

RENO HOUSING AUTHORITY





**reno gazette journal**  
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**Reno housing crisis: Rent control, tiny houses, anti-vagrancy laws up for consideration**

Anjeanette Damon, [adamon@rgj.com](mailto:adamon@rgj.com) Published 6:00 a.m. PT July 27, 2017



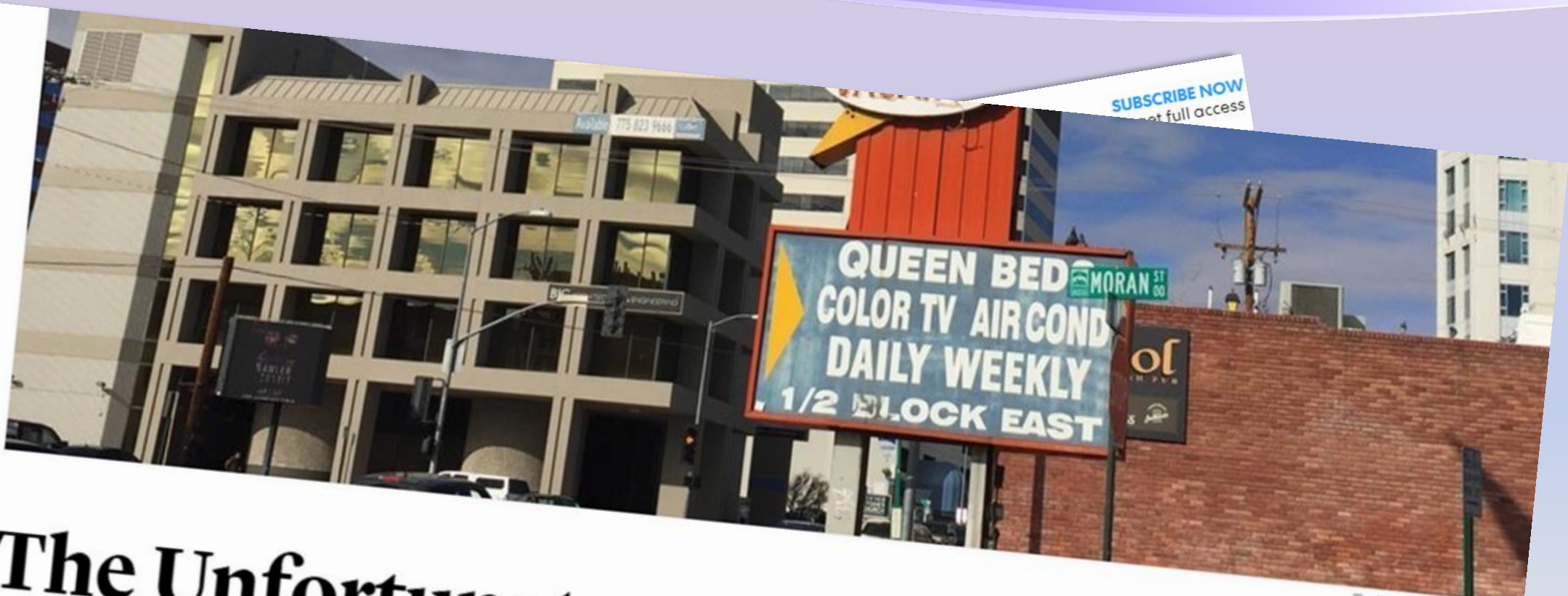
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# The Unfortunate Consequences of Reno's

Emily DeRuy / The Atla



# gazette journal

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## Reno closes 2017 with 4th highest apartment rent spike in U.S.

