (Carleton East Apt.)	Montgomery	24	Family		1	9	14	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Centennial House	Montgomery	238	Family						
Charter House	Montgomery	179	Family						
Chase Ridge (Athalon Ridge Apts)	Montgomery	432	Family		0	188	188	56	0
Churchill Senior Housing	Montgomery	121	Elderly						
Cinnamon Run I	Montgomery	288	Family						
Cinnamon Run II	Montgomery	48	Family						
Clopper Mill Manor	Montgomery	102	Elderly						
Colony III	Montgomery	232	Family		0	168	64	0	0
Country Club Apts	Montgomery	208	Family						
Country Club II	Montgomery	168	Family						
Country Place	Montgomery	192	Family		0	46	115	24	0
Country Place Apts II	Montgomery	120	Family						
Crestwood Terrace	Montgomery	108	Family						
Croydon Manor Apartments	Montgomery	97	Family		0	41	56	0	0
Damascus Gardens	Montgomery	104	Family						
Diamond Square	Montgomery	122	Family		0	122	0	0	0
Dring's Reach	Montgomery	104	Family		0	27	77	0	0
Emory Grove Apts (Emory Grove Village)	Montgomery	137	Family						
Essex House	Montgomery	180	Family		0	67	45	23	0
Fairland Garland (Fairland apts)	Montgomery	176	Family						
Fallswood Commons (Rockville)	Montgomery	190	Family						
Family Services	Montgomery		Family						
Forest Oak Towers	Montgomery	175	Elderly	yes	0	175	0	0	0
Franklin Apartments	Montgomery	185	Elderly	yes	0	185	0	0	0
Friendly Gardens	Montgomery	84	Family						
Friends House	Montgomery	100	Family						
Georgian Court Apts	Montgomery	147	Family						
Georgian Woods I	Montgomery	97	Family						
Georgian Woods II	Montgomery	371	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Georgian Woods III	Montgomery	102	Family						
The Glen	Montgomery	90	Family		0	0	78	12	0
The Grand	Montgomery	546	Family						
Goodacre	Montgomery	153	Family						
Gramax Building	Montgomery	180	Family						
Great Hope Homes	Montgomery	103	Family						
Greenwich Woods III	Montgomery	564	Family						
Greenwood Terrace	Montgomery	49	Family						
Hampshire Towers	Montgomery	449	Family						
Heritage House	Montgomery	100	Elderly	yes	0	100	0	0	0
Heritage Park Cooperative	Montgomery	65	Family		0	0	55	13	0
Hewitt Gardens Apts	Montgomery	143	Family						
Hillbrooke Towers	Montgomery	55	Family						
Homecrest House	Montgomery	136							
Homecrest House III	Montgomery	42	Elderly	yes	0	42	0	0	0
Homecrest House North	Montgomery	100	Family						
Hughes Neighborhd Hsg	Montgomery	24	Family						
Inwood House	Montgomery	150	Family						
Joncon/Mont White Oak V	Montgomery	96	Family						
Lakeview House	Montgomery	152	Elderly	yes	0	152	0	0	0
Landing's Edge Apartments	Montgomery	125	Family		0	0	0	0	0
Landing's Edge Apartments	Montgomery	125	Family						
Landing's Edge Apartments	Montgomery	125	Family						
Leafy House	Montgomery	216	Family						
Lenox at White Flint	Montgomery	552	Family						
Londonderry	Montgomery	529	Family						
Londonderry Towers	Montgomery	150	Family		0	126	24	0	0
Magruder's Discovery	Montgomery	133	Family						
MHLP III	Montgomery	44	Family		0	4	11	25	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Mont White Oak IV	Montgomery	176	Family						
Mont White Oak V	Montgomery	96	Family						
Montery House	Montgomery		Family	yes					
MPDU I	Montgomery	44	Family		0	0	0	20	0
MPDU II	Montgomery	22	Family		0	0	4	16	0
MPDU III	Montgomery	22	Family		0	10	10	0	0
MPDU IV	Montgomery	12	Family						
MPDU V	Montgomery	20	Family						
MPDU VI	Montgomery	40	Family						
MPDU VII	Montgomery	60	Family						
MPDU VIII	Montgomery	65	Family						
Northgate Apts	Montgomery	250	Family						
Oak Hill	Montgomery	281	Family						
Oak Ridge	Montgomery	113	Family		0	5	97	11	0
Oaks at Four Corners	Montgomery	120	Elderly	yes	0	87	28	0	0
Olney Manor	Montgomery	100	Elderly						
Orchard Pond II	Montgomery	435	Family						
Paint Branch THSES	Montgomery	14	Family						
Park Montgomery	Montgomery	144	Family						
Park Wayne Apts	Montgomery	219	Family						
Pembridge Square Apartments	Montgomery	133	Family						
Peppertree Farm I	Montgomery	636	Family						
Peppertree Farm II	Montgomery	244	Family						
Peppertree Sec III	Montgomery	248	Family						
Pines I Apts (Pine Ridge Apt)	Montgomery	182	Family						
Pleasant View House	Montgomery	45	Family	yes	0	0	40	4	0
Pond Ridge	Montgomery		Family						
Pooks Hill Apartments	Montgomery	189	Family		0	99	35	0	0
Quince Orchard I	Montgomery	396	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Quince Orchard II	Montgomery	288	Family						
Randolph Village Apartments	Montgomery	130	Elderly	yes	0	130	0	0	0
Raphael House	Montgomery	30	Elderly	yes	0	30	0	0	0
Rebecca Apts	Montgomery	101	Elderly	yes					
Rebecca Apts	Montgomery	115	Elderly	yes					
Revitz House	Montgomery	250	Family						
Ring House	Montgomery	248	Elderly	yes	0	167	47	0	0
Rock Creek Terrace	Montgomery	526	Family		0	138	256	132	0
Rockville Commons	Montgomery	190	Family						
Rolling Hills	Montgomery	468	Family						
Rosemary Village	Montgomery	416	Family		0	111	237	68	0
Scarborough Square	Montgomery	121	Family						
Scotland Community	Montgomery	75	Family		0	0	0	0	0
Seneca Heights	Montgomery	40	Family						
Shady Grove Apts.	Montgomery	144	Family		0	45	83	16	0
Silver Spring House	Montgomery	80	Family						
Sligo Hills (Sligo Avenue Apartments)	Montgomery	50	Family						
Sligo House Apts	Montgomery	64	Family						
Snowden's Ridge	Montgomery	87	Family						
Somerset Apartments	Montgomery	99	Family						
Spring Gardens East	Montgomery	83	Elderly	yes	0	61	20	0	0
Springvale Terrace	Montgomery	156	Family						
Stewartown House	Montgomery		Family						
Suburban Park Village	Montgomery	168	Family						
Summit Apartments (Summit Crest Apts)	Montgomery	236	Family						
Sunrise at Kensington Park (Sunrise garden)	Montgomery	165	Elderly	yes	14	33	14	0	0
Takoma Towers(retirement center)	Montgomery	186	Elderly	yes					
The Colony I	Montgomery	288	Family						
The Colony II	Montgomery	248	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
The Gardens of Traville Senior Apartments	Montgomery	230	Elderly						
The Oaks at	Montgomery	120	Family						
The Overlook	Montgomery	152	Family						
The Place	Montgomery	228	Family						
The Point	Montgomery	1119	Family						
The Willows	Montgomery		Family						
Timberlawn Crescent	Montgomery	83	Family		0	8	61	14	0
Town Center Apartment	Montgomery	110	Family						
University Gardens	Montgomery	64	Family						
University Gardens Elderly Apartments	Montgomery		Elderly	yes					
University Manor Apts	Montgomery	136	Family						
Victory Terrace	Montgomery	72	Elderly						
Village House	Montgomery	147	Elderly	yes	0	141	2	0	0
Waters Landing Apartments II	Montgomery	143	Family						
Wayne Manchester Towers	Montgomery	226	Family						
White Oak Towers	Montgomery	412	Family						
Winter Growth (adult day care center)	Montgomery	14	Elderly	yes	0	14	0	0	0
Woodmont Park	Montgomery	414	Family						
Yorkshire Apartments	Montgomery	228	Family						
2400 Queens Chapel Apts	Prince George's	247	Family						
Alden Park	Prince George's	24	Family		0	0	0	24	0
Arbor View Apts	Prince George's	450	Family						
Auburn Manor Apartments	Prince George's	261	Family						
Avalon Apts (avalon crossing apt.)	Prince George's	272	Family						
Avondale Park Apts	Prince George's	88	Family						
Belford Towers	Prince George's	468	Family						
Berkley Apartments (The Berkley)	Prince George's	160	Family						
Bowie Commons (FM)	Prince George's	36	Elderly	yes	0	36	0	0	0
Bradford Place	Prince George's	214	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Branchwood Towers	Prince George's	180	Family		0	160	20	0	0
Burgundy Park Apts	Prince George's	108	Family						
Canonbury Square Apts	Prince George's	95	Family						
Capital Crossing Apts	Prince George's	360	Family						
Capital View Mutual I	Prince George's	60	Family						
Capital View Mutual II	Prince George's	60	Family						
Central Gardens	Prince George's	93	Family						
Central Gardens II	Prince George's	106	Family		0	37	51	18	0
Cheverly Crossing	Prince George's	168	Family						
Chillum Oaks (Adventist Apts)	Prince George's	27	Family						
Coral Gardens	Prince George's	16	Family		0	0	0	12	4
Council House	Prince George's	161	Family						
Crest Apts	Prince George's	43	Family						
Delta House	Prince George's	30	Family		0	0	0	0	0
Drexel Park II	Prince George's	168	Family		0	24	144	0	0
East Pines Terrace	Prince George's	74	Family						
Eastdale Apartments	Prince George's	70	Family						
Eastern Ave	Prince George's		Family						
Emerson House Apts	Prince George's	220	Family						
Forest Creek Apts	Prince George's	930	Family						
Forest Lake Apts	Prince George's	317	Family						
Foxglenn Apts	Prince George's	172	Family						
Friendship Arms	Prince George's	151	Elderly	yes	0	151	0	0	0
Glen Willows	Prince George's	152	Family						
Glenmore Apartments	Prince George's	409	Family						
Glenarden I	Prince George's	340	Family						
Glenarden II	Prince George's	237	Family						
Glenarden IV	Prince George's		Family						
Glenreed Apts (Glenreed housing Inc.)	Prince George's	105	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Greenridge House	Prince George's	101	Elderly	yes	0	100	0	0	0
Greenwich Wds-Mistletoe	Prince George's	120	Family						
Heather Hills	Prince George's		Family						
Henson Creek Manor	Prince George's	105	Family		0	0	43	62	0
Henson Creek Manor II	Prince George's	105	Family						
Hillwood Manor	Prince George's	96	Family						
Imperial Gardens Sec 2	Prince George's	188	Family						
Jefferson Hall	Prince George's	103	Family						
Kenilworth Towrs	Prince George's	217	Family						
Kirkwood Village	Prince George's	667	Family						
Langley Gardens Apartments	Prince George's	204	Family		0	0	0	0	0
Largo Center Apartments	Prince George's	100	Family		0	5	89	5	0
Largo Landing	Prince George's	106	Family						
Laurel Commons	Prince George's	38	Family		0	0	0	0	0
Laurel Crossing Apts	Prince George's	156	Family						
Laurel Square Apts	Prince George's	420	Family						
Malta House	Prince George's	30	Elderly	yes	0	30	0	0	0
Manor Apartments	Prince George's	62	Family						
Millwood Townhouses	Prince George's	75	Family		0	0	43	22	10
Mt. Ranier Artist Apartments	Prince George's	12	Family						
Mount Ranier Community	Prince George's	44	Family						
Nalley Apts	Prince George's	140	Family						
Park Forest	Prince George's	608	Family		0	195	405	8	0
Park Seton	Prince George's	102	Elderly	yes	0	102	0	0	0
Park View Apartments	Prince George's	152	Elderly	yes	0	152	0	0	0
Parkland Village	Prince George's	159	Family						
Parkview II	Prince George's	105	Elderly	yes	0	105	0	0	0
Parkview Manor	Prince George's	54	Family						
Parkway Apartments	Prince George's	159	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Penn-Mar Apartments	Prince George's	291	Family						
Pin Oak Apartments I/II	Prince George's	220	Elderly						
Prince George's Manor	Prince George's	148	Elderly						
Queen's Manor Apartments	Prince George's	332	Family						
Quebec Arms Apartments	Prince George's	332	Family						
Rainier Manor Apts	Prince George's	103	Elderly	yes	0	54	50	0	0
Reality, Inc.	Prince George's	16	Family		0	0	0	0	0
Rolling Crest Commons	Prince George's	140	Elderly	yes	0	140	0	0	0
Selborne House	Prince George's	126	Elderly						
Spellman House	Prince George's	140	Elderly						
Sugar Hill	Prince George's	11	Family		0	0	0	0	11
Sun Ridge Apartments	Prince George's	372	Family						
Villages of Laurel	Prince George's	128	Family						
Vistas at Lake Largo	Prince George's	110	Elderly	yes	0	78	31	0	0
Woodland Springs	Prince George's	765	Family		0	142	287	33	44
Woods Of Marlton I	Prince George's	186	Family		0	51	127	9	0
Woods of Marlton II	Prince George's	104	Family		0	30	64	10	0
Woodside Village I & II	Prince George's	200	Elderly						
Center Park Apts.	Queen Anne's	37	Family		0	16	18	3	0
Kent Island Village Apts.	Queen Anne's	38	Family		0	8	30	0	0
Renaissance Chase Apts.	Queen Anne's	32	Family		0	12	16	4	0
Sudlersville Apts.	Queen Anne's	16	Elderly	yes	0	16	0	0	0
Tilghman Terrace	Queen Anne's	42	Elderly	yes	0	41	1	0	0
Breton Bay Gardens	Saint Mary's	40	Family		0	15	25	0	0
Chancellors Run Apts.	Saint Mary's	40	Family	yes	0	12	28	0	0
Foxchase Village Apartments	Saint Mary's	134	Family						
Great Mills Court	Saint Mary's	44	Family	yes	0	8	14	22	0
Hunting Meadows	Saint Mary's	32	Family	yes	0	8	24	0	0
Joe Baker Village	Saint Mary's	36	Elderly	yes	0	36	0	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Housing Preservation Project	Saint Mary's	4	Family						
Leonard's Freehold	Saint Mary's	34	Family	yes	0	0	16	18	0
Leonardtwn Village	Saint Mary's	35	Family	yes	0	0	35	0	0
Lex Woods Apts.	Saint Mary's	78	Family	yes	0	30	34	14	0
Lexington Park Senior Apartments	St. Mary's	110	Elderly						
Lexington Village	Saint Mary's	36	Family	yes	0	12	22	2	0
Mayfaire Apts	Saint Mary's	144	Family						
New Towne Village Apts	Saint Mary's	35	Elderly	yes	0	35	0	0	0
River Bay Townhomes	Saint Mary's	173	Family						
St. Mary's Home for Eld I (AKA Cedar Lane)	Saint Mary's	129	Elderly	yes					
St. Mary's Home for Eld II (AKA Cedar Lane)	Saint Mary's	50	Elderly	yes					
Valley Drive Est. Apts.	Saint Mary's	38	Family	yes	0	0	19	19	0
Fair Winds Apts.	Somerset	36	Elderly	yes	0	36	0	0	0
Loretta Village	Somerset	32	Family		0	8	8	16	0
Princess Anne Apts.	Somerset	20	Family		0	8	12	0	0
Princess Anne Townhouses	Somerset	120	Family						
Princess Anne Villas	Somerset	39	Family		0	12	27	0	0
Stewart Neck	Somerset	36	Family						
Frederick Douglas	Talbot	24	Elderly	yes	0	24	0	0	0
Jowite Apts.	Talbot	24	Family		0	16	8	0	0
Magnolia Meadows	Talbot	98	Family						
Mulberry Hill Apts. I	Talbot	40	Family		0	20	20	0	0
Mulberry Hill Apts. II	Talbot	40	Family		0	40	0	0	0
Mulberry Hill Apts. III	Talbot	32	Family		0	32	0	0	0
Mulberry Hill Apts. IV	Talbot	16	Family		0	16	0	0	0
Parkview at Easton	Talbot	80	Individuals						
Parkway Apts.	Talbot	44	Family		0	10	20	14	0
Quail Meadows	Talbot	32	Family		0	8	24	0	0
Quail Meadows II	Talbot	20	Family		0	0	20	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Alexander House, Inc. (FM)	Washington	95	Family	yes	68	27	0	0	0
Bethel Gardens	Washington	94	Family	yes	16	21	43	14	0
Country Village Apts.	Washington	32	Family	yes	0	16	12	4	0
Doub Meadows	Washington	95	Family	yes	0	0	28	67	0
Douglas Court	Washington	30	Family	yes	0	4	12	9	5
Edgewood Hills	Washington	110	Family						
Frederick Manor	Washington	125	Family	yes	0	20	51	40	14
Gateway Crossing Phase II	Washington	45	Family						
Gateway Crossing Phase III	Washington	77	Family						
Greenside Apts.	Washington	104	Family	yes	0	56	40	8	0
Hagerstown Elderly/Elizabeth Court	Washington	110	Elderly	yes	0	110	0	0	0
Hagerstown Robinwood Senior Housing	Washington	64	Elderly						
Hagerstown Robinwood Senior Housing Phase II	Washington	56	Elderly						
Halfway Manor Apts.	Washington	100	Family	no	0	0	0	80	20
Heritage Court	Washington	30	Family		0	10	20	0	0
Hopewell Manor Apts.	Washington	64	Family	yes	0	20	44	0	0
Monterey House	Washington	24	Elderly						
Mountain View Apts.	Washington	28	Family	yes	0	12	16	0	0
Mulberry House	Washington	23	Homeless						
Noland Village	Washington	250	Family	yes	0	0	75	145	30
Parkside Homes	Washington	39	Family	yes	0	6	24	5	4
Quaker Creek Apts.	Washington	48	Family	yes	0	36	0	12	0
Springfield Manor	Washington	36	Family						
Stonecroft Apartments	Washington	108	Elderly	yes	0	108	0	0	0
The Point at Smithsburg	Washington	38	Family	yes	0	0	3	35	0
Washington Gardens	Washington	100	Family	no	0	12	62	22	4
Westview Homes	Washington	210	Family	no	0	42	95	55	18
Youngstown Apts. I & II	Washington	228	Family	yes	0	17	29		
Youngstown Apts. II	Washington	120	Family						

