

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

---

# PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004  
Annual Plan for Fiscal Year 2003

**NOTE: THIS PHA PLAN TEMPLATE (HUD 50075) IS TO BE COMPLETED IN  
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

## PHA Plan Agency Identification

**PHAName:** Housing Authority of Owensboro, Ky.

**PHANumber:** Ky009

**PHAFiscalYearBeginning:** 07/01/2003

### 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 2000 -2004**  
[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.
- The PHA's mission is: to continue to promote and provide adequate and affordable housing, suitable living environments, and economic opportunity, free from discrimination, all as authorized by applicable law.

**B.Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs 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 PHA scores achieved.) PHAs 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.**

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities: Study feasibility of partnering with the eligible entity to secure additional funds available (private partnership), in addition to studying obtaining additional public funds for development, expansion, or maintenance of low income housing units for populations identified in appropriate studies as being in need, including assisted living units or services. Depending on results of studies, proceed with achieving development, expansion, or maintenance goals and serving identified populations by developing plans to achieve the goals.

- Acquire or build units or developments: consider beginning development process for assisted living units.
- Other (list below)

PHA Goal: Improve the quality of assisted housing

Objectives:

- Improve public housing management: (PHAS score)
- Improve voucher management: (SEMAP score)
- Increase customer satisfaction:
- Concentrate on effort to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units: modernize/renovate per existing comprehensive grant and capital fund program plans and budgets.
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing: replace PHA units previously demolished; within 5 year timeframe or extended time provided by regulation, depending on need and funding; perhaps combine with acquisition of HUD site previously referenced; perhaps replace units with assisted living units.
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

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

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

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 buildings for particular resident groups (elderly, persons with disabilities)
- Other: Continue HAO designed FSS programs as funded, continue other supportive services programs, including ROSS Elderly and disabled services grant.

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

- PHA Goal: Promote self-sufficiency and asset development of assisted households
  - Objectives:
    - Increase the number and percentage of employed persons in assisted families:
    - Provide or attract supportive services to improve assistance recipients' employability:
    - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
    - Other: (list below)

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

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
  - Objectives:
    - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:
    - 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:
    - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of units size required :
    - Other: Continue with our existing programs.

**Other PHA Goals and Objectives: (list below)**

**AnnualPHAPlan**  
**PHAFiscalYear2003**  
 [24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**StreamlinedPlan:**

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

**TroubledAgencyPlan**

**ii. ExecutiveSummaryofthe AnnualPHAPlan**

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiatives anddiscretionarypolicies,thePHAhasincludedintheAnnualPlan.

**iii. AnnualPlanTableofContents**

[24CFRPart903.79(r)]

ProvideatableofcontentsfortheAnnualPlan ,includingattachments,andalistofsupporting documentsavailableforpublicinspection .

**TableofContents**

	<u>Page#</u>
<b>AnnualPlan</b>	
i. ExecutiveSummary	NA
ii. TableofContents	
1. HousingNeeds	4
2. FinancialResources	11
3. PoliciesonEligibility,SelectionandAdmissions	12
4. RentDeterminationPolicies	22
5. OperationsandManagementPolicies	Exempt
6. GrievanceProcedures	Exempt
7. CapitalImprovementNeeds	28
8. DemolitionandDisposition	30
9. DesignationofHousing	31
10. ConversionsofPublicHousing	33
11. Homeownership	34
12. CommunityServicePrograms	Exempt

13. Crime and Safety	Exempt
14. Pets (Exempt, Summary only)	41, 45
15. Civil Rights Certifications (included with PHA Plan Certifications)	
16. Audit	41
17. Asset Management	Exempt
18. Other Information	42

**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
- FY2000 Capital Fund Program Annual Statement
- 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
- FY2000 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other: FY2000, 2001, 2002 Performance and Evaluation Reports

**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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
x	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
x	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
x	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 jurisdictionsto implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	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
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certification 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
X	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
X	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
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
x	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
x	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
x	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
x	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs



<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
x	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
NA	Approved HOPE VI applications 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
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
x	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	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
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
NA	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
x	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
x	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
NA	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
x	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 results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
x	Pet policy summary, community service policy summary, resident satisfaction survey follow up plan; resident advisory board comments	Annual Plan

## **1. Statement of Housing Needs**

[24 CFR 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/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.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income ≤ 30% of AMI	2728	5	NA	NA	NA	NA	NA
Income > 30% but ≤ 50% of AMI	1433	5	NA	NA	NA	NA	NA
Income > 50% but < 80% of AMI	1585	5	NA	NA	NA	NA	NA
Elderly	1552	5	NA	NA	NA	NA	NA
Families with Disabilities	843	5	NA	NA	NA	NA	NA
Race/Ethnicity	1248B	5	NA	NA	NA	NA	NA
Race/Ethnicity	<1% H	5	NA	NA	NA	NA	NA
Race/Ethnicity							
Race/Ethnicity							

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.)

