

PHAPlans

5YearPlanforFiscalYears2002 -2006
AnnualPlanforFiscalYear2002

SubmittedDecember2001
ResubmittedMay6,2002

**NOTE:THI SPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDIN
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

PHA Plan Agency Identification

PHAName: Klamath Housing Authority

PHANumber: OR017

PHAFiscalYearBeginning: 01/2002

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

5-YEAR PLAN
PHAF ISCAL YEARS 2002 -2006
 [24CFRPart903.5]

A.Mission

State the PHA's mission for serving the needs of low -income, very low income, and extremely low -income families in the PHA's jurisdiction. (select one of the choices below)

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- X The PHA's mission is: (state mission here)

THE MISSION OF KLMATH HOUSING AUTHORITY IS TO PROVIDE
 LOW INCOME PEOPLE IN KLAMATH AND LAKE COUNTIES WITH THE
 OPPORTUNITY TO OBTAIN AFFORDABLE HOUSING AND ACHIEVE
 SELF-SUFFICIENCY

B.Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHA may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD -suggested objectives or their own, **PHAS ARE STRONGLY EN COURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS .** (Quantifiable measures would include target sets such as: numbers of families served or PHAS scores achieved.) PHA should identify these measures in the space to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

- X PHA Goal :Expand the supply of assisted housing
 Objectives:
- X Apply for additional rental vouchers:
- X Reduce public housing vacancies:
 - X Leverage private or other public funds to create additional housing opportunities:
 - X Acquire or build units or developments
 - Other (list below)
- X PHA Goal: Improve the quality of assisted housing
 Objectives:
- X Improve public housing management: (PHAS score)
 - X Improve voucher management: (SEMAP score)
 - X Increase customer satisfaction:

- X Concentrate one effort to improve specific management functions:
(list; e.g., public housing finance; voucher unit inspections)
 - X Renovate or modernize public housing units:
 - Demolish or dispose of obsolete public housing:
 - Provide replacement public housing
 - X Provide replacement vouchers: IF PUBLIC HOUSING IS CONVERTED TO SECTION 8
 - X Other: (list below)
- HOME DALES SUBDIVISION

X PHA Goal: Increase assisted housing choices

Objectives:

- X Provide voucher mobility counseling:
- X Conduct outreach effort to potential voucher landlords
- X Increase voucher payment standards
- Implement voucher homeownership program:
- X Implement public housing or other homeownership programs:
- Implement public housing site -based waiting lists:
- Convert public housing to vouchers:
- X Other: (list below)

1. To create a housing environment which enables clients to live with dignity and which supports their effort to achieve self-sufficiency.
2. To maintain and improve the facilities owned by KHA to ensure their future value to KHA's clients and the community at large.
3. To assist Klamath and Lake Counties to identify and address affordable

Housing needs:

- A. to serve as a source of information regarding the demand for, and supply of, housing in Klamath and Lake Counties.
 - B. to be a catalyst for new development and rehabilitation of housing, and for the institution of fair housing practices within the counties.
 - C. to develop working relationships with the cities, counties and other public and private organizations and agencies, to further goals 3a and 3b.
4. To develop presentations to educate the public regarding the need for affordable housing and the availability of KHA programs.
 5. To fulfill all efforts in a fiscally responsible and efficient manner and to create and maintain public confidence in KHA's usefulness to the community at large.
 6. Through continued training and education, to maintain and enhance KHA's staffs' ability to serve KHA clientele.

7. To solicit staff participation in management decisions

HUD Strategic Goal: Improve community quality of life and economic vitality

X PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designated developments or building sf for particular resident groups (elderly, persons with disabilities)
- X Other: (list below)
PROVIDENEFARMLABORHOUSING:COUNTRYVILLAGE.

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

X PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- X Provide or attract supportive services to improve assistances recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- X Other: (list below)

FAMILY SELFSUFFICIENCY PROGRAM

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

X PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- X Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:
- X Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability:

- X Undertakeaffirmativemeasures toensureaccessiblehousingtopersons
withallvarietiesofdisabilitiesregardlessunitsizerequired:
- Other:(listbelow)

OtherPHAGoalsandObjectives:(listbelow)

AnnualPHAPlan
PHAFiscalYear2002
 [24CFRPart903.7]

i. AnnualPlanType:

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

StandardPlan

StreamlinedPlan:

- HighPerformingPHA**
- SmallAgency(<250PublicHousingUnits)**
- AdministeringSection8Only**

TroubledAgencyPlan

ii. ExecutiveSummaryoftheAnnualPHAPlan

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiatives anddiscretionarypolicies,thePHAhas includedintheAnnualPlan.

iii. AnnualPlanTableofContents

[24CFRPart903.79(r)]

ProvideatableofcontentsfortheAnnualPlan ,includingattachments,andalistofsupporting documentsavailableforpublicinspection .

TableofContents

	<u>Page#</u>
AnnualPlan	
i. ExecutiveSummary	
ii. TableofContents	
1. HousingNeeds	4
2. FinancialResources	11
3. PoliciesonEligibility,SelectionandAdmissions	12
4. RentDeterminationPolicies	21
5. OperationsandManagementPolicies	25
6. GrievanceProcedure s	26
7. CapitalImprovementNeeds	27
8. DemolitionandDisposition	32
9. DesignationofHousing	33
10. ConversionsofPublicHousing	34
11. Homeownership	36
12. CommunityServicePrograms	38
13. CrimeandSafety	40

14. Pets	42
15. Civil Rights Certifications (included with PHA Plan Certifications)	42
16. Audit	42
17. Asset Management	43
18. Substantial Deviation; Significant Amendment or Modification	45

Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a SEPARATE file submission from the PHA Plans file, provide the filename in parentheses in the space to the right of the title.