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Chestnut Manor Apts.	Wicomico	48	Family		0	48	0	0	0
Chestnut Manor II	Wicomico	40	Family		0	20	20	0	0
Fruitland Apts.	Wicomico	36	Family						
Gateway Village II	Wicomico	62	Elderly						
Gateway Village III	Wicomico	36	Elderly						
Green Meadow Townhouses	Wicomico	26	Family		0	10	16	0	0
Lakeview Apts.	Wicomico	37	Family		0	37	0	0	0
Leonard Apts.I & II	Wicomico	34	Family		0	4	10	18	2
Meadow Ridge Apts.	Wicomico	34	Family		0	6	28	0	0
Moss Hill Townhouses	Wicomico	200	Family						
Pemberton Manor Apts.	Wicomico	209	Family						
Salisbury Commons	Wicomico	96	Family						
The Cottages at River House	Wicomico	30	Elderly						
Waterside Apartments	Wicomico	68	Family		0	0	45	19	3
West Road Apts.	Wicomico	56	Family						
Bay Terrace Apts.	Worcester	32	Family		0	0	12	12	8
Clarke Manor Cottages	Worcester	30	Elderly	yes	0	30	0	0	0
Decatur Apts.	Worcester	32	Family		0	16	0	16	0
Decatur II	Worcester	31	Elderly	yes	0	31	0	0	0
Decatur III	Worcester	28	Family		0	4	24	0	0
Greebriar Court	Worcester	24	Family		0	0	12	12	0
Hartley Hall	Worcester	20	Elderly		0	20	0	0	0
Homes at Berlin	Worcester	42	Family						
Isaiah Fassett	Worcester	28	Family		0	16	12	0	0
Lynn Apts.	Worcester	13	Family		0	6	7	0	0
Lynn Haven Acres	Worcester	16	Family		0	0	16	0	0
Maple Hill Apts.	Worcester	24	Elderly	yes	0	22	2	0	0
Meadow Grove	Worcester	20	Elderly	yes	0	20	0	0	0
New Hope Village Apts.	Worcester	28	Family		0	12	16	0	0

Project Name	County	Units	Occupancy	Handicapped Accessible Units	Efficiency	1 Br	2 Br	3 Br	4+ Br
Newtowne Apts.	Worcester	58	Elderly	yes	30	28	0	0	0
Pleasant Manor	Worcester	30	Elderly	yes	0	30	0	0	0
Pocomoke Villas	Worcester	37	Family		0	10	27	0	0
Reedy Cove Apts.	Worcester	32	Family		0	0	32	0	0
Snow Hill Senior Apartments	Worcester	30	Family						
Sunshine Village	Worcester	52	Family		0	4	26	14	8
The Meadows	Worcester	28	Family		0	0	17	11	0
Trappe Creek	Worcester	14	Family		0	0	0	14	0
Victoria Apartments	Worcester	40	Family		20	20			
Windy Gardens	Worcester	34	Family		0	16	18	0	0

FOOD PANTRIES IN MARYLAND

ALLEGANY COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Salvation Army	701 E. First St., Cumberland, MD 21502	Bessie Park	(301)-777-7600	8am-4pm	Mon-Fri
Lavale U.M.C	565 National Highway, Lavandale, MD 21502	Kent Smith	(301)-722-6800	9:30am-3:30pm	Tue-Fri
Christ U.M.C.	4 th & Race Street, Cumberland, MD 21502	Florine Taylor Janet Crabtree	(301)-777-1561	8am-4pm	Mon-Fri
Frostburgh Pantry	P.O. Box 301, Frostburgh, MD 21532	Dale Coleman	(301)-689-3660	10am-2pm	Mon-Fri
Cumberland Church of God	401 Industrial Blvd., Cumberland, MD 21502	Sue Yeroshefsky	(301)-724-2378	10am-1pm/4-6pm	Wed, Fri
John F. Kennedy Restricted (tenants only)	Mechanic St., #408, Cumberland, MD 21502	Walter Hite	(301)-777-1592	10am-11am	Mon-Fri
Cumberland Manor Restricted (tenants only)	29 Baltimore Ave., Cumberland, MD 21502	Mary Jane Brown	(301)-777-5186	10am-11am	Mon-Fri
Booth Towers Restricted (tenants only)	220 Sommerville Ave., Cumberland, MD 21502	Connie Weaver	(301)-722-7603	10am-11am	Mon-Fri
Queen City Towers Restricted (tenants only)	235 Paca Street., Cumberland, MD 21502	Joyce Snyder	(301)-777-5807	10am-11am	Mon-Fri
Interfaith Pantry	301 Cumberland St., Cumberland, MD 21502	Bob Shipley	(301)-777-7882	9am-2pm	Mon-Fri
Healing Hunger	19210 Opessa St. S/E, Oldtown, MD 21555	Robin Sills Carol Beeman	(301) 478-5448	9am-2pm	Tue & Fri
Hope Station	6 Pershing St., Cumberland, MD 21502	Dan Snyder	(301) 722-8266	9am-3pm	Mon-Fri
Lavale Assembly Church	525 National Highway, Lavale, MD 21502	Luther Martz	(301) 759-2863	10am-11am	Mon-Fri
Annapolis Spanish church	1840 Margaret Ave., Annapollis, MD 21401		(410) 626-1700	12pm-2pm	Saturday
Apostolic House of Prayer	413 Headquarters Dr., Millersville		(410) 729-4590	call	Mon-Fri
Appalachian Mountain Ministries	P.O. Box 9794, Arnold, MD 21012				

ANNE ARUNDEL COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Arundel Lodge	2012 Reynard Ct., Annapolis, MD 21401		(410)841-6131		
Asbury Broadneck UMC	657 Broadneck Rd., Annapolis, MD 21401	Carroll Hunt	(410) 757-2995	10- 12pm	2 nd & 4 th Th
Asbury UMC	87 West Street, Annapolis, MD 21401	Yvonne Jacobs	(410) 268-9500	1- 3pm	Wed,Fri, Sat
Asbury Towneck	429 Asbury Drive, Severna Park, MD 21146		(410) 647-7667		
Beacon Light 7th Day Advent	1943 Drew Street, Annapolis, MD 21403		(410) 268-8436	7-9:30pm 9-9:30am	Tue Sat
Birthright	P.O. Box 4697, Annapolis, MD 21403				
Brooklyn Church of God	3800 9 th St., Baltimore, MD 21225				
Brooklyn Heights UMC	110 Townsend Ave., Brooklyn, MD 21225		(410) 789-3688	call	Mon-Fri
Brooklyn UMC	4 th & Pontiac, Brooklyn MD 21225		(410) 355-8740	9am-12noon	Mon,Wed,Th
Burwood Gardens	6652 Shelly Rd., Glen Burnie, MD 21061		(410) 222-6226	call	Mon-Fri
Calvary Chapel International Worship Center	8064 New Cut Rd., Severn, MD 21144		(410) 969-5100		
Cecil Memorial UMC	15 Parole Street, Annapolis, MD 21401		(410) 266-5651	Call	
Chews Memorial UMC	492 Owensville Road, Harwood, MD 20776		(410) 744-9355	1 st and 3 rd Fri	9am-12pm
Christian Assistanc Program	1239 Murray Rd, Odenton, MD 21113	Paul Greksa	(410) 551-9238	11am-1pm 3pm-5pm	Tue Th
Chrysalis House	1570 Crownsville Rd., Crownsville, MD 21032		(410) 974-6829		
Church on the Rock	900 Church Street, Baltimore, MD 21225		(410) 355-5922	9am-11am	Tue & Th
Claiborne Place	130 Hearne Rd., Annapolis, MD 21401		(410) 266-5730		
Community Service Center	120 Audrey Ave., Brooklyn, MD 21225		(410) 789-4523		
Community UMC	8680 Fort Smallwood Rd, Pasadena 21122		(410) 255-1506	9am-3pm	Mon-Fri Call first
Concerned Citizens for Students	After school Program , Edgewater MD, 21037		(410) 573-1116		
Darlene's Pantry	10 South River Club House Rd.,Edgewater,		(410) 798-5460		