Jason Hidalgo, [jhidalgo@rgj.com](mailto:jhidalgo@rgj.com)

Published 3:00 a.m. PT Dec. 4, 2017 | Updated 9:28 a.m. PT Dec. 4, 2017

### Top 10 cities of Reno's



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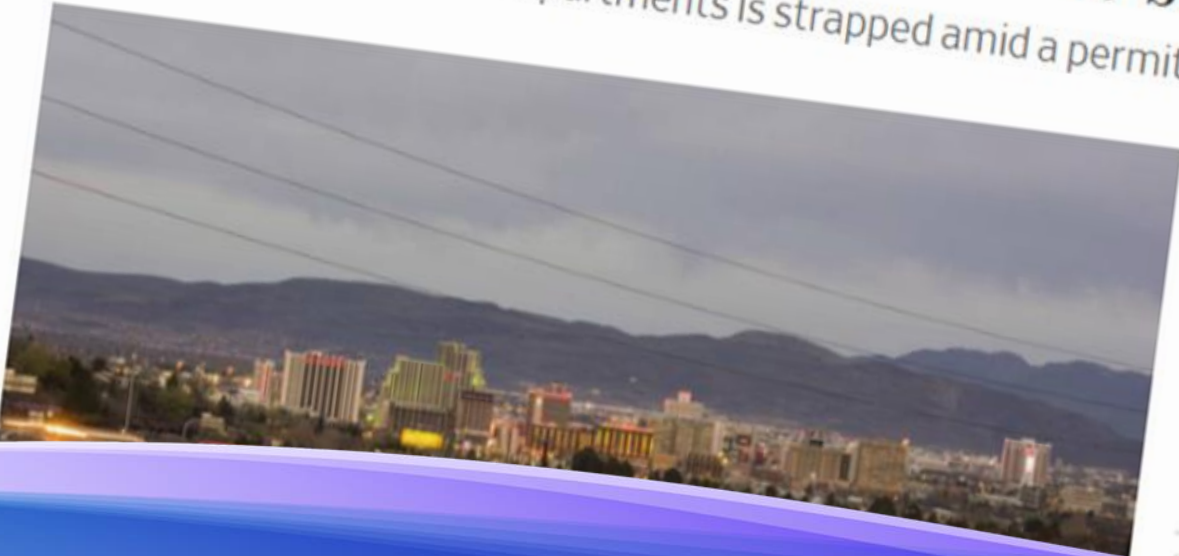
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U.S.

## Housing Crunch Threatens Reno's Tech Boom

The supply of houses and apartments is strapped amid a permitting bottleneck as firms pour in



### Recommended Videos

1. North Korea's Olympics Charm Offensive Meets Skepticism





# Here to Help



Reno Housing Authority

# History of Service

- Housing Act of 1937
- Created in 1943
- Serves Reno, Sparks, Washoe County



# Serving 4,000 Households



# Serving 4,000 Households

6,000+ individuals



# RHA





# RHA

- Quasi-Government Agency



# RHA

- Quasi-Government Agency
- Board Governed



# RHA

- Quasi-Government Agency
- Board Governed
- Jurisdiction: Reno, Sparks, Washoe County

# Community Partnerships

- Multiply resources
- Provide new clients for partners
- Tenants receive services
- Prevent duplication of services



# Community Partners



- Aging and Disability Resource Center
- Advocate for Elders for the State of Nevada
- Care Chest of Sierra Nevada
- Casa de Vida
- Community Services Agency
- Department of Veterans Affairs (VA)

# Community Partners



- Domestic Violence Resource Center (formally CAAW)
- Financial Guidance Center
- Food Bank of Northern Nevada
- Job Opportunities In Nevada
- Nevada JobConnect
- Nevada Division of Welfare
- Northern Nevada HOPES



# Community Partners



- Reno Police Department
- Rotary Club of Reno
- Safe Embrace
- Sierra Nevada Job Corps Veterans Administration
- Washoe County Health Department
- Other Local Nonprofit Organizations



Mineral Manor

# Public Housing



# Market Rate Housing

Prater Way  
Apartments



# Housing Choice Vouchers

OMB No. 2577-0169  
(Exp. 04/30/2018)

**Voucher**  
**Housing Choice Voucher Program**  
U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

Public Reporting Burden for this collection of information is estimated to average 05 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed to complete the review of information, collecting the data, reviewing and collecting the data, and reviewing and collecting the data. This collection of information is required by the Department of Housing and Urban Development, 24 CFR 982.201-203, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000.

**Privacy Act Statement.** The Department of Housing and Urban Development (HUD) is authorized to collect the information on this form to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read **entire** document before completing form  
Fill in all blanks below. Type or print clearly.