Required Attachments:

- Admissions Policy for Deconcentration
- X FY2001 Capital Fund Program Annual Statement 28
- Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- X FY2001 Capital Fund Program 5 Year Action Plan 31
- Public Housing Drug Elimination Program (PHDEP) Plan
- X Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) SEE ATTACHED "A"
- X Amendment Definition; Substantial Deviation (as above) 45

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
XX	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
XX	State/Local Government Certification of Consistency with the Consolidated Plan 1999	5 Year and Annual Plans
XX	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
XX	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair	Annual Plan: Housing Needs

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
XX	Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	
XX	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
XX	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
XX	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
XX	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
XX	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
XX	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
XX	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
XX	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
XX	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
XX	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
XX	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs

XX	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI application or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
XX	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
XX	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
XX	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the result of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
XX	Other supporting documents (optional) FARMLABORHOUSINGNEED	(specify as needed)

1. Statement of Housing Needs

[24CFR Part 903.79(a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction KLAMATH COUNTY by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	2189	5	5	4	2	3	1
Income > 30% but <= 50% of AMI	2439	5	5	4	2	3	1
Income > 50% but < 80% of AMI	2801	5	4	4	3	3	3
Elderly	5501	5	5	5	5	4	4
Families with Disabilities	7804	5	5	5	5	5	4
Race/Black	608	4	5	5	5	3	4
Race/Native Amer	2617	5	5	5	5	4	4
Race/Hispanic	5247	4	5	5	5	5	4
Race/Asian	671	4	5	5	5	3	4

Housing Needs of Families in the Jurisdiction LAKE COUNTY by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	226	5	5	4	2	5	1
Income > 30% but <= 50% of AMI	299	5	5	4	2	5	1
Income > 50% but < 80% of AMI	361	5	4	4	3	3	3
Elderly	705	5	5	5	5	4	4
Families with Disabilities	818	5	5	5	5	5	4
Race/Black	10	4	5	5	5	3	4
Race/Native Amer	195	5	5	5	5	4	4
Race/Hispanic	438	4	5	5	5	5	4
Race/Asian	63	4	5	5	5	3	4

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- X Consolidated Plan of the Jurisdiction/s
Indicate year:
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists

State the housing needs of the families on the PHA’s waiting list/s. **Complete one table for each type of PHA -wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant -based assistance			
X Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site -Based or sub -jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	4		20
Extremely low income <= 30% AMI	2		
Very low income (>30% but <=50% AMI)	1		
Low income (>50% but <80% AMI)	1		
Families with children	3		
Elderly families	1		

Housing Needs of Families on the Waiting List			
Families with Disabilities	0		
Race/ethnicity			
Race/ethnicity			
Race/ethnicity N/A	1		
Race/ethnicity WHT	4		
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2BR	3		
3BR			
4BR	1		
5BR			
5+BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) <input checked="" type="checkbox"/> Section 8 tenant-based assistance <input type="checkbox"/> Public Housing <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site - Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	738		211
Extremely low income (<=30% AMI)	523	70%	
Very low income (>30% but <=50% AMI)	150	20	
Low income (>50% but <80% AMI)	65	9	

Housing Needs of Families on the Waiting List			
Families with children	435	59	
Elderly families	65	9	
Families with Disabilities	141	19	
Race/ethnicity WHITE	673	91	
Race/ethnicity BLACK	8	1	
Race/ethnicity ASIAN	6	1	
Race/ethnicity NATIVE AMER	51	7	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	0		
2BR	0		
3BR	0		
4BR	0		
5BR	0		
5+BR	0		
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to open the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- X Employe effective maintenance and management policies to minimize the number of public housing units off -line
- X Reduce turnover time for vacated public housing units
- X Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed financed development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- X Maintain or increase section 8 lease -up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- X Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- X Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease -up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- X Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- X Apply for additional section 8 units should they become available
- X Leverage affordable housing resources in the community through the creation of mixed -finance housing
- X Pursue housing resources other than public housing or Section 8 tenant -based assistance.
- Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30% of AMI

Select all that apply

- X Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- X Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant -based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- Seek designation of public housing for the elderly
- X Apply for special -purpose voucher targeted to the elderly, should they become available
- Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Seek designation of public housing for families with disabilities
- X Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- X Apply for special -purpose voucher targeted to families with disabilities, should they become available
- X Affirmatively market to local non -profit agencies that assist families with disabilities
- Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- X Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- X Counsel section 8 tenants at location of units outside of areas of poverty or minority concentration and assist them to locate those units
- X Market the section 8 program to owners outside of areas of poverty/minority concentrations
- Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- X Funding constraints
- X Staffing constraints
- X Limited availability of sites for assisted housing
- X Extent to which particular housing needs are met by other organizations in the community
- X Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- X Influence of the housing market on PHA programs
- X Community priorities regarding housing assistance
- X Results of consultation with local or state government
- X Results of consultation with residents and the Resident Advisory Board
- X Results of consultation with advocacy groups
- Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.79(b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant-based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)		
a) Public Housing Operating Fund	153,134	PH OPERATIONS
b) Public Housing Capital Fund	161,212	PH MODERNIZATION
c) HOPE VI Revitalization		
d) HOPE VI Demolition		

FinancialResources: PlannedSourcesandUses		
Sources	Planned\$	PlannedUses
e) AnnualContributionsforSection 8Tenant -BasedAssistance	3,127,137	HAPPAYMENTS
f) PublicHousingDrugElimination Program(includinganyTechnical Assistancefunds)		
g) ResidentOpportunityandSelf - SufficiencyGrants	31,217	SECT8FSS
h) CommunityDevelopmentBlock Grant		
i) HOME		
OtherFederalGrants(listbelow)		
2.PriorYearFederalGrants (unobligatedfundsonly)(list below)		
3.PublicHousingDwellingRental Income	85,633	PHOPERATION
4.Otherincome (listbelow)		
FARMLABORHOUSINGMGT	6,000	FLHOPERATIONS
4.Non -federalsources (listbelow)		
Totalresources		

3.PHAPoliciesGoverningEligibility,Selection,andAdmissions

[24CFRPart903.79(c)]

A.PublicHousing

Exemptions:PHAsthatdonotadministerpublichousingare notrequiredto completesubcomponent 3A.