ANNE ARUNDEL COUNTY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Emmanuel Wesleyan Church	3716 West Bay Ave., Baltimore, MD 21225		(410) 355-6650		
Faith Assembly of God	250 W. Bayfront Road, Lothian, MD 20711		(410) 257-2085	Call First	
Faith Baptist Church	7857 Furnace Branch Rd Glen Burnie MD 21061	Dottie Millham	(410) 761-5346	9:30am-3:30pm	Mon-Fri
Faith Community	212 B Street, Lothian, MD 20711		(410) 741-0647	9:00-12:00 pm	Friday
First Baptist of Eastport	206 Chesapeake Ave., Annapolis, MD 21403		(410) 268-7378	10am-12noon	Tue
First Baptist of Edgewater	38 W. Central Ave., Edgewater, MD 21037	Pat Conner	(410) 956-3142	9:30am-2:30am	Mon-Fri
First Baptist of Annapolis	31 W. Washington St., Annapolis, MD 21401	Booker Williams	(410) 268-8987	11am-1pm	Sat
Food Link	2666 Riva Road 3 rd Floor		(410) 222-7853	9am-12pm	1 st & 3 rd wed every Friday
Gospel Assembly	3555 4 th Street, Brooklyn, MD 21225		(410) 354-2770	1pm – 2pm 5:30- 6:45	Sun Th
Greater Morning Star Apos Church	8069 Telegraph Rd., Severn, MD 21113		(410) 551-9000	10am-12pm	Sat
Harundale Presb.	1020 Eastway, Glen Burnie, MD 21060		(410) 766-4338	1pm-2pm 5:30-6:45pm	Sun Thurs
Heritage Baptist	1740 Forest Drive, Annapolis, MD 21401	Bill Bond	(410) 263-6680	8:30am-11:30pm & 1:30-3pm	Mon-Fri
Holly Temple Cathedral	708 Bestgate Rd., Annapolis, MD 21401		(410) 266-7946	Call for hours	
Housing Commission of Ann Arundel County	7477 Baltimore-Annapolis Blvd., Glen Burnie, MD 21060		(410) 222-6200		
Hurting Helping People	7629 B Spencer Rd., Glen Burnie, MD 21060		(410) 766-7690	Call for Hours	
Igles Hispana Alpha and Omega	16010 Annapolis Rd., Bowie, MD 20715	Roland Rosales	(301) 262-6266	3pm-5pm	Sunday
Inlesia Hispana Emmanuel	919 Cedar Park, Annapolis, MD 21401				
John Welsley UMC	6922 N. Richie Hwy. GB , MD 21061		(410) 766-6981	Call	
Lighthouse of Southern MD	300 Fairhaven Rd., Tracey's Landing, MD 20779		(410) 257-6775	Call	

ANNE ARUNDEL COUNTY FOOD PANTRIES Continued

	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Lloyd Keaser	229 Berlin Ave., Baltimore, MD 21225		(410) 7894181	10am-3:30pm	Mon, Wed, Fri
Magothy UMC	3703 Mountain Rd., Pasadena, MD 21122		(410) 255-2420	Sat	11am -12pm
Mison Christiana Casa Dios	4902 Ritchie Hwy., Brooklyn Park, MD 21225		(410) 789-3991	11am-1pm 3pm-5pm	Tuesday Thurs
Mount Olive AME Church	2 Hicks Avenue, Annapolis, MD 21401		(410) 266-5090	Call	
My Brothers Pantry	P.O. Box 223, Arnold, MD 21012	Barbara Lewis	(410) 757-5190	Call	
NCEON	304 5 th St., Glen Burnie, MD 21061		(410) 766-1826	10am-3:30pm	Mon, Wed, Fri
New Life Church	48 Joyce Lane, Aronld, MD 21012		(410) 320-6360		
On Our Own	162 West St., Annapolis, MD 21401		(410) 295-1224	9am-4pm	Mon-Fri
Our Lady of Perpetual Help	515 Loch Haven Rd., Edgewater, MD 21037		(410)798-5161	10am-12noon	Wed-Fri
Our Lady of Cheasapeake	8325 Venitor Road, Pasadena, MD 21122		(410) 255-3677		
Pasadena Church of God in Christ	Old Mill & Logan Rd. Pasadena, MD 21122		(410) 255-8635	Call	
Payne Memorial Church	7901 Brockbridge Rd., Jessup, MD 20794		(410) 799-5150		
Praise Center Full Gospel Church	2622-1 Annapolis Rd. Severn, MD 21144		(410) 551-8771		
Touch Thru Me Ministries/ Praise Center Full Gospel Church	2611-1 Annapolis Rd. Severn MD 21144		(410) 551-8771		
Rapture Church	1834 George Ave., Annapolis, MD 21401		(410) 263-2601	2pm-7pm	Mon-Sat
Regeneration Church of Deliverance, Inc.	435 Es. Pataspaco Ave., Baltimore, MD 21225		(410) 355-8440		
RESPECT Foundation	640 South River Landing, Edgewater, MD 21037		(410) 571-7992	9am-12pm	Mon
Restoration Community Dev.	1812 Virginia Ave., Annapolis MD 21401		(410) 267-0609	9am-12pm	Sat
Riva Trace Baptist	2990 Riva Trace Pkwy., Annapolis, MD 21401		(410) 224-2690	9am-12pm	1 st Sat
S.C.A.N	5757 Sol. Island Road, Lothian, MD 20711		(410) 867-2838	Call	

ANNE ARUNDEL COUNTY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Salvation Army	351 Hilltop Lane, Annapolis, MD 21401	Renne Powell	(410) 263-4091	8am-12pm 12:30pm – 4pm	Mon-Fri
Salvation Army	511 So. Crain Hwy., Glen Burnie, MD 21061	Melaine Thompson	(410) 768-0477	9am-4pm	Mon-Fri
Samaritan House	2610 Green Briar Ln., Annapolis, MD 21401		(410) 269-5605	10am-12pm	2 nd and 4 th Thursday
Sarah's House	2015 20 th Street, Ft. Meade MD 20755		(410) 551-7722	1pm-3pm	Wed, Fri, Sat
Spanish Church in Brooklyn	P.O. Box 1977, Glen Burnie, MD 21061			Call	
South County Emergency Baby Pantry	220 Owensville Rd, West River, MD 20778		(410) 867-0346	Baby Pantry only Call	
SPAN	400 Benfield Rd., Severna Park, MD 21146	Cindy Berkhart	(410) 647-0889	10am-2pm 5pm-7pm	Mon-Fri Mon only
St. Bernadette's Parish	Winter Relief Program		(410) 969-2787	9am-11am	Tues & Thurs
St. Elizabeth Ann Seton	1800 Seton Dr., Crofton, MD 21114		(410) 721-5770	9am-4pm	Mon-Fri
St. John the Evangelist	689 Ritchie Hwy., Severna Park, MD 21146		(410) 647-4884	10am-12pm 2pm-4pm	Tue & Thu
St. James Apostolic	7566 E. Howard Rd., Glen Burnie, MD21061	Irene Pitts	(410) 761-9272	12pm-3pm	4 th Tue
St. Marks	1440 Dorsey Rd., Hanover. MD 21076	Dennard	(410) 859-5352	8am-10am	last Sat
Vneyard Christian Fellowship of Central Maryland	255 Najoies Rd., Millersville, Md 21108		(410) 987-3440		
Wayman Good Hope	100 Hoyle Lane, Severna Park, MD 21146	Irene Johnson	(410) 647-0468	call	
Woodside Garden Apartments	713-D Newtowne Dr., Annapolis, MD 21401		(410) 269-6563		
YMCA of Annapolis	1517 Ritchie Hwy, Arnold, MD 21012		(410) 626-7800	2:30pm-5:30pm	Tue-Thu
Wilson Memorial Church	Rt. 3 North, Gambrills, MD 21054	Dorothy Geathers	(410) 721-1482	9am-12pm	Mon

BALTIMORE CITY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Abundant life II	5110 Balto Natl. Pike apt 4, Baltimore, MD 21229	Thomas Hill	(410) 947-6343	9am-12pm	Mon
Adams Chapel AME	3813 Egerton Rd., Baltimore, MD 21215	Arlean Burton	(410) 542-6200	11am-1pm	Wed, Sat
Agape House	222 N. Carrollton Ave., Baltimore, MD 21223	Rev. Robinson	(410) 728-2222	12pm-6pm	Wed, Sat
AMES Memorial AME	615 Baker St., Baltimore, MD 21217	Jacqueline Johnson	(410) 523-5556	11am-1pm	Tue
Bernard E. Mason	2121 Windsor Gardens, Baltimore, MD 21207	Lillie Ziegler	(410) 448-1311	11am-4pm	Thurs
Bethany Baptist Church	2616 Ridgeley St., Baltimore, MD 21230	Sanra White	(410) 539-5029	9am-12pm	Mon-Fri
Bethel Church of God	301 W. 28 th Street, Baltimore, MD 21211	Charletta Williams	(410) 235-0160	9am-12pm 12pm- 3pm	Fri Sun
Carter Memorial Emergency	745 West Fayette St., Baltimore, MD 21201	Vernell Lewis	(410) 752-6123	10am-2pm	Thu
Central Baptist Church	2035 West Baltimore St., Baltimore, MD 21223	Rev. Matthew Braxton	(410) 233-8558	12pm-2pm	Sat
Chase House	1027 Cathedral St., Baltimore, MD 21201	Joan Weston	(410) 539-6155	10am-2pm	Fri
Christ Deliverance Church	711 Walnut Ave., Baltimore, MD 21229	Rev. Martin Jacobs	(410) 945-8700	12pm-6pm	M, W, F, S
Christian Memorial Church	2001 West North Ave., Baltimore, MD 21217	Barbara Grimes	(410) 728-0464	10am-12pm	Sat
Church Of Jesus Christ	2880 Hillen Road, Baltimore, MD 21218	James Gamble	(410) 366-8010	10am-3pm	Mon, Thu
Claremont Homes	4312 Clareway, Baltimore, MD 21213	Anna Warren	(410) 485-4836	10am-2pm	Mon, Wed, Fri
Collington Square	1211 N. Chester St. Baltimore, MD 21213	Gloria Etheridge	(410) 342-6740	12pm-4:30	Wed
Concord Baptist Church	5204 Liberty Heights Ave., Baltimore, MD 21207	Hazel Guin	(410) 367-1117	10am-11:30am	4 th Sat
Corpus Christi	703 Whitelock St., Baltimore, MD 21217	Mariano	(410) 523-5822	1:30pm-3pm	Thu
Deliverance Manna	3538 Old York Road, Baltimore, MD 21218	Jerry Wallace	(410) 947-4536	6pm-8pm 10am-12pm	Thu Sat
Dept. of Housing Neighborhood	22 S. Calhoun, Baltimore, MD 21223	Deinia	(410) 566-6658	10am-3pm	Mon
Donald Bentley Food Pantry	2405 Loch Raven Blvd., Baltimore MD 21218	Ellen Bentley	(410) 662-9287	9am-12:30pm	Sat
Dukeland Development	1601 Gertrude St., Baltimore, MD 21216	Hattie Rhames	(410) 233-6112	12pm-8pm	Mon, Fri
East Baltimore Church of God	800 South Oldham St. Baltimore, MD 21224	Welton Hunt	(410) 327-0177	10am-3pm	Sat, Sun

BALTIMORE CITY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Emergency Food Relief Fund	1401 Pennsylvania Ave., Baltimore MD 21217	Leslie Wood	(410) 523-7000	11:30am-1pm	Wed.
First Apostolic Faith Church	27 S. Caroline St., Baltimore, MD 21231	Beatrice Bridgefort	(410) 327-1181	2:30pm-4:30pm	Sat
First Charity Baptist Church	611 N. Aisquith St. Baltimore, MD 21202	Rebecca Pugh	(410) 732-0076	11am-3pm	Fri-Sun
First Emmanuel Baptist Church	2209 Park Ave, Baltimore, MD 21217	Bertha Creighton	(410) 523-6787	12pm-3pm	Tue, Thu
First Philadelphia Baptist	2120 Greenmount Ave., Baltimore, MD 21218	Lucy Washington	(410) 243-5625	10:30am-12:30pm	Thu-Fri
Franciscan Center, Inc.	2212 Maryland Ave., Baltimore, MD 21218	Brother Finbar	(410) 467-5340	10am-2pm	Mon-Fri
Gillis Memorial	3939 Reisterstown Rd., Baltimore, Md 21215	Rev. Helen Samuel	(410) 396-7740	9am-1pm	Mon, Wed, Fri
Gospel Messenger	2610 Keyworth Ave., Baltimore, MD 21215	Rev. Geraldine S. James	(410) 467-0113	9am-1pm	Thu
Gospel Tabernacle	3100 Walbrook Ave., Baltimore, MD 21216	Lillian Royster	(410) 298-6919	11am-3pm	Sun, Mon, Fri
Grace Memorial	1100 N. Eden St., Baltimore, MD 21213	Rev. Irwin Pope	(410) 563-2355	12pm-1:30pm	Tue
Greater Zion Church	301 No. Gilmore Ave., Baltimore, MD 21223	Rev. Amos Burgess	(410) 788-0547	1pm-4pm	Wed, Fri
Greenhill Apts.	2501 Violet Ave, #710 N., Baltimore, MD 21215	Ethel Lee	(410) 383-9171	10am-12pm	Wed.
Hampden UMC	3449 Falls Rd., Baltimore, MD 21211	Elizabeth Green	(410) 243-1997	9am-12pm	Mon, Wed
Harford Senior Center	4920 Harford Rd., Baltimore, MD 21214	Jessie Martek	(410) 426-4009	10am-2pm	Mon-Fri
Harvest Christian	2601 Pennsylvania Ave., Baltimore, MD 21217	Mary Coleman	(410) 523-0143	10am-12pm	Wed
Harvey Johnson Towers	1510 WE. Mosher St., Baltimore, MD 21217	Juanita Leigh	(410) 462-6205	9am-2pm	Sat
Healthy Start	610 N. Chester St., Baltimore, MD 21205	Jacqueline Toppins	(410) 675-2125	8:30am-4:30pm	Mon-Fri
Healthy Start	1622 N. Carey St., Baltimore, MD 21217	Gloria Johnson	(410) 728-7539	8:30am-4:30pm	Mon-Fri
Helping Hands Food Pantry	1911 Belair Rd., Baltimore, MD 21213	Rosalie Branch	(410) 342-1310	9am-1pm	Sat
Homestead UMC	1500 Gorsuch Ave., Baltimore, MD 21218	Shirley Dean	(410) 243-4419	11:30am 2pm	Tue
Household of Faith Missionary	4811 Belair Rd., Baltimore, MD 21206	Rev. Harrison Geter	(410) 485-5375	12pm-2pm	Sat
Human services Division- 4th	1133 Pennsylvania Ave., Baltimore, MD 21201	Josephine Battaglia	(410) 396-0893	9am-3pm	Tue-Fri
Israel Baptist Outreach	1211 N. Chester St., Baltimore, MD 21213	Shirley Eaddy	(410) 732-3494	11am-2pm 5pm-7pm	Mon, Tue, Thu Wed, Fri