1. Insert <b>unit size</b> in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)		Voucher Number
2. <b>Date Voucher Issued</b> (mm/dd/yyyy) Insert actual date the Voucher is issued to the Family.		1. Unit Size
3. <b>Date Voucher Expires</b> (mm/dd/yyyy) Insert date sixty days after date Voucher is issued. (See Section 6 of this form.)		2. Issue Date (mm/dd/yyyy)
4. <b>Date Extension Expires</b> (if applicable)(mm/dd/yyyy) (See Section 6. of this form)		3. Expiration Date (mm/dd/yyyy)
5. Name of Family Representative	B. Signature of Family Representative	4. Date Extension Expires (mm/dd/yyyy)
7. Name of Public Housing Agency (PHA)		Date Signed (mm/dd/yyyy)
8. Name and Title of PHA Official	9. Signature of PHA Official	

### 1. Housing Choice Voucher Program

A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the housing choice voucher program. Under this program, the family chooses a decent, safe and sanitary unit to live in. If the owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family...

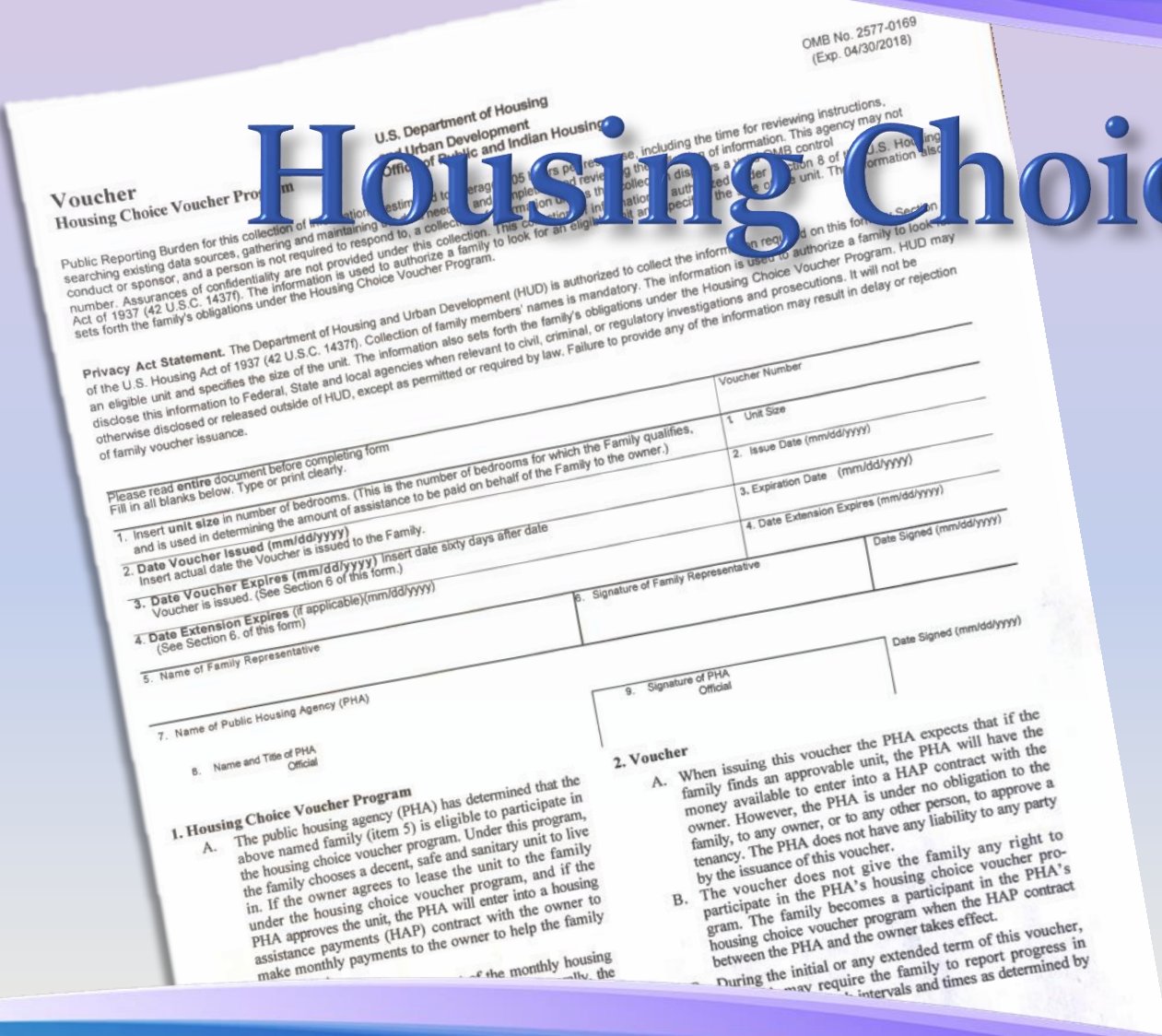
### 2. Voucher

A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.  
B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.  
During the initial or any extended term of this voucher, the PHA may require the family to report progress in...



# Housing Choice Vouchers

- “Section 8” vouchers





# Housing Choice Vouchers

- “Section 8” vouchers
- Pay a portion of monthly rent

OMB No. 2577-0169 (Exp. 04/30/2018)

**Voucher**  
**Housing Choice Voucher Program**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

Public Reporting Burden for this collection of information is estimated to average 305 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed to complete the review of information, collecting the data, reviewing and disclosing the information, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any aspect of this collection of information, including the time for reviewing instructions, to Washington, DC 20543-0047, and to the Office of Management and Budget, Paperwork Project Director (0704-0188), Washington, DC 20503.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect the information on this form to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read **entire** document before completing form  
Fill in all blanks below. Type or print clearly.

1. Insert **unit size** in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)

2. **Date Voucher Issued** (mm/dd/yyyy) Insert actual date the Voucher is issued to the Family.

3. **Date Voucher Expires** (mm/dd/yyyy) Insert date sixty days after date Voucher is issued. (See Section 6 of this form.)

4. **Date Extension Expires** (if applicable)(mm/dd/yyyy) (See Section 6. of this form)

5. Name of Family Representative