(1)Eligibility

a. WhendoesthePHAverifyeligibilityforadmissiontopublichousing?(selectall thatapply)

- Whenfamiliesarewithinacertainnumberofbeingofferedaunit:(state number)
- X Whenfamiliesarewithinacertaintimeofbeingofferedaunit:45DAYS
- X Other:(describe)
ASSOONASAPPLICATIONISRECEIVED

b. Whichnon -income(screening)factorsdoesthePHAusetoestablisheligibilityfor admissiontopublichousing(sel ectallthatapply)?

- X CriminalorDrug -relatedactivity
- X Rentalhistory
- Housekeeping
- X Other(describe)
CREDITINFORMATIONREGARDINGUTILITIESOWEDAS TENANTS.MUSTPAYSOMEOUTSTANDINGUTITLITYBILLS INORDERTOGETNEWSERVICEIN THEIRNAME.ALSO "FED"(evictions)

c. XYes No: DoesthePHArequestcriminalrecordsfromlocallaw enforcementagenciesforscreeningpurposes?

d. XYes No: DoesthePHArequestcriminalrecordsfro mStatelaw enforcementagenciesforscreeningpurposes?

e. YesXNo: DoesthePHAaccessFBIcriminalrecordsfromtheFBIfor screeningpurposes?(eitherdirectlyorthroughanNCIC - authorizedsource)

(2)WaitingListOrganizat ion

a. WhichmethodsdoesthePHAplantousestoorganizeit'spublichousingwaitinglist (selectallthatapply)

- X Community-widelist
- Sub-jurisdictionallists
- Site-basedwaitinglists
- Other(describ e)

b. Wheremayinterestedpersonsapplyforadmissiontopublichousing?

- X PHAmainadministrativeoffice
- PHAdevelopmentsitemanagementoffice
- Other(listbelow)

c. If the PHA plan to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously HUD-approved site-based waiting list plan)? If yes, how many lists?

3. Yes No: May families be on more than one list simultaneously? If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site-based waiting lists
- At the development to which they would like to apply
- Other (list below)

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- One
- X Two
- Three or More

b. X Yes No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

a. Income targeting:

Yes X No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfer take precedence over new admissions? (list below)

- Emergencies
- X Overhoused
- X Underhoused
- X Medical justification
- X Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- X Other: (list below)
CASE BY CASE BASIS: Witness Protection, Job Betterment

c. Preferences

1. X Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Household that contribute to meeting income goals (broad range of incomes)
- Household that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- X Other preference(s) (list below) = TERMINALLY ILL

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Household that contribute to meeting income goals (broad range of incomes)
- Household that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- X The PHA - resident lease
- X The PHA's Admissions and (Continued) Occupancy policy
- X PHA briefing seminars or written materials
- X Other source (list)

SEASONAL NEWSLETTERS MAILED TO TENANTS
POLICY ON PERMANENT DISPLAY IN THE OFFICE LOBBY

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- At an annual reexamination and lease renewal
- X Anytime family composition changes
- At family request for revision
- Other (list)

(6) Deconcentration and Income Mixing

- a. Yes No: Did the PHA's analysis of its family (general occupancy) developmentstodetermineconcentrationsofpovertyindicatethe needformeasurestopromotedeconcentrationofpovertyor incomemixing?
- b. Yes No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?
- c. If the answer to b was yes, what changes were adopted? (select all that apply)
- Adoption of site -based waiting lists
If selected, list targeted developments below:
 - Employing waiting list "skipping" to achieve deconcentration of poverty or incomemixing goals at targeted developments
If selected, list targeted developments below:
 - Employing new admission preferences at targeted developments
If selected, list targeted developments below:
 - Other (list policies and developmentstargeted below)
- d. Yes No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
- e. If the answer to d was yes, how would you describe these changes? (select all that apply)
- Additional affirmative marketing
 - Actions to improve the marketability of certain developments
 - Adoption or adjustment of ceiling rents for certain developments
 - Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
 - Other (list below)
- f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher -income families? (select all that apply)
- X Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

- g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower -income families? (select all that apply)
- X Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

B. Section 8

Exemptions: PHA that do not administer section 8 are not required to complete sub -component 3B. Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- X Criminal or drug -related activity only to the extent required by law or regulation
- Criminal and drug -related activity, more extensively than required by law or regulation
- More general screening than criminal and drug -related activity (list factors below)
- X Other (list below) = PAROLE & PROBATION RECORDS
- b. Yes X No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. Yes X No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC - authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug -related activity
- X Other (describe below)
- CURRENT AND PRIOR LANDLORD, IF KNOWN

(2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant -based assistance waiting list merged? (select all that apply)
- X None
- Federal public housing
- Federal moderate rehabilitation
- Federal project -based certificate program

Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant assistance? (select all that apply)

X PHA main administrative office

Other (list below)

(3) Search Time

a. X Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

IF APPLICANT CAN PROVE THAT THEY HAVE BEEN ACTIVELY SEEKING HOUSING, OR HAVE SPECIAL CIRCUMSTANCES, SUCH AS MEDICAL EMERGENCIES

(4) Admissions Preferences

a. Income targeting

X Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admission to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. X Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction

- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- X Other preference(s) (list below)

TERMINALLY ILL (THREE YEAR LIFE EXPECTANCY)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- X Other preference(s) (list below)

TERMINALLY ILL

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- X Date and time of application
- Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- This preference has previously been reviewed and approved by HUD
- The PHA requests approval for this preference through this PHA Plan

6. Relationship of preference to income targeting requirements: (select one)

- The PHA applies preferences within income tiers
- X Not applicable: the pool of applicant families ensure that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admission to any special -purpose section 8 program administered by the PHA contained? (select all that apply)

- X The Section 8 Administrative Plan
- X Briefing sessions and written materials
- Other (list below)

b. How does the PHA announce the availability of any special -purpose section 8 program to the public?