BALTIMORE CITY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
JB Outreach Ministries	301 N. Stricker St., Baltimore, MD 21223	James Bivens	(410) 644-5822	10am-2pm	2 nd & 4 th Th
Jesus Saves Ministries	1625 N. Hilton St., Baltimore, Md 21216	Barbara Davis	(410) 362-1911	12pm-1pm	Wed-Sat
Johnston Square Community	841 E. Chase St., Baltimore, MD 21202	Margaret Hawkes	(410) 685-5950	1pm-4pm	Mon-Fri
Jonah House	1301 Moreland Ave., Baltimore, MD 21216	Susan Crane	410-233-6238	7am-6pm	Tuesday
Judah Worship Center	2000 Frederick Ave., Baltimore, MD 21223	Pastor Morton	(410) 466-5729	10am-2pm	Wed, Sat
Laurens House	1330 Laurens St., Baltimore, Md 21217	Rosalie	(410) 728-5515	1pm-6pm	Mon,Wed,Fri
Lexington Poe	206 N. Fremont Ave., Baltimore, MD 21201	Lorraine Ledbetter	(410) 396-0936	9am-3pm	Tue-Fri
Love of God	321 N. Fulton St., Baltimore, MD 21229	Bettie Williams	(410) 362-2232	11am-2pm	Wed.
Macedonia Baptist Church	718 W. Lafayette St., Baltimore, MD 21217	Gladys Augustus	(410) 669-5776	10am-2pm	Tue
Manna Ministry of Greater Gethsemane	2511 E. Preston St., Baltimore, MD 21213	Bertha Bell	(410) 675-2267	10am-12pm	Thu
Maryland Church of God	5100 Denmore Ave., Baltimore, MD 21215	Ethel Lee	(410) 367-2768	Mon-Fri	12pm-5pm
Mason Memorial	2608 Frederick Ave., Baltimore, MD 21223	Mary Curtis	(410) 947-4466	9am-12pm	Wed
Metropolitan Church Pantry	4815 Eastern Ave., Baltimore, MD 21224	Grace Weber	(410) 633-5516	9am-10am	Sat
Mount Moriah Baptist Church	2201 Garrison Blvd., Baltimore, MD 21216	Wilhelmina Davis	(410) 945-3575	8:30am-12:30pm	Mon
Mt. Lebanon Baptist Church	2812 Reisterstown Rd., Baltimore, MD 21215	Roberta McKinney	(410) 669-1800	10am-12pm	Wed, Sat
Mt. Calvary Star Baptist Church	1725 N. Milton Ave., Baltimore, MD 21213	Alex Young	(410) 276-1431	11am-2pm	Sat, Sun
Mt. Pleasant Church	6000 Radecke Ave., Baltimore, MD 21206	Aretha Allen	(410) 325-3080	10am-2pm	Mon,Wed,Fri
Mt. Tabor Baptist	1719 E. Oliver St., Baltimore, MD 21213	Rev. Forrest	(410) 327-1740	10am-2pm	Tuesday
New Fellowship Christian Community	5202 Park Heights Ave., Baltimore, MD 21215	Ann Quarles	(410) 367-5766	9am-12:30pm	Wed.
New Gabriel Baptist Church	1041 Wilmington Ave., Baltimore, MD 21223	Rev. Dykes	(410) 840-3363	8am-12pm	Sun
New Hope Church of God	6601 Cleveland Ave., Baltimore, MD 21224	Cynthia	(410) 282-2219	10am-6pm	Mon-Fri
New Life Evangelical Baptist	2417 E. North Ave., Baltimore, MD 21213	Rev. Williams	(410) 675-2178	9am-4pm	Mon-Fri
New Life Fellowship	559 Robert St., Baltimore, MD 21217	Rita Yarborough	(410) 466-7306	11am-1pm	Thursday
New Mount Zion Baptist Church	817 N. Mount St., Baltimore, MD 21217	Peggy Mitchell	(410) 523-9082	10am-12pm	Wed-Sat

BALTIMORE CITY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
New Shiloh Baptist Church	2100 N. Monroe St., Baltimore, MD 21217	Sue Wilson	(410) 523-5306	1pm-2pm	Sat
New Zion Hill Baptist	2432 E. North Ave., Baltimore, MD 21213	Pastor Barnes	(410) 558-0950	10am-1pm	Fri & Sat
North Baltimore CARES	5502 York Rd., Baltimore, MD 21212	Barbara Metz	(410) 433-2442	9am-11am	Mon, Thu
Oaks at Liberty	3501 Howard Park, Baltimore, Md 21207	Kimberly White	(410) 466-9267	2pm-4pm	Friday
Park Heights Community Center	4917 Park Heights Ave., Baltimore, MD 21215	Shirley Oliver	(410) 578-1800	10am-4pm	Mon-Fri
Paul's Place Outreach Center	1118 Ward St., Baltimore, MD 21230	Bill McLennan	(410) 625-0775	8:30am-11am	Mon-Fri
Payne Memorial Church	1714 Madison Ave., Baltimore, MD 21216	Margaret Solomon	(410) 462-3800	10am-2pm	Mon, Tue, Wed, Thu
People's Church of Baltimore	230 N. Fulton Ave., Baltimore, MD 21223	Coretha Jones	(410) 945-7923	9am-12pm	Sat
Perkins Square Baptist Church	2500 Edmondson Ave., Baltimore, MD 21223	Edythe Gregory	(410) 945-0445	2pm-5pm	Mon-Fri
Pillar of Truth	2522 Greenmount Ave., Baltimore, MD 21218	Lonnia Perry	(410) 243-1141	9am-5pm	Mon-Sat
Pitts Outreach	1142 N. Fulton Ave., Baltimore, MD 21217	Rose Long	(410) 728-8782	2:30pm-3pm	Wed, Thu
Pleasant Grove Food	214 S. Loudon Ave., Baltimore, MD 21229	Charlotte	(410) 646-1462	10am-2pm	Mon, Thu
Pleasant View Gardens	201 N. Aisquith St., Baltimore, MD 21202	Darrel Roaster	(410) 396-9006	10am-2pm	Fri
Poppleton Co-op	838 W. Fairmont Ave., Baltimore, MD 21201	Jackie Brown	(410) 532-1517	11am-3pm	Mon-Fri
Prisoners Aid	204 25 th Street, Baltimore, MD 21218	Michael Brown	(410) 662-0359	10am-6pm	Wed
Quality of Life Corp	2630 Harford Rd., Baltimore, MD 21218	Ismenda Hendrix	(410) 235-3972	10am-2pm	Mon, Thu
Ray of Hope	3501 Parkside Dr., Baltimore, Md 21236	George Crutchfield	(410) 661-9428	10am-2pm	Tuesday
Refuge Way of Cross Church	4301 Old York Rd., Baltimore, MD 21212	Frances Wellborn	(410) 435-8339	12pm-2pm	Wed
Royal Light Outreach	1562 N, Fulton Ave., Baltimore, MD 21217	Al Lawson	(410) 566-2940	11am-1pm	Tue, Thu
Salvation Army	814 Light St., Baltimore, MD 21230	Crystal White	(410) 783-2920	8:30am-12pm	Mon-Fri
Sharon Baptist	1373 N. Stricker St., Baltimore, MD 21217	Elaine Brown Page	(410) 669-6667	10am-12pm	3 rd Sat
Second Shiloh	1355 Homestead St., Baltimore, MD 21218	Wanda Hudson	(410) 366-1025	11am-1pm	Tues-Thurs
Solomon Temple Baptist Church	1738 Appleton Street, Baltimore, MD 21217	Rev. Thomas Sledge	(410) 566-2106	10am-2pm	Mon-Fri

BALTIMORE CITY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Southwest Emergency Food Program	31 S. Payson St., Baltimore, MD 21223	Eugene Holt	(410) 396-1740	9am-3pm	Tues-Thurs
South Baltimore Emergency	110 E. West St. Baltimore, MD 21230	Elizabeth Baer	(410) 752-1336	10am-1pm	Mon-Fri
Southeast Neighborhood Service Center	3411 Bank St., Baltimore, MD 21224	Carlene Bullard	(410) 545-6515	10am-2pm	Mon, Wed, Fri
St. Abraham Baptist Church	1124 W. North Ave., Baltimore, MD 21217	Rev. Clarence Yerby	(410) 383-6919	9:30am-1pm	1sr& 3 rd Wed.
St. Ambrose	3445 Park Heights Ave., Baltimore, MD 21215	Inez	(410) 225-0870	9am-4pm	Mon-Fri
St. Ann Outreach Ctr.	528 E. 22 nd St., Baltimore, MD 21218	Sister Jean	(410) 235-8169	9am-11am 8am-12pm	Tue Sat
St. Bernadines's Catholic	3812 Edmondson Ave., Baltimore, MD 21229	Deacon Phil	(410) 362-8664	10am-12pm	Tue, Wed, Thu
St. Cecilia	3300 Clifton Ave., Baltimore, MD 21216	Robert Viner	(410) 624-3600	10am-12pm	Wednesday
St. Elizabeth Food Pantry	2 N. Belnord Ave., Baltimore, MD 21224	Lucy D'Pinto	(410) 675-8260	11:30am-1:30pm	Tue, Fri
St. Gregory the Great	1542 N. Gilmore St., Baltimore MD 21217	Gloria Williams	(410) 523-0061	10am-2pm	Mon-Fri
St. Luke Temple	1821 N. Smallwood Street, Baltimore, MD 21217	Edna Evans	(410) 225-9409	5pm-9pm 7pm-9pm	Tue Fri
St. Mark's UMC/Bread of Life	3900 Liberty Heights Ave., Baltimore, MD 21207	Richard Wright	(410) 542-5338	5:30pm-7pm	Wed, Fri
St. Micheal Outreach	1922 E. Lombard St., Baltimore, MD 21231	Lisa Knickmeyer	(410) 732-2176	9am-12pm	Tue, Wed, Thu
St. Paul Baptist Church	3101 The Alameda, Baltimore, MD 21218	Thelma Gentry	(410) 366-0096	10am-2pm 10-2pm/ 5pm-7pm	Mon Thu
St. Vincent's Emergency Services	120 N. Front St., Baltimore, MD 21202	Jeanne Cole	(410) 962-5078	12:30pm-2pm	Mon
St. Wenceslaus	2100 E. Madison St., Baltimore, MD 21205	Audrey Wesson	(410) 675-3320	11am-1pm	Wed, Thu
Temple House	812 N. Fulton Ave., Baltimore, MD 21217	Stanley Butler	(410) 462-1876	10am-12pm	Tue, Sat
The Tree of Life Bible Church	516 N. Schroeder St., Baltimore, MD 21223	Lassiter Basket	(410) 542-1928	3pm-7pm	Tue
Total Man Outreach	1116 N. Gilmore St., Baltimore, MD 21217	Willie Williams	(410) 728-8151	10am-12pm	Sat
Trinity AME Church	2140 E. Hoffman St., Baltimore, MD 21213	Nancy Woodhouse	(410) 342-2320	11am-1pm	Thu
Trinity Apostolic Faith	3600 N. Rogers Ave., Baltimore, MD 21207	Elizabeth Milburn	(410) 448-1215	9:30am-12pm	Sun

BALTIMORE CITY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Trinity Presbyterian	3200 Walbrook, Baltimore, Md 21216	Camilla Martin	(410) 383-9633	1pm-3pm	Wednesday
United House of Prayer	3401 Edgewood Rd., Baltimore, MD 21215	Edward Williams	(410) 542-5300	9am-6pm	Sat, Sun
Unity UMC Church	1433 Edmonson Ave., Baltimore, MD 21223	Clara Bowser	(410) 728-4826	10am-12pm	Thu, Fri
Walker Co-Op	1 Cooperative Dr., Baltimore, MD 21212	Charles Cluxton	(410) 377-0200	10am-12pm	Tue
Wayland Baptist Church	3200 Garrison Blvd., Baltimore, MD 21216	John Wells	(410) 664-2774	10am-12pm	Mon, Tue
Whitestone Baptist Church	3001 Baker St., Baltimore, MD 21216	Frank Jones	(410) 947-1863	11:30am-1pm	Wed
Wyman House Pantry	123 West 29 th St., Baltimore, MD 21218	Ester Hall	(410) 243-4676	12pm-8pm	Mon-Fri
Zion Baptist Church	1700 N Caroline St., Baltimore, MD 21213	Mary James	(410) 837-4181	9:30am-12pm	Mon-Fri
Zion Outreach Services Inc.	1221 Argyle Ave., Baltimore, MD 21217	Rose Jones	(410) 383-1825	11-1:30pm	Tue, Thu