6. Name and Title of PHA Official

7. Name of Public Housing Agency (PHA)

8. Signature of Family Representative

9. Signature of PHA Official

10. Voucher Number

11. Unit Size

12. Issue Date (mm/dd/yyyy)

13. Expiration Date (mm/dd/yyyy)

14. Date Extension Expires (mm/dd/yyyy)

15. Date Signed (mm/dd/yyyy)

16. Date Signed (mm/dd/yyyy)

**1. Housing Choice Voucher Program**

A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the housing choice voucher program. Under this program, the family chooses a decent, safe and sanitary unit to live in. If the owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family pay the portion of the monthly housing rent that the family is unable to pay. If the family fails to pay its portion of the monthly housing rent, the PHA may suspend or terminate the voucher.

**2. Voucher**

A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.

B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.

C. The family must pay its portion of the monthly housing rent. During the initial or any extended term of this voucher, the PHA may require the family to report progress in paying its portion of the monthly housing rent at intervals and times as determined by the PHA.



# Housing Choice Vouchers

- “Section 8” vouchers
- Pay a portion of monthly rent
- Allow choice of location

OMB No. 2577-0169  
(Exp. 04/30/2018)

## Voucher Housing Choice Voucher Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

Public Reporting Burden for this collection of information is estimated to average 05 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed to complete the review of information, this agency may not conduct or sponsor, and a person is not required to respond to this collection of information unless it displays a valid OMB control number. Assurances of confidentiality are not provided under this collection of information unless it is specifically authorized by the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The information is used to authorize a family to look for an eligible unit for which the family is eligible to receive a housing choice voucher. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

**Privacy Act Statement.** The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of family members' names is mandatory. The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read **entire** document before completing form  
Fill in all blanks below. Type or print clearly.

1. Insert **unit size** in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)

2. **Date Voucher Issued** (mm/dd/yyyy)  
Insert actual date the Voucher is issued to the Family.

3. **Date Voucher Expires** (mm/dd/yyyy) Insert date sixty days after date Voucher is issued. (See Section 6 of this form.)