- Through published notices
- X Other (list below)

AGENCY TO AGENCY NETWORKING

4. PHA Rent Determination Policies

[24 CFR Part 903.79 (d)]

A. Public Housing

Exemptions: PHA that do not administer public housing are not required to complete sub -component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- X The PHA will not employ any discretionary rent -setting policies for income based rent in public housing. Income -based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- ThePHAemploysdiscretionarypoliciesfordeterminingincomebasedrent(If selected,continuetoquestionb.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- \$0
 \$1-\$25
 \$26-\$50

2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below :

c. Rents set at less than 30% than adjusted income

1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

1. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusion policies does the PHA plan to employ (select all that apply)

- For the earned income of a previously unemployed household member
 For increases in earned income
 Fixed amount (other than general rent -setting policy)
If yes, state amount/s and circumstances below:

- Fixed percentage (other than general rent -setting policy)
If yes, state percentage/s and circumstances below:

- For household heads
 For other family members
 For transportation expenses
 For the non-reimbursed medical expenses of non-disabled or non-elderly families
 Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- Yes for all developments = FMR
- Yes but only for some developments
- No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- For all developments
- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95th percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent determination:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Anytime the family experiences an income increase

Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) **25%**

Other (list below)

g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12-month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- X This section 8 rent reasonableness study of comparable housing
- X Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below)

B. Section 8 Tenant -Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (voucher program, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- At or above 90% but below 100% of FMR
- 100% of FMR
- X Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- X FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- X Reflects market or submarket
- X To increase housing options for families
- X Other (list below) = TOP PREVENT FAMILIES FROM GOING OVER 40% OF THEIR INCOME FOR RENT

d. How often are payment standards reevaluated for adequacy? (select one)

- X Annually
- Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- X Success rates of assisted families
- X Rent burdens of assisted families
- Other (list below)

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

- X \$0
- \$1-\$25
- \$26-\$50

b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24CFR Part 903.79(e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached.
- X A brief description of the management structure and organization of the PHA follows:

KHAISAMUNICIPALCORP. WHOSE BOARD OF DIRECTORS IS APPOINTED TO A FIVE YEAR TERM BY KLAMATH COUNTY COMMISSIONERS. THAT BOARD HIRES AN EXECUTIVE DIRECTOR RESPONSIBLE FOR THE PROPER OPERATION OF SECTION 8, PUBLIC HOUSING AND RURAL DEVELOPMENT PROGRAMS.

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	57	18
Section 8 Vouchers	734	200

Section 8 Certificates	0	
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)	6 VOUCHERS TERMINALLY ILL	3
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs (list individually)		
FSS	15	10

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

PUBLIC HOUSING ADMINISTRATIVE PLAN

(2) Section 8 Management: (list below)

SECTION 8 ADMINISTRATIVE PLAN

6. PHA Grievance Procedures

[24 CFR Part 903.79(f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8 - Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA offices should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- PHA main administrative office
 PHA development management offices

Other(list below)

B. Section 8 Tenant -Based Assistance

1. Yes X No: Has the PHA established informal review procedures for applicants to the Section 8 tenant -based assistance program and informal hearing procedures for families assisted by the Section 8 tenant -based assistance program in addition to federal requirements found at 24CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA offices should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

X PHA main administrative office

Other(list below)

7. Capital Improvement Needs

[24CFR Part 903.79(g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub -component 7A: PHA that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long -term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD -52837.

Select one:

X The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) Plan Attachment Page 1 of Table Library

-or-

The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert there)

**Capital Fund Program Annual Statement
Parts I, II, and III**

**Annual Statement OR016PO1750101
Capital Fund Program (CFP) Part I: Summary**

LineNo.	SummarybyDevelopmentAccount	TotalEstimated Cost
1	TotalNon -CGPFunds	
2	1406Operations	14,500
3	1408ManagementImprovements	10,849
4	1410Administration	16,121
5	1411Audit	500
6	1415LiquidatedDamages	
7	1430FeesandCosts	
8	1440SiteAcquisition	
9	1450SiteImprovement	40,000
10	1460DwellingStructures	9,242
11	1465.1DwellingEquipment -Nonexpendable	
12	1470NondwellingStructures	
13	1475NondwellingEquipment	70,000
14	1485Demolition	
15	1490ReplacementReserve	
16	1492MovingtoWorkDemonstration	
17	1495.1RelocationCosts	
18	1498ModUsedforDevelopment	
19	1502Contingency	
20	AmountofAnnualGrant(Sumoflines2 -19)	161,212
21	Amountoffline20RelatedtoLBPActivities	
22	Amountoffline20RelatedtoSection504Compliance	
23	Amountoffline20RelatedtoSecurity	
24	Amountoffline20RelatedtoEnergyConservation Measures	

**AnnualStatementOR016PO1750101
CapitalFundProgram(CFP)PartII:Supporting Table**

Development Number/Name HA-WideActivities	GeneralDescriptionofMajorWork Categories	Development Account Number	Total Estimated Cost

OR017	Operations	1406	14,500
	ManagementImprovements,training, salary,software	1408	10,849
	Administration,consultants,surveys	1410	16,121
	Audit	1411	500
	SiteImprovements –landscape, sprinklers,treetrim,fencing	1450	40,000
	Dwellingstructure	1460	9,242
	Non-dwellingstructure –computer hardware,twovehiclesreplacement	1475	70,000
			161,212

**AnnualStatement
CapitalFundProgram(CFP)PartIII:ImplementationSchedule**

Development Number/Name HA-WideActivities	AllFundsObligated (QuarterEndingDate)	AllFundsExpended (QuarterEndingDate) 6/30/04
OR017	12/31/02 14,500 10,849 16,121 500 40,000 9,242 70,000 <hr/> 161,212	

OptionalPublicHousingAssetManagementTable

SeeTechnicalGuidanceforinstructionsonteuseofhistable,includinginf ormatontobeprovided.