BALTIMORE COUNTY

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Alliance Inc	9201 Philadelphia Rd., Balto., MD 21237	Sabrina	(410) 574-7700	8:30am-5pm	Mon-Fri
Back River United Methodist	544 Back River Neck Rd., Baltimore, MD 21221	Joy Smell	(410) 686-0412	By appointment	
Balto. Co. Dept. of Aging/ Indiv. & Family Svcs. Div.	611 Central Ave., Towson, MD 21204		(410) 887-4141 (410) 887-2022	Restricted	
Balto. Co. Health Dept. Geriatric Services	1 Investment Pl. 11 th Fl., Towson, MD 21204	Pat Smith	(410) 887-2754	8:30am-4:30pm	Mon-Fri
Christian Fellowship	2929 Sollers Pt. Rd. Baltimore, MD 21222	Sue Brads	(410)477-5664	10am-4pm	Sat
Community Asst. Network Inc	7701 Dunmanway, Dundalk MD 21222	Charles Bosley	(410) 285-4674	9:30am-11:30am 1:30pm-3:30pm	Mon-Fri
Community Crisis Ctr./ Reisterstown Utd. Meth. Ch.	725 Main St., Reisterstown, MD 21136 15 Woodsman Ct., Owings Mills, MD 21117	Alan Mello	(410) 526-7111	10am-1pm	Mon-Fri
Dundalk Church of the Brethren	2660 Yorkway Dundalk, MD 21222	Medie McLaughen	(410)284-0647	12:15pm-2pm	Wed
Eastern Interfaith Outreach	531 Eastern Bend, Essex, MD 21221	Merle Bolger	(410) 391-6181	10am-2pm	Mon,Wed,Fri
Edgemere Church of God	7414 Ellen Ave., P.O. Box 6686, Balto. MD 21219	Karen Knight	(410) 686-2593	9am-5pm	Sun,Wed,Th
Essex Utd. Methodist Church	524 Maryland Ave., Balto., MD 21221	Carole Krach	(410) 686-2867	10:30am-12:30pm	Tue,Th
First Baptist Church of Essex	911 Mace Avenue, Balto., MD 21221	Bill Ledford Russel Purkey	(410) 679-5901 (410) 686-8499	9am-12noon	Mon-Th
Friendship Baptist Church	307½ Avondale Rd., Balto., MD 21222	Zelma Strawther	(410) 282-5284 (410) 284-9603	Restricted	
Good Samaritan Ministry Union Bethel AME Church	8615 Church Lane, Randallstown, MD 21133	Mary Johnson	(410) 922-3286 (410) 655-0948	vary	by appt.
Greater St. John BC	103 Carver Road, Baltimore, MD 21222	Lillian Branch	(410) 284-6048	Restricted	
Helping Hands Food Pantry	7901 Bradshaw Rd., P.O. Box 192, Upper Falls, MD 21156	Gilbert Thompson	(410) 592-7676	9am-12noon	Mon-Fri

BALTIMORE COUNTY FOOD PANTRIESContinued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Hopkins Village	3 Brett Court, Balto., MD 21212	Nona Lehr	(410) 391-0473	Restricted	
Key Point Health Services Inc Psychiatric Rehab. Prog.	7701 Dunmanway, Baltimore, MD 21222	Erica Efterkhari	(410) 282-2363 x26	Vary	Vary
Ironworkers-Local #16 Union Hall	2008 Merrin Ave., Balto., MD 21222	Tony Bennett Willard Morgan	(410) 686-5515 (410) 285-2246	7am-4pm	Mon-Fri
J & C Unity Christian Church	101 Back Riverneck Rd., Balto., MD 21221	Eartha Harris	(410) 686-2752	Vary	Mon-Fri
Life Outreach	8334 Liberty Rd. Baltimore, MD 21244	Dr. Patricia Snow	(410)385-2204	10am-2pm	Wed
Liberty Assistance Ctr.	9019 Liberty Rd., Randallstown, MD 21113	Jim Rollins	(410) 655-4216	10am-2pm	Mon,Wed,Th, Fri
Manna	914 Essex Rd. Essex, MD 21221	Bob Nerthling	(410)687-7354	9am-5pm	Everyday
Mount Olive Baptist Church	651 Mount Olive Rd., Balto., MD 21222	Wanda Barnes/A. Lewis	(410) 282-0226	10am-5pm	Sun-Sat
Mount Olivet UM Church	823 Edmondson Ave., Catonsville, MD 21228	Milton Gaines	(410) 788-4361	Vary	Tue,Th,Sat
New Horizon Baptist Church	2200 St. Luke Lane, Baltimore, MD 21207	Rev. Lambert	(410) 655-2230	8am-4pm	Sat
New Macedonia Bapt. Church	6930 Liberty Rd, Balto. MD 21207 (pantry) PO Box 31861, Balto., MD 21207 (mailing)	Casandra Smith Willie Belleflood	(410)277-9909	9am-6pm 7pm-10pm 1pm-6pm	Sun Wed Sat
Perry Hall United Meth. Ch.	9515 Belair Rd., Balto., MD 21236-1599	Linda Diller	(410) 256-6479	9am-5pm	Mon-Fri
Rising Sun Food Pantry	2211 St. Lukes Lane	Joyce Nicholson		call	Sat,Sun
Rock of Ages Church of God	310 South Marlyn Ave., Baltimore, MD 21221	Robin Burch	(410) 918-9388	9am-2pm	Mon-Fri
Shining Star	111832 Eastern Ave., Baltimore, MD 21220	Yuonne Howell		10am-2pm	Mon-Fri
St. Luke's Lutheran Church	1803 Dundalk Ave., Balto., MD 21222	Jane Rossi	(410) 633-5374	9am-2pm	Tue,Th,Fri
St. Luke's United Meth. Ch.	2119 Gwynn Oak Ave., Woodlawn, MD 21207	Margaret Edwards	(410) 944-4111 (410) 944-5878	9am-12noon	Mon-Fri
St. Peter Ev. Luth. Church	7834 Eastern Blvd., Balto., MD 21224	Namoi Flink	(410) 931-6739	9am-1pm	Mon-Fri
St. Stephen's AME Church	1601 Old Eastern Ave., Baltimore, MD 21221	Sara Albright	(410) 686-9392	Varies	
St. Ursula	8801 Harford Rd. baltimore, MD 21234	Richard Keys	(410)665-2111	9:30am-12pm	Wed

BALTIMORE COUNTY FOOD PANTRIESContinued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Southwest Emergency Svcs.	1201 Maple Ave., Balto., MD 21227	Betty Okonski	(410) 247-8154 (410) 719-0722	9am-12noon 6pm-8pm	Mon-Fri 1 st Wed mt only
Towson United Methodist Church-Food Pantry	501 Hampton Ln., Towson, MD 21286	Catherine Ritter	(410) 823-6511 (410) 823-3689	6pm-7:30pm	last Th mt.
Water's Edge Baptist	3483 Liberty Parkway, Baltimore, 21222	Jean Lacey	(410)282-1974	9am-5pm	Mon-Wed

CALVERT COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Brooks United Methodist Emerg. Food Pantry	5550 Mackall Rd. St. Leonard	Marguerite Johnson	(410)586-1295	9am-12pm	Tue & thur
Calvert Churches Community	4132 Old Town Road, Huntingtown, MD 20639	Carl Beathy	(410) 257-1342	10am-1pm	Mon-Wed
Catholic Charities	P.O. Box 779, Prince Frederick MD 20678	Peggy Lawrence	(410) 535-0309	9am-5pm	Mon-Fri
Dept. of Social Services	200 Duke St. Prince Frederick MD 20678	Wendie Walton	(410) 535-8700	8am-5pm	Mon-Fri
Emmanuel Seventh Day Adventist	105 Kingsberry Ct. St. Leonard	Catherine Tyler-King	(410)535-2275	9am-2pm	Tue, Thrus, Sun
SMILE	P.O. Box 1276, Solomons, MD 20688	Maarja Gandy	(410) 326-0009	9am-5pm	Mon-Fri
Randle Cliff Community Church Food Pantry	4311 Randle Way, Chesapeake Beach	Karen Paguette	(410)257-3884	10am-12pm	Sat

CAROLINE COUNTY FOOD PANTRY

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
St. Martin's Barn	14376 Benedictine Lane Ridgely, MD 21660	Sister Frances Walker	(410) 634-1140	8:30am-12pm 6pm-8pm By appointment	Tue,Fri Wed Mon & Th

CARROLL COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Westminster Food Bank	10 Distillery Dr., P.O. Box 2160, Westminster, MD 21158	Dennis Fahey	410-857-7926	10am-11:15am 1pm-2:15pm 9am-12noon	Tue-Th Tue-Th Sat
Sykesville/Eldersburgh Food Bank, St. Joseph's Cath. Ch.	915 Liberty Rd., Eldersburgh, MD 21784	Marie Sanner	410-795-7838	10am-1:00pm	Wed
Taneytown Food Bank, St. Joseph's Catholic Church	44 Frederick Street, Taneytown, MD 21787	Fred Robinson	410-756-2137	9:30am-11:15am	Thur

CECIL COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Blythedale 7th Day Adventist Church	48 Blythedale Rd., Perryville, MD 21903	Anna Gall	(410) 378-2356	8am-11:30am	Mon
Cecil County Help Center	135 E. High St., Elkton, MD 21921 DSS P.O. Box 1160 Elkton, MD 21922 (mailing)	(DSS Referral needed) Diana Klusak Lorraine Vass	(410) 996-0260 (410) 996-0241 (410) 996-0242	7:30am-4:30pm	Mon-Fri
Clairvaux Farm Meeting Ground	P.O. Box 808, Elkton, MD 21922	Cynthia Wood	(410) 275-2936	9am-4pm	Mon-Fri
Elkton Presbyterian Church	207 W. Main ST. Elkton, MD	Dorothy McDaniel	(410) 398-4636	9am-3pm	Mon-Fri
First Baptist Ch. of NorthEast	206 Mechanics Valley Rd., N.E., MD 21921	Kathy Gray	(410) 287-6247	9am-4pm	Mon-Fri
Good Sheperd Church	810 Aiken Ave., Perryville MD 21903	Harriet Beckert	(410) 642-3588	9:45am-12pm	Mon, Wed, Fri
Immaculate Conception Outreach	P.O. Box 345, Elkton, MD 21922	Dottie Fritz	(410) 398-2110	9:30-12pm	Mon, Wed, Fri
Ray of Hope Mission Center	960 Creigtown Rd., Port Deposit MD 21901	Frank Rinaldi Jr.	(410) 378-9800	9am-4pm	Fri

CHARLES COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Calvary United Methodist	3235 Leonardtown Rd., Waldorf, MD 20601	Ron Black	(301) 645-5247	9:30am-12:30pm	Tue & Wed
Charles County Children Aid Society	3000 Huntington Cir. Waldorf	Maria Bryan	(301)645-1561		
Forest Park Baptist	12995 Church Rd. Waldorf	Joyce Breagy	(301)843-8916	9am-12pm	Sat
Grace Lutheran/FISH	1200 Charles St., Laplata, MD	Alice Adams	(301) 855-1819	9am-4pm	Mon-Fri
Hughesville Baptist Church	8505 Leonardtown Rd, Hughesville	Ray Allen	(301)884-6163	10am-12pm	Wed
St. Mary's Star of the Sea	30 Mattingly Ave., Indian Head, MD 20640	Rev. Thomas Hill	(301) 743-7175	8:30am-11am	4 th Sat
Assoc. Catholic Charities	513 E. Charles St., La Plata, MD 20646	Brenda Dicario	(301) 934-2582	9am-5pm	Mon-Fri
St. Peter's St. Vincent dePaul	3220 St. Peter's Drive, Waldorf, MD 20601	Joyce Breagy	(301) 843-8916	By appt.	
Children's Aid Society	3000 Huntington Circle, Waldorf, MD 20602	Barbara Madison	(301) 645-1561	9am-4:30pm	Mon-Fri
WM Lord Led Mission (Lord's Supper)	2275 Oriental Pl, Nanjemoy	Wayne Matthews	(301)753-4615	10am-3pm	Mon & Wed
Waldorf Free Will baptist Pantry	4028 Middletown Rd. Waldorf	Pastor Jim Fairchild	(301)645-4931	As needed	
Zion Wesley Utd. Methodist	Rt. 228, P.O Box 972, Waldorf, MD 20604	Emily Pender	(301) 645-7340	9am-12pm	Sat

DORCHESTER COUNTY FOOD PANTRY

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Dorchester Community Development Corporation	435 High St., P.O. Box 549, Cambridge, MD 21613	Ruth Campbell	(410) 228-3600	9am-4pm	Mon-Fri