4. **Date Extension Expires** (if applicable)(mm/dd/yyyy)  
(See Section 6. of this form)

5. Name of Family Representative

7. Name of Public Housing Agency (PHA)

8. Name and Title of PHA Official

### 1. Housing Choice Voucher Program

A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the housing choice voucher program. Under this program, the family chooses a decent, safe and sanitary unit to live in. If the owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family

6. Signature of Family Representative

9. Signature of PHA Official

### 2. Voucher

- A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.
- B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.
- During the initial or any extended term of this voucher, the PHA may require the family to report progress in the following intervals and times as determined by

Voucher Number

1. Unit Size

2. Issue Date (mm/dd/yyyy)

3. Expiration Date (mm/dd/yyyy)

4. Date Extension Expires (mm/dd/yyyy)

Date Signed (mm/dd/yyyy)

Date Signed (mm/dd/yyyy)

OMB No. 2577-0169  
(Exp. 04/30/2018)

# Housing Choice Vouchers

- “Section 8” vouchers
- Pay a portion of monthly rent
- Allow choice of location
- RHA determines participant eligibility and must approve unit

**Voucher**  
**Housing Choice Voucher Program**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

Public Reporting Burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed to complete the review of information, and reviewing and collecting the data. Send comments regarding this burden estimate or any aspect of this collection of information, including suggestions for reducing the burden, to Washington, DC 20543-0047, and to the Office of Management and Budget, Paperwork Project Director (0704-0188). Send all comments regarding this information collection to the U.S. Department of Housing and Urban Development, Paperwork Project Director, 400 Michigan Avenue, NE, Washington, DC 20002-4302.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect the information on this form to determine whether an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read **entire** document before completing form  
Fill in all blanks below. Type or print clearly.

1. Insert unit size in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)		Voucher Number
2. Date Voucher Issued (mm/dd/yyyy) Insert actual date the Voucher is issued to the Family.		1. Unit Size
3. Date Voucher Expires (mm/dd/yyyy) Insert date sixty days after date Voucher is issued. (See Section 6 of this form.)		2. Issue Date (mm/dd/yyyy)
4. Date Extension Expires (if applicable)(mm/dd/yyyy) (See Section 6. of this form)		3. Expiration Date (mm/dd/yyyy)
5. Name of Family Representative	B. Signature of Family Representative	4. Date Extension Expires (mm/dd/yyyy)
7. Name of Public Housing Agency (PHA)		Date Signed (mm/dd/yyyy)
8. Name and Title of PHA Official	9. Signature of PHA Official	

**2. Voucher**

A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.

B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.

During the initial or any extended term of this voucher, the family may require the family to report progress by the following intervals and times as determined by the PHA:

**1. Housing Choice Voucher Program**

A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the housing choice voucher program. Under this program, the family chooses a decent, safe and sanitary unit to live in. If the owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family pay the portion of the monthly housing cost that the family is unable to pay.





# Our Residents

# Our Residents

Our families make less than 30% of the area median (average) income.

# Our Residents

The median income for Washoe County is  
\$73,500.

(family of four)