PublicHousingAssetManagement

Development

ActivityDescription

Classification						
Number and Type of units	Capital Fund Program Parts II and III Component 7a	Development Activities Component 7b	Demolition/disposition Component 8	Designated housing Component 9	Conversion Component 10	Home-ownership Component 11a

(2) Optional 5 -Year Action Plan

Agencies are encouraged to include a 5 -Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template OR by completing and attaching a properly updated HUD -52834.

a. X Yes No: Is the PHA providing an optional 5 -Year Action Plan for the Capital Fund? (if no, skip to sub -component 7B)

b. If yes to question a, select one:
 The Capital Fund Program 5 -Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name)
-or-

X The Capital Fund Program 5 -Year Action Plan is provided below: (if selected, copy the CF Optional 5 Year Action Plan from the Table Library and insert here)

Optional Table for 5 -Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA -wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5 -Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5 -Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant	% Vacancies in Development

		Units	
OR017	PHAWIDE	0	0
Description of Need ed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
TRAINING,SALARIES		15,000	2002,3,4
SMOKE DETECTOR CHANGEOUT		1,000	2001
CARPORTS		90,000	2004
COUNTER TOPS		29,500	2003
UNDERHOUSE WATER PROBLEM		9,000	2002
DRAPERY		10,000	2002
SPRINKLER SYSTEM		20,000	2002
MANAGEMENT IMPROVEMENT, COMPUTER SOFTWARE		45,000	2003
TREE TRIMMING		8,000	2002
FENCING		15,000	2002
LANDSCAPE		35,000	2002,3
INSULATION		10,000	2002
CABINETS		90,000	2003
PLAYGROUND EQUIPMENT		24,000	2003
VEHICLE REPLACEMENT		30,000	2002
COMPUTER REPLACEMENT		35,000	2002
Totalestimatedcostovernext5years		466,500	

B. HOPEVI and Public Housing Development and Replacement Activities (Non -Capital Fund)

Applicability of sub -component 7B: All PHAs administering public housing. Identify any approved HOPEVI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- Yes No: a) Has the PHA received a HOPEVI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPEVI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
- Revitalization Plan submitted, pending approval
- Revitalization Plan approved
- Activities pursuant to an approved Revitalization Plan underway

Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:

Yes No: d) Will the PHA be engaging in any mixed -financed development activities for public housing in the Plan year?
If yes, list developments or activities below:
CONTINUE DEVELOPMENT OF SUNRISE MEADOWS WSIF
FUNDING REMAINS ACCESSIBLE

X Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
If yes, list developments or activities below:
REPLACE PUBLIC HOUSING UNITS

8. Demolition and Disposition

[24 CFR Part 903.79(h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

2. Activity Description

Yes No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)

Demolition/Disposition Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/>	
Disposition <input type="checkbox"/>	
3. Application status (select one)	
Approved <input type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	
Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>	
5. Number of units affected:	
6. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	

<input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24CFR Part 903.79(i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete as streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

Designation of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly	<input type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input type="checkbox"/>
3. Application status (select one)	
Approved; included in the PHA’s Designation Plan	<input type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>

Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously -approved Designation Plan?
6. Number of units affected: 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

10. Conversion of Public Housing to Tenant -Based Assistance

[24CFR Part 903.79(j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessment of Reasonable Revitalization Pursuant to Section 202 of the HUD FY1996 HUD Appropriations Act

1. Yes No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name: KLAM ATH HOUSING AUTHORITY PUBLIC HOUSING	
1b. Development (project) number: OR017589	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)	
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	

4. Status of Conversion Plan (select the statement that best describes the current status)

Conversion Plan in development

Conversion Plan submitted to HUD on: (DD/MM/YYYY)

Conversion Plan approved by HUD on: (DD/MM /YYYY)

Activities pursuant to HUD - approved Conversion Plan underway

5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)

Units addressed in a pending or approved demolition application (date submitted or approved:)

Units addressed in a pending or approved HOPEVI demolition application (date submitted or approved:)

Units addressed in a pending or approved HOPEVI Revitalization Plan (date submitted or approved:)

Requirements no longer applicable: vacancy rates are less than 10 percent

Requirements no longer applicable: site now has less than 300 units

Other: (describe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

Component 10(B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? One: Project #OR017; 57 units in 9 scattered sites in Klamath Falls.
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled Developments not general occupancy projects)? None
- c. How many Assessments were conducted for the PHA's covered developments? One: For all 9 sites.
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:
- | Development Name | Number of Units |
|--|----------------------|
| Klamath Housing Authority Public Housing | 59 in Project #OR017 |
- e. If the PHA has not completed the Required Initial Assessment, describe the Status of the assessments.

C.ReservedforConversionspursuanttoSection33oftheU.S.HousingActof 1937

11.HomeownershipProgramsAdministeredbythePHA

[24CFRPart903.79(k)]

A.PublicHousing

ExemptionsfromComponent11A:Section8onlyPHAsa renotrequiredtocomplete11A.

1. Yes No: DoesthePHAadministeranyhomeownershipprograms administeredbythePHAunderanapprovedsection5(h) homeownershipprogram(42U.S.C.1437c(h)),oranapproved HOPE Iprogram(42U .S.C.1437aaa)orhasthePHAappliedor plantoapplytoadministeranyhomeownershipprogramsunder section5(h),theHOPEIprogram,orsection32oftheU.S. HousingActof1937(42U.S.C.1437z -4).(If“No”,skipto component11B;if“yes”,complet eoneactivitydescriptionfor eachapplicableprogram/plan,unlesseligibletocompletea streamlinedsubmissiondueto **smallPHA** or **highperforming PHA**status.PHAscompletingstreamlinedsubmissionsmay skiptocomponent11B.)

2.ActivityDescription

Yes No: HasthePHAprovidedallrequiredactivitydescription informationforthiscomponentinthe **optional**PublicHousing AssetManagementTable?(If“yes”,skiptocomponent12.If “No”,completetheActivityDe scriptiontablebelow.)