FREDERICK COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Brunswick Food Bank 1st United Methodist Church	7S. Maryland Ave., Brunswick, MD	Sandy Cox	(301) 834-8802	6:30pm-8pm	Th
Emmitsburg Food Bank Elias Lutheran Church	300 S. Seton Ave., Emmitsburg, MD 21727	Phyllis Kelley	(717) 642-6963	7pm-8pm 10am-11am	Wed Thur, Sat
Frederick Community Action Council	100 S. Market Street, Frederick, MD 21701	Marty Qually	(301) 694-1506	2pm-4pm 7pm-9pm	M, T, Th, F Wed
Jefferson Food Bank St. Paul's Lutheran Church	3864 Jefferson Pike, Jefferson, MD 21755	Nancy Whitney	(301) 834-7020	10am-11:30am	1 st & 3 rd Sat
Middletown Food Bank	301 W. Main St., Community Building Middletown, MD 21769	Carrie Toms	(301) 371-7303	1pm-3pm 9am-12pm	Wed Sat
Thermont Food Bank Apple United Church	Apples Church Road, Thurmont, MD 21788	Emily Yingling	(301) 271-7730	6pm-7:30pm 3:30-5pm	Tue Fri
Walkersville Food Bank Town Hall	21 West Frederick St., Walkersville, MD 21231	Betsy Waugh	(301) 845-0504	6:30pm-8:30pm 12pm-2pm	Mon Th

GARRETT COUNTY FOOD PANTRY

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
No food pantries					

HARFORD COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
AME Refuge Temple Church	116 Spesutia Rd., Aberdeen, MD 21001	Mary Green	(410) 679-0178	9am-12pm	3 rd Sat
Bread of life/ Abundant Grace Family Church	3716 Dublin Rd., Darlington, MD 21034	Rev. Walter Donnolly Jerry Morrison	(410) 838-8409		3 rd Sat
Community Action Agency	33 W. Courtland St., Bel Air, MD 21014	Becky Hamlin	(410) 638-3241	9am-12pm// 1-4p 9-12// 1-2pm	M-Th Fri
Fish-St. Paul's Lutheran Ch.	428 Battery Drive, Havre de Grace, MD 21078	Joanne Bowman	(410) 939-5753	On-call	Daily
FISH - Holy Spirit Lutheran Church	504 Joppa Farm Rd., Joppa, MD 21085	Naomi Horn	(410) 679-3891	On-call	Daily
Fish-Bel Air Calvary Baptist	206 E. Courtland St., Bel Air, MD 21014	Dennis Longo	(410) 836-7696	10am-3pm 6-8	Mon-Fri Mon
FISH- St. Joan of Arc	22 Law Street, Aberdeen, MD 21001		(410) 272-4535	9:30-11:00am	Mon-Fri
Grove Presbyterian Church	50 East Belair Ave., Aberdeen, MD 21001	Helen Farmer	(410) 272-0585 (410) 272-0773	7pm-8pm	Wed
Inner County Outreach	529 Edmund Street, Aberdeen, MD 21001	Joe Williams	(410) 272-3278	9am-1pm	Mon-fri
Mason Dickson	708 Highland Rd. PO Box 34, MD 21014	Cindy Esworthy	(410) 452-9025	9:am-12pm	Mon-Th
Manna House -Bel Air United Methodist Church	21 Linwood Ave., Bel Air, MD 21014	Ron Rivenburg	(410) 838-4151	11am-2pm	Wed
New Covenant Church	2530 Conowingo Rd., Bel Air, MD 21014		(410) 420-1299	9am-1pm	Thursday
Salvation Army	300 Rear Seneca Ave., Havre de Grace, MD 21078	Dawn	(410) 939-3535	Call	
Sharing Table-Presby United Methodist Church	2600 Willoughby Beach Road, Edgewood, MD 21040	Susan Graper	(410) 676-6496	11:30am-1pm	Sat
St. Matthew's Church	1200 Church Rd, Bel Air, MD 21014	Diana Tildon	(410) 273-6536	9am-3pm	Mon-Fri
Trinity Lutheran Church	1100 Philadelphia Rd., Joppa, MD 21085	Pat Martin	(410) 515-3384	1pm-3pm 9am-11am	Thursday Saturday

HOWARD COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Bethany Lane Baptist Church	3030 Bethany Lane, Ellicott City, MD 21042	Lynn Dantmann	(410) 465-0150	Call	
Bridgeway Community Cupboard	6148 Cedar Wood Dr., Columbia, MD 21044	Donna Michener	(410) 992-1840	Call	
Celebration Church	6080 Foreland Garth, Columbia, MD 21045	Arlene Braithwaite	(410) 997-2088	5:30-6pm	Fri
Elkridge Food Pantry	5646 Furnance Ave, Elkridge, MD	Herman Prelm	(410) 796-1456	6pm-8pm	2 nd & 4 th Friday
Eva Johnson Foundation Food Pantry	3588 Mt. Ida Drive, Ellicott City, MD 21043	Raymond Johnson	(410) 465-0886	11am-1pm 4pm-6pm	Friday
First Baptist Church of Savage	8901 Washington St. Savage, MD 20763	Jackie Waller	(410) 465-7883	6:30pm-7:30pm 9am-11am	Wed, Fri, Sat
FISH	P.O. Box 34, Ellicott City, MD 21041	Wendell Thompson	(410) 964-8660	Call	Mon-Fri
Howard County Food Bank	8920 Auite A Route 108, Columbia MD 21045	Community Action	(410) 313-6440	1pm-4pm	Tue & Thur
Locust United Methodist Church	8105 Martin Rd. Simpsonville, MD 21150	Roberta Kelley	(410) 531-5323	Call	
Mt. Pisgah AME Church	5901 Cedar Fern Court, Columbia, MD 21044	Carolyn Hatcher	(410) 730-6688	11am-5pm 10am-2pm	Weekdays Saturday
St. John Baptist Church	8910 Route 108, Columbia, MD 21045	Harold Hunt	(301) 596-5571	10am-1pm	3 rd Sat

KENT COUNTY FOOD PANTRY

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Community Food Pantry	Christ United Methodist Church, Chestertown, MD	Rita Brantly	(410) 778-3163	10am-12noon	Tue, Fri

MONTGOMERY COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Adventist Community Services	501 Silgo Ave. Silver Springs, MD 20910	Mercedes Lemos	(301)585-6556	10am-4pm	Mon-thur
Colesville Center	14015 New Hampshire Ave.	Manna Food Center	(301)424-1130	2pm-4pm	Wed & Fri
Gaithersburg	602 East Diamond Ave., Suite A	Manna Food Center	(301)424-1130	5pm-7pm	Mon-Thur
Germantown/Salvation Army Center	20021 Aircraft Dr.,	Manna Food Center	(301)424-1130	2pm-4pm	Thursday
Long Branch Community Center	8700 Piney Branch Rd.	Manna Food Center	(301)424-1130	2pm-4pm 5pm-7pm	Tuesday Wednesday
Montgomery County Family Center	11160 Veirs Mill Rd. #700, Wheaton, MD 20902	Haregewoin Kefyalew	(301)942-1856	Appt . only	Mon-Fri
Salvation Army	20021 Aircraft Dr., Germantown, Md 20874	Maxine Goalie	(301)515-5354	HOLIDAYS	
Silver Spring/ St. Camillus RC Church	1600 St. Camillus Dr.	Manna Food Center	(301)424-1130	2pm-4pm	Mon
Montgomery Ave. Women's Shelter	12250 Wilkins Ave., Rockville, MD 20850	Norma Fegan	(301) 762-2288	Women's Shelter	
Outpatient Addiction Services	751 Twimbrook Parkway 2 nd Floor, Rockville, MD 20851	Hilda Sayles	(240) 777-1680	Daytime Shelter	
Stepping Stones	P.O. Box 712 Rockville, MD 20848		(301) 251-0567	Family Shelter	
Vanguard Services Unlimited	1 Lawrence Court, Rockville, MD 20850	Sarah M. Donnem	(301) 251-8920	Halfway house	
Watkins Mill House	20201 Watkins Mill Rd., Gaithersburg, MD 250886		(301) 444-3355	Women's Shelter	
Wells Robertson House	1 Wells Avenue, Gaithersburg, MD 20877		(301) 258-6390	Shelter	

PRINCE GEORGE'S COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Adventist Community Services	501 Sligo Ave., Silver Springs, MD 20910	Wordy Nicholas	(301) 585-6556	10am-12pm	Mon-Thu
Ager Road Methodist	6301 Ager Rd., Hyattsville, MD 20782	Rebecca Armstrong	(301) 422-2132	9:30am-11:15am	Th
Central Baptist Church "feed My Sheep"	5410 Annapolis Road, Bladensburg, MD 20712	Mrs. Corene Labble	(301) 627-0267	Call	M-F
Church of the Living God	1417 Chillum Rd., Hayattsville, MD 20782	June Muna Mbulu	(301) 559-8893	10am-12pm	Sat
Clothing Power of Eternal Church	25 Quire Ave. Capitol Heights, MD 20743	Tracy Jenkins	(301) 336-3395	6pm-8pm 10am-12pm	Wed & Fri Sat
Community Support Systems	13500 Baden-Westwood Rd., Brandywine, MD 20613	Catherine Brooks	(301) 785-2936	9:30am-11am	Wed, Fri
First Baptist Church of Suitland	5400 Silver Hill Rd., Suitland, MD 20747	Delores Callier	(301) 735-6111	9am-4pm	Mon-Fri
Fish of Greater Laurel, Inc.	308 Gorman Ave., Laurel MD 20724	Mary Ellen Verikious	(301) 262-7106	11am-2pm	Tue,Th,Sat
G.A. Fitzgerald Community	1250 Benning Rd., Capitol Hgts., MD 20743	Rev Fitzgerald	(301) 736-0184	10am-2pm	Mon & Wed
Galilee Baptist Church	2101 Shadyside Ave., Suitland, MD 20746	Francis Grayl	(301) 420-5014	9:30am-3pm	Mon-Thu
Gethsemane United Methodist	901 Addison Rd., Capitol Heights, MD 20743	Anne White	(301) 336-1219	10am-1pm	Mon,-Thu
Greater Refuge Food Bank	9512 Piscataway Dr., Clinton, MD 20735	Deborah Williams	(301) 868-5880	6pm-7pm	Fri
Harvest Temple Church of God	6608 Wilkins Place, Forestville, MD	Rev Mary Campbell	(301) 420-1417	12pm-2pm	Tue-Thu
Help By Phone Throughout P.G. County	6100 Westchester Park Dr., College Park, MD 20740	Lois Jones	(301) 669-9009	9am-5pm 9am-12noon	Mon,Th Fri
Hunter Memorial AME Church	4719 Silver Hill Rd., Suitland, MD 20746	Dorothy Boddie	(301) 735-5761	On Call	Mon-Fri
ICAC/Oxon Hill Food Pantry	4915 St. Barnabas Rd., Temple Hills, MD 20748 P.O. Box 934, Temple Hills, MD 20748 (mail)	George Wiggers	(301) 899-8358	10am-1pm	Tue,Sat

PRINCE GEORGE'S COUNTY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Langley Park-McCormick E.S-Pantry	8201 15 th Avenue, Hyattsville, MD 20783	Ms. Cabrera	(301) 445-8423	2:30-3:30pm	Mon-Fri
Laurel Advocacy Referral Services (LARS)	311 Laurel Ave., Laurel MD 20724	Nancy Graham	(301) 776-0442	9am-2pm 6:30pm-9pm	Mon,Wed,Fri Mon
Life in Victory Outreach Center	11171 Crain Highway Upper Marlboro, MD 20773	Cynthia Brown	(301) 782-7700	By appt.	M-F
Love Foundation Christian Center	13992 Baltimore Ave. Suite 300 Laurel, MD 20707	Pastor Daniel Erharbor	(301) 776-5782	10am-5pm	Sat
Lucille's Pantry	6100 Jost Street, Fairmont Hgts., MD 20743	Lucille Smith	(301) 925-8585	10am-2pm	Wed,Fri
Mayr Harris "Mother" Jones ES	2405 Tecumseh St., Adephi, MD 20783	Arinette Sagastizado	(301) 408-7900	2pm-3:15pm	M-F
Mt Calvary Church	6706 Marlboro Pike, Forestville, MD 20747	Margeret Dougherty	(301) 735-5532	9:30am-11:30am	Mon & Th
New Revival Kingdom Church	7821 Parston Dr. Forestville, MD 20747	Rev. Catherine Chase	(301) 736-4535	1pm-3pm	Mon & Thur
Oaklands Presbyterian Church	14301 Laurel-Bowie Rd., Laurel, MD 20706	Bob Clark	(301) 766-5833	9am-2pm	Tue-Fri
Pregnancy Aid Center, Inc.	4809 Greenbelt Rd., College Park, MD 20740	Mary Jelacic	(301) 345-9325	9am-4pm 9 am-4:30pm 9am-3pm	Mon, Wed Tue, Thu Fri
Regeneration Development Group	9244 E. Hampton Dr., Suite 514, Capitol Hgts., MD 20743	Bishop George Blair	(301) 808-7455	10am-1pm	Mon-Fri
Salvation Army	4825 Edmonston Rd., Hyattsville, MD 20781	Renee Dawson	(301) 277-6103	9am-12noon 1pm-4pm	Mon-Fri
Shabach! Food Pantry	2101 Kent Village Dr., Landover MD 20785	Erma Norris	(301) 322-9593	10am-2pm	Mon-Fri
St. Joseph's Church	2020 St. Joseph's Dr., Landover, MD 20785	John Queen	(301) 773-0102	1pm-2:30pm	Wed,Sat
St. Margaret's Catholic Church	408 Addison Rd., South Seat Pleasant, MD 20743	Deacon Samuel Minor	(301) 336 3344	9:30am-12noon	Tu,Fri