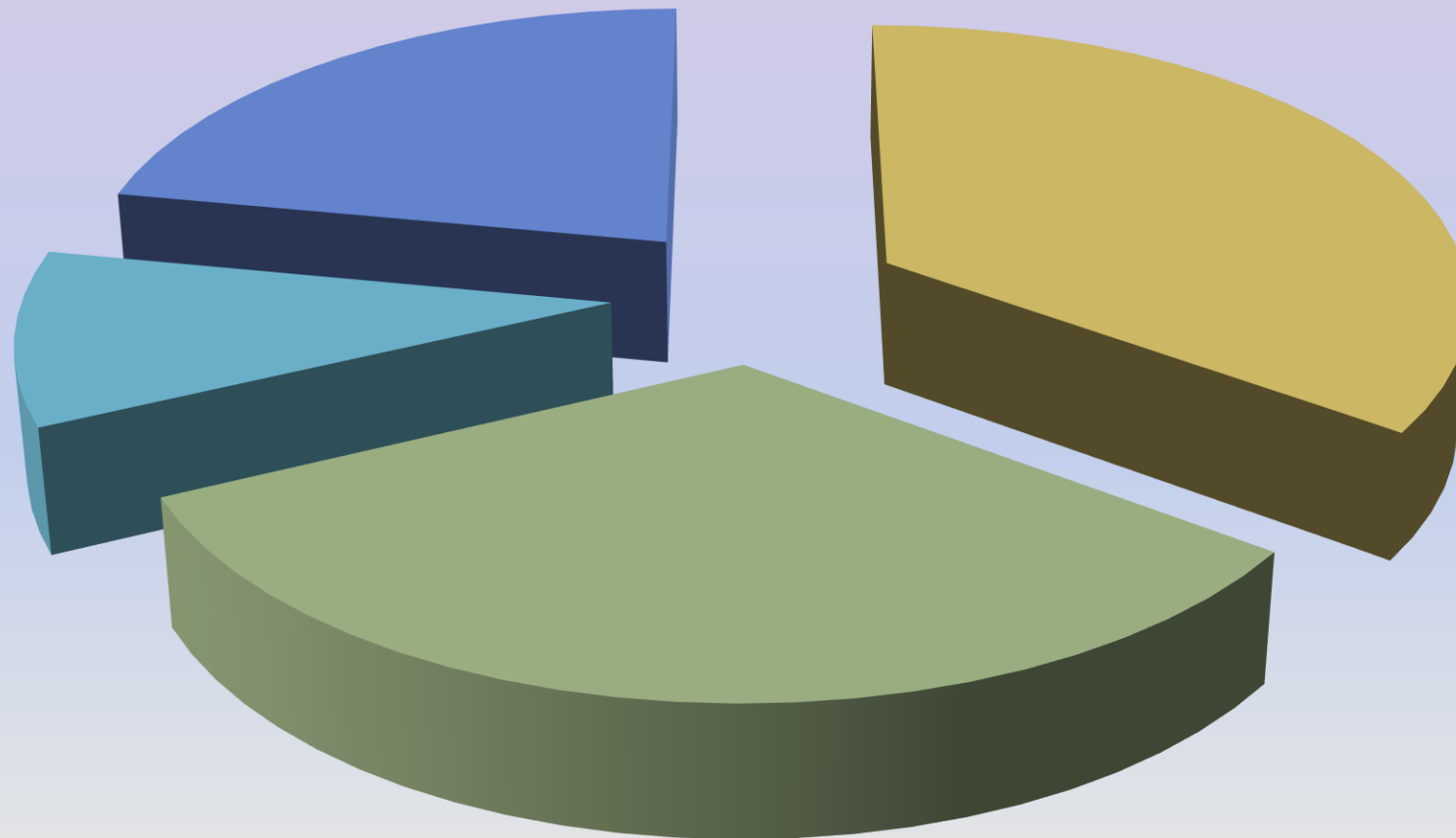
# Our Residents

The median income for Washoe County is \$73,500.

Our families have incomes less than \$22,050.

(family of four)

# Our Residents



- Elderly / Disabled 35%
- Families with Children 33%
- Veterans 10%
- Families without Children 22%

# Programs for Residents

- Family Self-sufficiency programs



# Programs for Residents

- Family Self-sufficiency programs
- Senior Services



# Programs for Residents

- Family Self-sufficiency programs
- Senior Services
- Youth programs





# Affordable and Safe



# Safe

## Criminal Background Checks

- All residents
- No violent crimes
- No sex crimes
- No drug crimes



# Success Stories



Shantrice



Autumn



Steven



Hannah



# Success Stories

## Steven Garcia

- Family Self Sufficiency participant
- High School Equivalency
- Training at TMCC



# Success Stories

## Autumn Gitthens

- Family Self Sufficiency participant
- Paying full rent
- Saved \$16,409 in escrow

# Neighborhood Stabilization Program



# Neighborhood Stabilization Program



- \$22 million economic infusion during the recession

# Neighborhood Stabilization Program



- Cleaned up nuisance properties



# Neighborhood Stabilization Program



- Cleaned up nuisance properties
- Revitalized neighborhoods

# Neighborhood Stabilization Program



- Cleaned up nuisance properties
- Revitalized neighborhoods
- Added 165 houses/duplexes to inventory