PublicHousingHomeownershipActivityDescription (Completeoneforeachdevelopmentaffected)	
1a.Developmentname:	
1b.Development(project)number:	
2.FederalProgramauthority:	
<input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h) <input type="checkbox"/> TurnkeyIII <input type="checkbox"/> Section32oftheUSHAof1937(effective10/1/99)	
3.Applicationstatus:(selectone)	
<input type="checkbox"/> Approved;includedinthePHA’sHomeownershipPlan/Program <input type="checkbox"/> Submitted,pe ndingapproval <input type="checkbox"/> Plannedapplication	

4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)
5. Number of units affected:
6. Coverage of action: (select one)
<input type="checkbox"/> Part of the development
<input type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

Yes No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- 25 or fewer participants
- 26- 50 participants
- 51 to 100 participants
- more than 100 participants

b. PHA -established eligibility criteria

Yes No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

12. PHA Community Service and Self -sufficiency Programs

[24 CFR Part 903.79(1)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8 -Only PHAs are not required to complete sub -component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

Yes No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target support services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

*KHA HAS A VERY GOOD WORKING ARRANGEMENT WITH BOTH AGENCIES

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination effort between the PHA and TANF agency (select all that apply)

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)
- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
- Joint administration of other demonstration program
- Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing home ownership option participation
- Preference/eligibility for section 8 home ownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

Yes No: Does the PHA coordinate, promote or provide any program to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self

Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office/ PH A main office/ other provider name)	Eligibility (public housing or section 8 participants or both)
KHASELFSUFFICIENCY FOR SECTION 8 & PH	50	ASSISTED CLIENTS	PH A MAIN OFFICE	BOTH
KHA - HEADSTART	CLASS ROOM	DONATE BLDG & LAND	HS	BOTH

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	Voluntary Target: 10	12/10/01: 3
Section 8	Voluntary Target: 40	12/10/01: 12

b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plan to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:
WE HAVENOMINIMUMSIZEREQUIREMENT

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- X Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- X Informing residents of new policy on admission and reexamination
- X Actively notifying residents of new policy at times in addition to admission and reexamination.
- X Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- X Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

X Community Service Requirement policy has been incorporated into KHA Public Housing Policy and eligible residents are enrolled and monitored.

13. PHA Safety and Crime Prevention Measures

[24CFR Part 903.79(m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High performing and small PHAs that are participating in PHDEP and are submitting a PHDEPP plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents

(select all that apply)

- High incidence of violent and/or drug -related crime in some or all of the PHA's developments
- High incidence of violent and/or drug -related crime in the area surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower -level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug -related crime
- Other (describe below)

2. What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports

- Policereports
- Demonstrable,quantifiablesuccesswithpreviousorongoinganticrime/anti drugprograms
- Other(describewhatbelow)

3.Whichdevelopmentsaremostaffected?(listbelow)

B.CrimeandDrugPreventionactivitiesthePHAhasundertakenorplansto undertakeinthenextPHAfiscalyear

1.ListthecrimepreventionactivitiesthePHAhasundertakenorplanstoundertake: (selectallthatapply)

- Contractingwithoutsideand/orresidentorganizationsforthe provisionof crime-and/or drug -preventionactivities
- CrimePreventionThroughEnvironmentalDesign
- Activities targetedtoat -riskyouth,adults,orseniors
- VolunteerResidentPatrol/BlockWatchersProgram
- X Other(describewhatbelow)

AGREEMENTWITHPOLICETOCONTACTHAWHENTHEREIS ANINCIDENTATAPHSITE.

2.Whichdevelopmentsaremostaffected?(listbelow)

AllSites

C.CoordinationbetweenPHAandthepolice

1.DescribethecoordinationbetweenthePHAandtheappropriatepoliceprecinctsfor carryingoutcrimepreventionmeasuresandactivities:(selectallthatapply)

- Policeinvolvementindevelopment,implementation,and/orongoing evaluationofdrug -eliminationplan
- X Policeprovidecrimedatatohousingauthoritystaffforanalysisandaction
- Policehaveestablishedaphysicalpresenceonhousing authorityproperty(e.g., communitypolicingoffice,officerinresidence)
- Policeregularlytestifyinandotherwisesupportevictioncases
- PoliceregularlymeetwiththePHAmangementandresidents
- X AgreementbetweenPH Aandlocalawenforcementagencyforprovisionof above-baselinelawenforcementservices
- X Otheractivities(listbelow)

ALLOWPOLICETOUSEVACANTUNITFORSURVEILLANCE

2.Whichdevelopmentsaremostaffected?(listbelow)

AllSites

D. AdditionalinformationasrequiredbyPHDEP/PHDEPPlan

PHAseligibleforFY2000PHDEPfundsmustprovideaPHDEPPlanmeetingspecifiedrequirements priortoreceiptofPHDEPfunds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: _____)

14. RESERVED FOR PET POLICY

[24CFR Part 903.79(n)]

LOW RENT PUBLIC HOUSING PET POLICY

The purpose of the agreement is to allow handicapped, elderly or disabled tenants to benefit from the pleasure of common household pet ownership, while at the same time ensuring that pet ownership does not interfere with the rights of all tenants to clean, quiet, and safe surroundings. Tenants shall abide by all the regulations of the Klamath Housing Authority, respecting the care and control of such animals.

This Pet Policy applies only to public housing that is owned and managed by The Klamath Housing Authority. An exception to this policy may be granted if Certification is provided, in writing, that the tenant is handicapped, elderly, disabled, or the animal has been trained to assist persons with disabilities.