PRINCE GEORGE'S COUNTY FOOD PANTRIES Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
St. Paul United Methodist Church	6634 St. Barnabas Rd., Oxon Hill, MD 20745	Karen Dorsey	(301) 567-4433	10am-12noon	Mon-Fri
United Christian Mission	7808 Marlboro Pike, Forestville, MD 20747	Shernece Stephens	(301) 735-6909	10am-1pm	Th
United Communities Against Poverty	1400 Doewood Lane, Capital Heights, MD 20747	Lilian Nobles	(301) 322-5700	12:30-4:30 8:30-4:30	Mon-Thurs Fri
United Methodist Church of the Redeem	1901 Iverson St., Temple Hills, MD 20748	Linda Young	(301) 894-8622	9am-2pm	Mon-Fri
Walker Mill Outreach Center	6974 Walker Mill Rd., Capitol Hgts., MD 20743		(301) 808-0096	10am-2pm	Thu

QUEEN ANNE'S COUNTY FOOD PANTRY

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Living Water Food Bank	204 Island Plaza, P.O. Box 212 Stevensville, MD 21666	Marsha Johnson	(410) 604-0450	1:30pm-5:30pm	Tue

ST. MARY'S COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Catholic Charities	21506 Cotton Point Ave., Avenue MD 20609	Cindy Otts	(301) 769-2788	9am-5pm	Mon-Fri
HOPE	2161 Great Mills Rd. Lexington Park, MD 20653	Debbie Cooper	(301) 737-2870	9am-12noon	Mon-Th
Helping Hands, Inc	24360 Beck Rd Hollywood MD 20650	Rose Slade	(301) 373-6990	10am-2pm	M,W,F
Trinity Lutheran Church	46707 Shangri-La Dr, Lexington Park	Cindy Pavis	(301)-394-6139	6pm-8pm	Wed
Zion United Methodist	21291 Three Notch Rd., Lexington Park, MD 20653	Janie Hunter	(301) 863-5161	5:30pm-7pm	Th

SOMERSET COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Christ United Methodist Church	27473 Fairmont Road, Upper Fairmount, MD 21867	Chris Koons	(410) 651-2375	9am-11pm	Sat 1 per month
Community Relief Fund	140 Maryland Ave. Crisfield MD 21817	Charles Mc Daniel	(410) 968-0284	3pm-7pm	Thursday
Immanuel United Methodist Church	206 West Main Street, Crisfield, MD 21817	Beth McCullough	(410) 968-2189	9:30am-12pm	2 nd & 4 th Tue
Manna House	510 W. Main St., Suite C Crisfield, MD 21817	Hayes Diggs, Jr.	(410) 968-3619	When Needed	When Needed
St. James United Methodist Church	8370 Crisfield Highway, Westover, MD 21871	Shirley Terrell	(410) 651-9580	10am-12pm	2 nd & 3rd Sat
Seaton Center Catholic Charities	30632 Hampden Ave., Princess Anne, MD 21853	Sister Diane Moore	(410) 651-9608	1pm- 5pm	Mon-Fri

TALBOT COUNTY FOOD PANTRY

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Neighborhood Center	126 Port St., Easton, MD 21601	Gloria Gorish	(410) 822-5015	9am-3pm 9am-12noon	Mon,Th Fri

WASHINGTON COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Adventist Community Center	50 E. Franklin St., Hagerstown, MD 21740	Sandy Martin	(301) 739-3854	10am-3pm	Tue,Th
Bethel Assembly of God	515 W. Wilson Blvd. Hagerstown, MD 21710	Ed Kennedy	(301) 735-1167	10AM-3PM	M-F
Bountiful Harvest Outreach	14346 Maple Ridge, Hancock, MD, 21750	Barbara Sparks	(301) 678-5011	10am-12pm	T-TH
Community Action Council	110 Summit Ave., Hagerstown, MD 21740	Cindy Shefer	(301) 797-4161	8:30am-4:30pm	Mon-Fri
Faith Chapel	14 S. Potomac St., Hagerstown, MD 21740	Roger Elliott	(301) 733-7748	10am-3pm	Mon-Fri
Hancock Food Pantry	Pa. Ave. & High St., Hancock, MD	Jim Becker	(301) 678-5020	9am-12noon	Mon-Fri
Office of Consumer Advocacy, Inc.	265 Mill Street, Hagerstown, MD 21740	Sherry Phelps	(301) 790-5054	As needed	
SHIP	116 W. High Street, Hancock, MD 21750	Debbie Cahill	(301) 678-6605	8am-4pm	Mon-Fri
Salvation Army	524 West Franklin Street, Hagerstown, MD 21740	Laura Barger	(301) 733-2440	9am-4pm	Mon-Fri
South County Food Bank	645 S. Main Street, Boonsboro, MD 21713	Vivian Clipp		11:30am-3pm	Thu
Trinity Food Pantry	15 Randolph Ave., Hagerstown, MD 21740	Jeff Reed	(301) 733-5651	10am-2pm	Tue, Wed, Thu
Willamsport Food Bank	35 W. Potomac St., Williamsport, MD 21785	Mary Ann Kline	(301) 223-7136	10am-3pm	Mon, Wed, Fri

WICOMICO COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Cathedral of Love	423 Church St., Salisbury, MD 21803	Curley Ivey	(410) 742-5386	10am-12pm	Thursday
Emmanuel Wesleyan Outreach	142 Shamrock Dr., Salisbury, MD 21801	Charles Kirby Jjimmy Layton	(410) 749-6594 (410) 614-7937	8am-9am	Sat
First Baptist Food Ministry	528 Booth St.,Salisbury, MD 21801	Lelia Chester	(410) 548-5486	10am-5pm	Mon-Fri
First Baptist Church of Fruitland	630 Clyde Ave. Fruitland, MD 21826	Dot Hamilton	(410) 742-3396	When Needed	When needed
God's Caring & Sharing Food Bank	2671 Bank Road, Naticoke, MD 21840	Mary Ringgold Laurence Elsey	(410) 873-2077 (410) 873-3097	10am-1pm	3 rd Thursday
Greater Hebron Area Food Pantry/ ST. Paul's United	204 East walnut St., Hebron ,MD 21830	Teresa Richards	(410) 546-9750	10am-12pm	Thurs or by appointment
Helping Hands	33063 Old Ocean City Rd, Parsonsburg, Md 21849	Kimberly Monar	(410) 835-2745	9am-1pm	Sat
In His Service	6724 Keyes Ln., Salisbury, MD 21804	Don Keyes	(410) 860-8426	8-4pm	Mon-Sat
Joseph House	812 Boundary St., P.O. Box 1755	Dave Heininger	(410) 543-8171	8:30am-11:30am	Tue,Wed,Th
New Beginning	1611 Jersey Rd. Salisbury, MD 21804	Mamie Morris	(410) 742-0456	6pm-7pm	3 rd Tue
Pearl's Pantry	411 Robinson St. Salisbury, MD 21801	Pearl Harmon	(410) 572-8532	10am-4pm	Mon-fri
Regis Brown Bag	507 Overlook Dr. Salisbury, MD 21801	Janet Ames	(410) 860-1326	9am-5pm 9am-12pm	Mon-Fri Sat
Riverside Homes	519 Alabama Ave., Salisbury, MD 21801	Oscar Drummond	(410) 742-0060	1pm-4pm	Thur
St. James AME Zion	721 Mack Ave. Salisbury, MD	Lois Bunting	(410) 749-5841	11am-1pm	Tue, Thurs, Fri
St. Paul AME Zion Church	410 Delaware Ave., Salisbury, MD 21801	Laura D. Goslce	(410) 546-5661	9am-5pm	Mon-Fri
Salvation Army	407 Oak St., PO Box 3235 Salisbury, MD 21874	Shari Tracy	(410) 749-3077	9am-12noon 1pm-3pm	Mon-Fri
Salisbury Urban Ministries	326 Barclay Street, Salisbury MD 21802	Angel Simpson	(410) 749-1563	10am-2pm	Tue, Thur
Telamon Corporation	237 Florida Ave., Salisbury, MD 21801	Jeffifer Shahan	(410) 546-4604	9am-12:30pm 1pm-4:30pm	Tue, Wed, Thru
Wesley Temple	1322 West Rd., Salisbury, MD 21801	Ina Townsend	(410) 749-2818	9am-12noon	Mon,Wed,Fri
Vision of Mercy	423 Hammond street, Salisbury, MD 21801	Stephanie Wallace	(410) 742-6206	10am-5pm	Mon-Sat

WORCESTER COUNTY FOOD PANTRIES

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Delmarva Food Foundation/Worcester County Food Bank	7925 Circle Rd., Whaleyville, MD 21872	Ed Tinus	(410) 641-2919	Call	
Diakonia Shelter	12747 Old Bridge Rd., Ocean City, MD 21842	Claudia Nagel	(410) 213-0923	7am-10pm	Sun-Sat
Ebenezer Ecumenical Food Pantry	107 Collins St., Snow Hill, MD 21863	Mary Waters	(410) 632-0705	9am-12:30pm	2 nd Fri
Helping Hand Outreach Mission	701 Ocean Highway, Pocomoke, MD 21851	Martha Bivens	(410) 957-0412	Call	
P.A.C.A Enterprise Family Food Pantry	5564 Market St., Snow Hill, MD 21863 P.O. Box 216, Snow Hill, MD 21863 (mailing)	Davida Washington	(410) 632-1580 (410) 641-4118	Call	call
Pentecostal Baptist Mission Pantry	512 S. Main St., Berlin, MD 21811	Eva Flem	(410)629-1669	9am-11:30am 6pm-8pm	Tue Wed
Pocomoke Area Community Service Center Emergency food Pantry	121-123 Willow Street, Pocomoke, MD 21851	Andrea Hamilton	(410) 957-0940	Call	
Samaritan Ministries, Inc.	814 Fourth St., P.O. Box 661 Pocomoke, MD 21851	Rev. Tom Wall	(410) 957-4310	1pm-2pm	M,Tu,W,Sat

SOUP KITCHENS IN MARYLAND

ANNE ARUNDEL COUNTY SOUP KITCHENS

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Adventist Community Services	508 Aquahart Rd., Glen Burnie, MD 21061		(410) 760-9172	10am-1pm	Tuesday
Church of the Rock	900 Church Street, Baltimore, MD 21225				
Damascus House	4203 Ritchie Hwy, Balto., MD 21225		(410) 789-7446	Call	
Fouse Center	6401 Richie Hwy., Glen Burnie, MD 21061		(410) 609-1224	9:30am-3:30pm	Mon-Fri
Harundale Presb.	1020 EastWay, Glen Burnie, MD 21060		(410) 761-4338	12:30-2pm	Tue
Salvation Army GB	511 So. Crain Hwy., Glen Burnie, MD 21061		(410) 768-0477	12pm-1pm	Mon,Wed & Fri
Sarah's House	2015 20 th St., Fort Meade, MD 20755		(410) 551-7722	1pm-3pm	Wed, Fri, Sat

BALTIMORE CITY SOUP KITCHENS

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
American Rescue Workers of Maryland	11 W. Clement St., Balto., MD 21230	Rev. Michael Carr	(410) 556-3300		Everyday
Antioch Shelter Home	5300 York Rd, Balto., MD 21221	Mother Allen	(410) 323-9112	24hrs	Shelter
Beans and Bread	402 S. Bond St., Balto., MD 21231	Sr. Eleanor	(410) 732-1892	Lunch	M,Tu,Th,F,Sat
Bethany Baptist	2616 Ridgely St., Balto, MD 21230	Sandra Whilte	(410) 539-5029	12pm-5pm	Tue, Thu
Brown's Memorial Bapt. Ch.	3215 W. Belvedere Ave., Balto., MD 21215	Barbara Cole	(410) 542-5700	Shelter	Everyday
Christopher Place	709 E. Eager St., Balto., MD 21202	Vernon	(410) 576-0066		Everyday
Code Blue Shelter	1400 E. Federal St.	Karen Booth	410-361-9441	5pm-8am	When code blue is declared
Corpus Christi Church	703 Whitelock St., Balto., MD 21217	Mariano	(410) 523-5822	5:30-6:30pm	Tu,Th
East Balto. Church of God	800 South Oldham St., Balto., MD 21224	Welton Hunt	(410) 327-0177		
Ebenezer AME	18 W. Montgomery St., Balto., MD 21230	Gilda Williams	(410) 783-0190	12noon-1pm	Th
First Mount Calvary Bapt. Ch.	1142 N. Fulton Ave., Balto., MD 21217	Rose Long	(410) 728-8782	11am-1pm	Wed
Foremost Mentor Care	68 S. Koosuth St., Balto., MD 21229	Mamie Daughety	(410) 655-9406	12noon-4pm	Sun,Sat
Franciscan Center	2212 Maryland Ave., Balto., MD 21218-5625	Brother Finbar	(410) 467-9045	10am-1pm	Mon, Thu, Fri
Gentle Care	4924 Carmine Ave., Balto., MD 21207	Mrs. Jefferson	(410) 448-0217	12pm-4pm	Sat, Sun
Gospel Tabernacle	3100 Walbrook Ave., Balto., MD, 21216	Lillian Royster	(410) 298-6919	11am-2pm	Tue
Grace memorial	1100 N. Eden St., Balto., MD 21213	Rev. Pope	(410) 563-2355	12pm-1:30pm	Tue
Homestead UMC	1500 Gorsuch Ave., Balto., MD 21218	Shirley Dean	(410) 889-5223	10am-1pm	Tue-Sat
I CAN	2215 Greenmount Ave., Balto., MD 21218	Frank Giles	(410) 467-8623		Everyday
Isreal Baptist	1211 N. Chester St., Balto., MD 21213	Bettye Brinkley	(410) 668-8462	12pm-1pm	
JB Outreach	301 N. Stricker St., Balto., MD 21223	Rev. Bivens	(410) 728-8731	12pm-2:30pm	
Manna House	435 E 25 th St., Balto., MD 21218	Lillian Lowensen	(410) 889-3001	8:30am-10:30am	Mon-Fri
Mary Elizabeth Lange Center	601 E. Chase St., Balto., MD 21202	Sr. Crescentia	(410) 244-8605		Everyday
Maryland Church of God	5100 Denmore Ave., Balto., MD 21215	Ethel Lee	(410) 383-2853	2pm-4:30pm	Sat,Sun
Maryland Community Kitchen	3242 Eastern Ave., Balto., MD 21224	Darrell Carter	(410) 327-3420		Mon-Fri
Mason Memorial	2608 Frederick Ave., Balto., MD 21223	Anita Newkirk	(410) 947-4466		