DEPARTMENT  
OF  
HOUSING  
AND  
URBAN  
DEVELOPMENT

# Top Performing Agency

Based upon

- Properties
- Finances
- Management

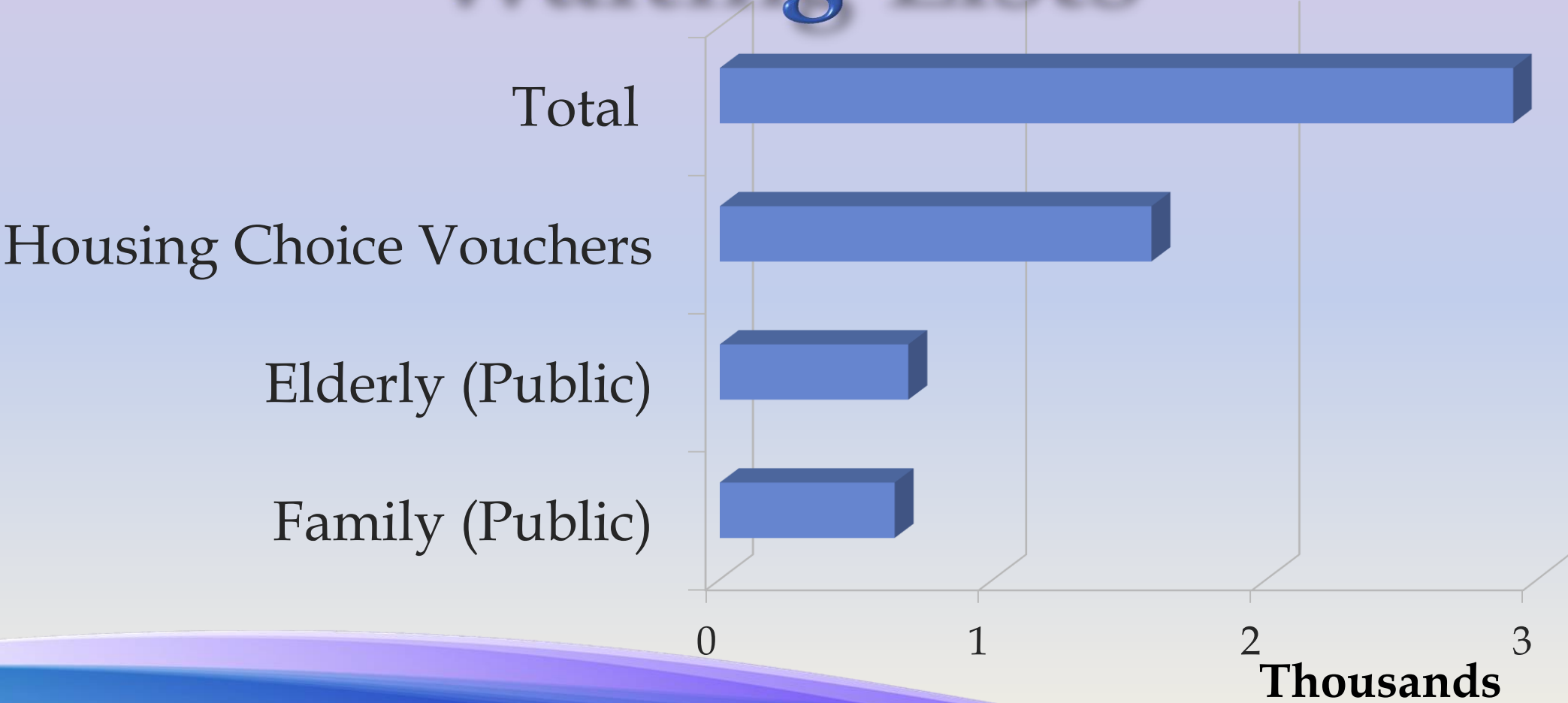






Reno Housing Authority

# Waiting Lists



# The Line



You are here

# The Line

You are  
(still)  
here





# Federal Funding



# Federal Funding

Forecast:  
uncertain



# Creative Solutions



# Sutro Street Senior Apartments



① NORTH ELEVATION - SCHEMATIC  
1" = 30'-0"



② WEST ELEVATION - SCHEMATIC  
1" = 30'-0"



③ EAST ELEVATION - SCHEMATIC  
1" = 30'-0"





# Creative Solutions

We're All  
in this  
Together





# Housing Authority

1525 East Ninth Street

Serving Reno, Sparks and Washoe County



Founded 1943

# 75 Years of Service



**Reno Housing Authority**





Let's make affordable  
possible.