15. Civil Rights Certifications

[24CFR Part 903.79(o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24CFR Part 903.79(p)]

1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
2. Yes No: Was the most recent fiscal audit submitted to HUD?
3. Yes No: Were there any findings as the result of that audit?
4. Yes No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? _____
5. Yes No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

17.PHA Asset Management

[24CFR Part 903.79(q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

PREVENTATIVE MAINTENANCE; MODERNIZATION

2. What types of asset management activities will the PHA undertake? (select all that apply)

- Not applicable
 Private management
 Development-based accounting
 Comprehensive stock assessment
 Other: (list below)

3. Yes No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24CFR Part 903.79(r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comment was received, the PHA **MUST** select one)

- Attached as Attachment (Filename)
 Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

- Considered comments, but determined that no changes to the PHA Plan were necessary.
 The PHA changed portions of the PHA Plan in response to comments
List changes below:

All rental assisted clients, PHA and Section 8 were notified of the opportunity to serve or the RAB or comment on the Plan. DUE TO LACK OF INTEREST AND HIGH TURNOVER IN PH UNITS, NO ONE CAME FORWARD. SEE ATTACHMENT "A"

B. Description of Election process for Residents on the PHA Board

- 1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
- 2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process SEE ATTACHMENT "B"

- a. Nomination of candidates for place on the ballot: (select all that apply)
- Candidates were nominated by resident and assisted family organizations
 - Candidates could be nominated by any adult recipient of PHA assistance
 - Self-nomination: Candidates registered with the PHA and requested a place on ballot
 - X Other: (describe) COUNTY COMMISSIONERS APPOINTED A PH RESIDENT THROUGH THE SAME APPLICATION PROCESS FOR ALL BOARD APPOINTMENTS.

- b. Eligible candidates: (select one)
- Any recipient of PHA assistance
 - Any head of household receiving PHA assistance
 - Any adult recipient of PHA assistance
 - Any adult member of a resident or assisted family organization
 - Other (list)

- c. Eligible voters: (select all that apply)
- All adult recipients of PHA assistance (public housing and section 8 tenant based assistance)
 - Representatives of all PHA resident and assisted family organizations
 - Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: CITY OF KLAMATH FALLS, K LAMATH COUNTY, LAKE COUNTY.

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- X The PHA has based its statement of needs of families in the jurisdiction on the need expressed in the Consolidated Plan/s.
- X The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- X The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- X Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

NONE

D. Other Information Required by HUD

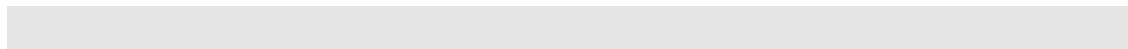
Substantial Deviation; Significant Amendment or Modification

Substantial Deviation (5 year Plan: Mission, Strategic Goals)

Any major change will include public and residential tenants' impact.

Significant Amendment or Modification (1 year plan: policies or modernization)

1. Changes of rent by 10%
2. Addition of non-emergency work items over \$75,000.
3. Change in non-emergency work items over \$75,000.
4. All other concerns as per HUD's definition.



Attachments

Use this section to provide any additional attachments referenced in the Plans.

Required Attachment __ B__: Resident Member on the PHA Governing Board

1. X Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: LARRY SELBY

B. How was the resident board member selected: (select one)?

Elected
X Appointed

C. The term of appointment is (include the date term expires): 9/28/01 TO 8/1/03

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full-time basis
- the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
- Other (explain):

B. Date of next term expiration of governing board member: 8/1/02

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

KLAMATH COUNTY BOARD OF COMMISSIONERS:

JOHNELLIOTT
ALSWITZER
STEVE WEST

Required Attachment A : Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

LETTERS WERE SENT TO ALL PUBLIC HOUSING AND ALL SECTION 8 PARTICIPANTS. THERE WERE NO RESPONSES OR INDICATIONS OF INTEREST, NOR DID ANYONE TAKE THE OPPORTUNITY TO COMMENT ON THE KHAPLAN, EITHER 1 YEAR OR 5 YEAR PLAN.

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program : OR16P01750101 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
---	---	--

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/01
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	14,500			
3	1408 Management Improvements SOFT COSTS HARDCOSTS	10,849 12,000	0		
4	1410 Administration	16,121			
5	1411 Audit	500			
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	0	40,000		
10	1460 Dwelling Structures	83,242	9,242		
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	36,000	70,000		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 - 19)	161,212	161,212		
21	Amount of line 20 Related to LBP Activities				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program : OR16P01750101 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
---	---	--

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/01
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: KLAMATH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: OR16P01750101 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
OR017	Operations	1406		14,500				
	Management Improvement	1408		10,849				
	Administration, consultant, surveys	1410		16,121				
	Audit	1411		500				
	Site Improvement -Total	1450			(40,000)			
	Sprinklers system		9 sites		13,000			
	Tree trimming		9 sites		2,000			
	Fencing		5 sites		5,000			
	Landscaping		9 sites		20,000			
	Dwelling Structure (water under bldgs)	1460	3 bldgs	83,242	9,242			
	Non Dwelling Equipment -Total	1475		36,000	(70,000)			
	Computer hardware				36,000			
	Vehicle purchase (truck)				17,000			
	Vehicle purchase (auto)				17,000			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program#: OR16P01750101 Capital Fund Program Replacement Housing Factor#:	Federal FY of Grant: 2001
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date) 12/31/02			All Funds Expended (Quarter Ending Date) 6/30/04			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
OR017	12/31/02			6/30/04			
1406	14,500						
1408	10,849						
1410	16,121						
1411	500						
1460	9,242						
1475	70,000						
1450	40,000						
4/16/02	161,212						

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number OR016P01750100 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost 6/30/01	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	14,500	13,876	13,876	13,876
3	1408 Management Improvements	0	2,496	2,496	2,496
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	40,500	63,455	63,455	63,455
10	1460 Dwelling Structures	0	73,306	73,306	73,306
11	1465.1 Dwelling Equipment — Nonexpendable	103,063	0		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	0	4,930	4,930	4,930
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	158,063		158,063	158,063
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHAName: KLAMATH HOUSING AUTHORITY		Grant Type and Number: OR016P01750100 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input checked="" type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost 6/30/01
24	Amount of line 20 Related to Energy Conservation Measures	80,000		71,546
				71,546