BALTIMORE CITY SOUP KITCHENS Continued

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Mount Tabor Baptist	1719 E. Oliver St., Balto., MD 21213	Rev. Forrest	(410) 215-1215	11am-1pm	
My Sister's Place Lodge	111 W. Mulberry St., Balto., MD 21201	Keisha	(410) 528-9002		Shelter
New Life	2417 E. North Ave., Balto., MD 21213	Rev. Williams	(410) 675-2113	6pm-7:30pm	Wed
Our Daily Bread	19 W. Franklin St., Balto., MD 21201		(410) 659-4014		Everyday
Paul's Place	PO Box 27070, 1118 Ward St, Balto. MD 21230	Bill Mclennan	(410) 625-0775	11am-12:30pm	Mon-Fri
Pillar of Truth	2522 Greenmount Ave., Balto., MD 21218	Lonnia Perry	(410) 338-0541	1pm-1:30pm	Sat
Project Plase	2029 St. Paul St., Balto., MD 21218	Mary Slicher	(410) 837-1400		Everyday
Salvation Army	2700 W. Patapsco Ave., Balto., MD 21230	Mary Thompson	(410) 525-0530	5:30am-6:30pm	Everyday
Second Shiloh	1355 Homestead St., Balto., MD 21218	Wanda Hudson	(410) 366-1025	11am-1pm	Wed, thu
St. Ambrose	3445 Park Heights Ave., Balto., MD 21215	Inez	(410) 225-0870	8am-4pm	Mon-Sat
St. Cecilia's Kitchen	3300 Clifton Ave., Balto., MD 21216	Robert Viner	(410) 362-7892	4-5:30pm	
St. Gregory	1542 N. Gilmore St., Balto., MD 21217	Gloria/ Pat	(410) 523-0061	12noon-2pm	Th
St. James UMC	1901 W. Lexington St., Balto., MD 21223	Regina Mason	(410) 685-5562	12pm-2pm	Wed, Sat
Supper Club	1728 Eastern Ave., Balto., MD 21218	Lillian Lowensen	(410) 732-7644	5:30pm-7pm	Wed
Temple House	802 N. Fulton Ave., Balto., MD 21217	Rev. Stanley Butler	(410) 462-1876		Everyday
United Brethren for Christ	2112 McCulloh St., P.O Box 16461, Balto. MD 21217	Barbara Horton	(410) 462-3182		Everyday
Valley House	28 South Broadway, Balto., MD 21231	Ben Toney	(410) 675-7765		Everyday
Waters AME	417 N. Aisquith St., Balto., MD 21202	Chrystall Mathews	(410) 675-2640	11am-3pm	Sat
Westside Assembly of God	535 S. Smallwood St., Balto., 21223	Marshall Haley	(410) 947-3006	12pm-2pm	M-F
Wayland Baptist	3200 Garrison Blvd., Balto., MD 21216	John Wells	(410) 664-2774	12pm-3pm	Wed

BALTIMORE COUNTY SOUP KITCHENS

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Hiding Place	Dunwoody Road, Towson, MD	Kim Poindexter	(410) 882-9130	Shelter	
Nehima House	8720, Philadelphia Rd., Balto., MD 21237	George Haynesworth	(410) 682-6333	Shelter	
Family Crisis Ctr. of Balto. Co	P.O. Box 3909 Balto., MD	Rebecca Foster		Shelter	
Sarah's Hope	9100 Franklin Square Dr., baltimore, MD	Linda Salinski	(410)391-9155	Shelter	

CARROLL SOUP KITCHENS

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Carpenter's Table, St. Joseph's Catholic Church	44 Frederick St., Taneytown MD 21787		(410) 767-2500	11:30am	Thur

CECIL COUNTY SOUP KITCHEN

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Meeting Ground	P.O. Box 808, Elkton, MD 21921	Cynthia Wood	410-275-8990	Shelter	
Chesapeake Care Resources	80 Marysville Rd. Northeast, MD 21901	Michelle Barrow	(410) 287-5040		Mon-Fri

FREDERICK COUNTY SOUP KITCHEN

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Community Action Council	100 South Market St., Frederick MD 21701	Nancy Walkes	(301) 694-1506	Mon, Tue, Th, Fri Wed	2pm-4pm 7pm-9pm

HARFORD COUNTY SOUP KITCHENS

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Care Night Calvary Baptist	206 E. Courtland st, Bel Air, MD 21014		(410) 838-6080	6pm-8pm	Monday
Children of Life	539 Jamestown Court, Edgewood, MD 21040	Senora Marshall	(410) 575-6873	Shelter	
FCCAU	Rotating Winter Shelter	Pat Eiler	(410) 676-2018	Shelter	
Grace Place, St. Johns Episcopal Church	114 N. Union Ave., Havre De Grace, MD 21078		(410) 939-2107	11:15am-12:30pm	Tuesday
Homecoming	Shelter for Women	Arch Forman	(410) 569-4112	Shelter	
Manna House	21 Linwood Ave., Bel Air, MD 21014	Lee Letter Ron Rivenberg	(410) 838-5181 (410) 838-0493	11:30am-1pm	Wed
Martha's Meals, Gorge Presbyterian Church	50 East Bel Air Ave., Aberdeen, MD 21001		(410) 272-0896	11:30am-1pm	Thursday
Mason Dixon Comm. Service	708 Highland St. Street, MD 21154	Patty Hammond	(410) 452-9025	11am-2pm	
SARC	21 W. Courtland St., Bel Air, MD 21014	Susan Fisher	(410) 836-8431 Ext. 22	Shelter	
Servants Table (Refuge Temple Ministries)	116 Spesuitia Rd., Aberdeen, MD 21001	Charlotte O'Neil	(410) 273-5349	11am-1pm	3 rd Sat
Sharing Table	3479 Albantown Way, Edgewood, MD 21040	Susan Graper	(410) 676-9496 (410) 893-3711	11:30am-1pm	Sat
The Family That Cares	1421 Charlestown Dr. Edgewood, Md 21040	Ms. Cornish	(410) 679-2463	Shelter	

MONTGOMERY COUNTY SOUP KITCHENS

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
ARC of Montgomery County	11600 Nebel Street, Rockville, Md 20852	Cheryl Gooden	(301) 984-577	Group Home	
Bethesda Cares- First Baptist Church	5033 Wilson Lane, Bethesda, MD 20814			1pm-2pm	Mon-Fri 1 st to the 15 of the month
Bethesda Cares-	4924 Del Ray Ave. Bethesda, MD 20814	Lawrence Blake	(301) 907-9144	12:45pm-1:45pm	Mon-Fri
Bethesda House	4848 Cordell Ave., Bethesda, MD 20814	Herman Dozier	(301)907-9597	Shelter	
Betty Ann Krahnke Center	14810 Brossard Road, Rockville, MD 20850		(301)279-1640	Shelter	
Carroll House	2699 Linden Ln., Silver Springs, MD 20910	Bobby Johnson	(301)495-4900	Shelter	
Community Vision	8210 Colonial Ln. Silver Springs, MD 20910	Lonnie Roister	(301)585-4471	7am-5pm	Mon-Fri
Crossways Community	3015 Upton Dr. Kensington MD, 20895	Missy Myers	(301)929-2505	Shelter	
CSAAC	751 Twinbrook Parkway, Rockville, MD 20851	Graig Pardon	(240)912-2263	Group Home	
Episcopal Senior Ministries	13325 Burkhardt St., Silver Springs, MD 20904	Sherry Waters	(301)879-4949	Group Home	
Gaithersburg Community Soup Kitchen "Lord's Table"	201 South Frederick Avenue, Gaithersburg, MD 20877	Erika Walden	(301)330-5812	3:30pm-4:30pm	Sept.- June
Head Injury Rehabilitation	One Church Street, Rockville, MD 20850	Maggie Hunter	(301)309-2228	Group Home	
Helping Hands Shelter	622 N. Horner's Ln., Rockville, MD 20850	Ann Chapman	(301)340-2796	Shelter	
Lawrence Court Halfway House	1 Lawrence Court, Rockville, MC 20850	Elaine Brown	(301)251-8920	Shelter	
Men's Emergency Shelter	600 Gude Dr., Rockville, MD 20850	Ron Hall	(301)545-5025	Shelter	
Montgomery Ave. Women's Center	12250 Wilkins ave. C Rockville, MD 20851	Norma Fagan	(301)984-0901	Shelter	
Nat'ICtr. For Children & Families	6301 Greentree Rd., Bethesda, MD 20817	Richard Green	(301) 365-4480	Shelter	
Outpatient Addction Service	451 Twinbrook Pkwy FL2, Rockville, MD 20851	Hilda Seales	(240)777-1680	Breakfast & Lunch	Mon-Fri
Shepherd's Table	8210A Colonial Lane, Silver Spring, MD 20910-5540	Thierry	(301) 585-6463	Mon-Fri	6pm-7:30pm

PRINCE GEORGE'S COUNTY SOUP KITCHENS

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Deliverance Temple	3918 Alton St., Capitol Hgts., MD 20743	George Blair	(301) 967-2535 (301) 336-6456	12:00pm-2pm	Mon-Thu
Freedom Way	1250 Benning Rd., Capitol Heights, MD 20743	Ave. Broakiet	(301) 736 0184	6pm-8pm	Wed
Harvest Temple	6608 Wilkens Place, Forestville, MD 20747	Mary Campbell	(301) 420-1417	12pm-4pm	Tue-Thu
Transitional Center @ PG City Housing	603 Addison Rd., Capitol Heights, MD 20743	Robert Walker	(301) 808-5317	Housing	
Transitional Housing PG City DSS	9202 Spring Hill Drive Apt. , Greenbelt, MD 20770	Darlene Harris Rita Harris	(301) 345-6175	Housing	
Trnsitional Housing PG City	9160 Edmonston Rd, #202 Greenbelt, MD 20770	Beverly Bruce	(301) 513-0279	Housing	
Warriors for Christ Ministries	2420 Brook Drive Suite 322, Suitland MD 20746	Julie Adgerson	(301) 735-6300	Shelter	

WASHINGTON COUNTY SOUP KITCHENS

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Salvation Army	524 West Franklin St., Hagerstown, MD	Laura Berger	(301) 733-2440	call	call
Soul Haven	14E Franklin St., Hagerstown, MD 21740	Ethel Newark	(301) 790-5054	12pm-2pm	Sat
W House	549 N. Locust St. Hagerstown, MD 21740	Christina Tredon	(301) 791-7826	24hr.	Shelter
Wells House	324 N. Locust St., Hagerstown, MD 21740	Charles Mooneyhan	(301) 739-7748	Call	
Union Resue Mission	P.O. Box 685 Hagerstown, MD 21741	Nancy Shank	(301) 739-1165	24hr	Shelter
Zion Soup Kitchen	201 N. Potomac St., Hagerstown, MD 21740	Barbara Hendershot	(301) 739-7244	5pm-8pm	Tue

WICOMICO COUNTY SOUP KITCHEN

NAME	ADDRESS	CONTACT	PHONE	HOURS	DAYS
Christian Shelter, Inc.	334 Barclay St., Salisbury, MD 21804	James Barnes	(410) 749-5673		
Life Crisis Center	P.O. Box 387, Salisbury, MD 21803-0387	Edith Saroli-Silva	(410) 749-4357	Shelter	
Emmanuel Wesleyan Church	142 Shamrock Dr., Salisbury, Md 21801	Charles Kirby	(410) 749-6594 (410) 614-7937	8am-9am	Saturday
First Baptist Soup Kitchen	528 Booth Street Salisbury, MD 21801	Lelia Chester Clinda Johnson	(410) 548-5486 (410) 546-8158	10-1pm	Mondays Sept-May
Hebron Community Kitchen/St. Paul's United Methodist Church	204 East Walnut Street, Hebron, MD 21830	Terresa Richards	(410) 546-9750	2pm-until	1 st -3 rd Saturday
Joseph House Crisis Center	812 Boundary Street, Salisbury, MD 21801	Dave Heininger	(410) 749-4239	10:30am-12pm	Tue, Wed, Thur