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: KLAMATH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program#: OR16P01750100 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
OR017	Operations	1406	Office	14,500	13,876	13,876	13,876	done
	Management Improvements	1408		0	2,496	2,496	2,496	
	Site Improvements	1450		40,500	63,455			
	asphalt repair		9 sites			21,612	21,612	
	Tree trimming & removal		5 sites	0		5,380	5,380	
	Paint & repair all exteriors		All			36,463	36,463	
	Dwelling Structure	1460		0	73,306			
	Water under house		3 buildings	0		800	800	
	Water saver toilet change out		all			8,583	8,583	
	Building window change out		All			62,963	62,963	
	Office insulation		office			960	960	
	Non dwelling equipment	1475		0	4,930			
	Fire Dept key box		1 site			438	438	
	Law tractor		All			3,000	3,000	
	PH truck upgrade		all			1,492	1,492	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHAName: KLAMATH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program#: OR16P01750100 Capital Fund Program Replacement Housing Factor#:					Federal FY of Grant: 2000
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date) 6/30/01			All Funds Expended (Quarter Ending Date) 12/31/01			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
OR017	14,500	13,876		12/31/01		12/31/01	
	0	2,496					
	40,500	63,455					
	0	73,306					NOCHANGES
	103,063	0					
	0	4,930					

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number OR016P01750100 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 6/01 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	6/30/01 Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	14,500	13,876	13,876	
3	1408 Management Improvements	0	2,496	2,496	
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	40,500	63,455	63,455	
10	1460 Dwelling Structures	0	73,306	73,306	36,463
11	1465.1 Dwelling Equipment — Nonexpendable	103,063	0		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	0	4,930	4,930	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	158,063		158,063	
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number OR016P01750100 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 6/01 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost 6/30/01	
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures	80,000		71,546	71,546

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: KLAMATH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program#: OR16P01750100 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
OR017	Operations	1406		14,500	13,386	13,386		
	Management Improvements	1408		0	2,496	2,496		
	Site Improvements	1450		40,500	63,455	63,455		
	Water under house, asphalt main							
	Dwelling structure	1460		0	73,306	73,306	36,463	
	Replace windows, water - save toilets, Repair/paint exterior trim/dwell/sheds							
	Non dwelling equipment	1475		0	4,930	4,930		
	lawn tractor, lock box							
	Dwelling equipment - non expendable	1465.1		103,063	0			
						158,063		

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor(CFP/CFPRHF)
Part III: Implementation Schedule

PHAName: KLAMATH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program#: OR16P01750100 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date) 6/30/01			All Funds Expended (Quarter Ending Date) 12/31/01			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
OR017	14,500	13,876		12/31/01		12/31/01	
	0	2,496					
	40,500	63,455					
	0	73,306					NOCHANGES
	103,063	0					
	0	4,930					

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program : OR16P01750101 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no :1)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	14,500			
3	1408 Management Improvements SOFT COSTS HARDCOSTS	10,849 12,000	0		
4	1410 Administration	16,121			
5	1411 Audit	500			
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	0	40,000		
10	1460 Dwelling Structures	83,242	9,242		
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non Dwelling Structures				
13	1475 Non Dwelling Equipment	36,000	70,000		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	161,212	161,212		
21	Amount of line 20 Related to LBP Activities				

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program : OR16P01750101 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input checked="" type="checkbox"/> Revised Annual Statement (revision no :1)
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Final Performance and Evaluation Report	

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: KLAMATH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: OR16P01750101 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
OR017	Operations	1406		14,500				
	Management Improvement	1408		10,849				
	Administration, consultant, surveys	1410		16,121				
	Audit	1411		500				
	Site Improvement -Total	1450			(40,000)			
	Sprinkler system		9 sites		13,000			
	Tree trimming		9 sites		2,000			
	Fencing		5 sites		5,000			
	Landscaping		9 sites		20,000			
	Dwelling Structure (water under bldgs)	1460	3 bldgs	83,242	9,242			
	Non Dwelling Equipment -Total	1475		36,000	(70,000)			
	Computer hardware				36,000			
	Vehicle purchase (truck)				17,000			
	Vehicle purchase (auto)				17,000			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program#: OR16P01750101 Capital Fund Program Replacement Housing Factor#:	Federal FY of Grant: 2001
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date) 12/31/02			All Funds Expended (Quarter Ending Date) 6/30/04			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
OR017	12/31/02			6/30/04			
1406	14,500						
1408	10,849						
1410	16,121						
1411	500						
1460	9,242						
1475	70,000						
1450	40,000						
4/16/02	161,212						

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: 16P01750102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: <div style="text-align: center; background-color: yellow;">2002</div>
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Original Annual Statement

 Reserve for Disasters/Emergencies

 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/02

 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	17,000			
3	1408 Management Improvements: soft costs	20,000			
4	1410 Administration	17,000			
5	1411 Au dit	500			
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	115,500			
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	170,000			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: KLAMATH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program: 16P01750102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2002
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/02		<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures	10,000		

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: KLAMATH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program#: OR16P01750102 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
OR017	Operations, consultant, Management improvement	1406		17,000				
	Administration	1408		20,000				
	Audit	1410		17,000				
		1411		500				
	Dwelling Structures -Total	1460		(115,500)				
	Cabinets, kitchen & bath			80,800				
	Sinks, kitchen & bath			4,720				
	Faucets, kitchen & bath			7,580				
	Countertops, kitchen & bath			16,900				
	Insulation			5,500				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRH F)
Part III: Implementation Schedule

PHAName: KLAMATH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program#: OR16P01750102 Capital Fund Program Replacement Housing Factor#:	Federal FY of Grant: 2002
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date) 6/30/2003			All Funds Expended (Quarter Ending Date) 6/30/2005			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
OR017							
	17,000						
	20,000						
	17,000						
	500						
	115,000						
TOTAL	170,000						