- 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: 1995 Consolidated Plan, City of Owensboro incorporating data from CHAS data book for KY, US HUD 6/1993.

## B. Housing Need 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.** PHA may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Need of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" 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	96		611
Extremely low income <= 30% AMI	73	76%	
Very low income (> 30% but <= 50% AMI)	21	22%	
Low income (> 50% but < 80% AMI)	2	2%	
Families with children	44	46%	
Elderly families	11	11%	
Families with Disabilities	38	40%	
WH	85	89%	
BL	11	11%	
HI	0	0%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	52	54%	
2BR	23	24%	
3BR	21	22%	

Housing Needs of Families on the Waiting List			
4BR	0	0%	
5BR	NA	NA	
5+BR	NA	NA	
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			

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	385		463
Extremely low income <= 30% AMI	268	70%	
Very low income (> 30% but <= 50% AMI)	117	30%	
Low income (> 50% but < 80% AMI)	0	0	
Families with children	231	60%	
Elderly families	20	5%	
Families with Disabilities	80	30%	
WH	332	86%	
BL	52	14%	
AS	0	0%	
HI	1	0%	
Characteristics by Bedroom Size (Public Housing)			

Housing Needs of Families on the Waiting List			
Only)			
1BR			
2BR			
3BR			
4BR			
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 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

- Employ effective maintenance and management policies to minimize the number of public housing units off -line
- Reduce turnover time for vacated public housing units
- 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
- Maintain or increase section 8 lease -up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required

- Maintain or increase section 8 lease -uprates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease -uprates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other: Continue application of payment standards which encourage families to rent and owner to participate while continuing effective screening policies.

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

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed -finance housing
- Pursue housing resources other than public housing or Section 8 tenant -based assistance.
- Other: continue to monitor need for low income housing consider private partnerships

**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

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- 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: continue to maintain rent structures at a rate truly affordable to low and very low income families and which support and encourage work.)

**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: Maintain current policies and rent structures which support and encourage work.

**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
- Apply for special -purpose voucher targeted to the elderly, should they become available (depending on meaning of special purpose voucher).
- 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
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special -purpose voucher targeted to families with disabilities, should they become available, depending on meaning of special purpose voucher.
- 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

- 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

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- 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)**

**Need: Assisted Living:**

**Strategy: Provide Assisted Living**

- X Begin process of assessing need,
- X Formulate response to need, including development of assisted living facility and/or programs.

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[24CFR 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 supportives services, Section 8 tenant-based assistance, Section 8 supportives services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2003 grants)</b>		
a) Public Housing Operating Fund	1036039	
b) Public Housing Capital Fund	1135208	
c) HOPE VI Revitalization	0	



<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
d) HOPEVI Demolition	0	
e) Annual Contributions for Section 8 Tenant -Based Assistance	958705	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0	
g) Resident Opportunity and Self - Sufficiency Grants	0	
h) Community Development Block Grant	0	
i) HOME	0	
Other Federal Grants (list below)	0	
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
PHA Reserves	1245211	
Section 8 Fund	256560	
<b>3. Public Housing Dwelling Rental Income</b>	993570	
Excess Utilities	62530	
<b>4. Other income (list below)</b>		
Maintenance charges, third party rents, etc.	75000	
Interest	15000	
Non dwelling	1800	
<b>4. Non -federal sources (list below)</b>		
<b>Total resources</b>	5779623	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

## **A. Public Housing**

Exemptions: PHA that do not administer public housing are not required to complete subcomponent 3A.

### **(1) Eligibility**

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: Upon application and prior to lease up. This may vary depending on length of waiting list.

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)

c.  Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC authorized source)

### **(2) Waiting List Organization**

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists for two elderly designated sites (HUD approved designation) only.
- Other (describe)

b. Where may interested persons apply for admission to public housing?

- PHA main administrative office
- PHA development site management office
- Other: home or other place if necessary; mail.

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, but only for elderly designated sites. Elderly may place their names on the list for the two designated sites, or the family sites.

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 lists simultaneously? If yes, how many lists? Elderly may be on two lists — elderly designated and family.

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
- Two
- Three or More (offered any available unit of appropriate size, got to bottom if reject for other than good cause).

b.  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  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admission 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
- Overhoused
- Underhoused
- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)

c. Preferences

1.  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
- 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
- Other preference(s) (list below)

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:**

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

**Other preferences (select all that apply)**

- 3  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
- 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
- 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)

- The PHA - resident lease
- The PHA's Admissions and (Continued) Occupancy policy

- PHA briefing seminars or written materials
- Other source (list)

b. How often must residents notify the PHA of changes in family composition?

(select all that apply)

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

**(6) Deconcentration and Income Mixing    *See required Attachment***

a.  Yes     No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

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 income mixing 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 development targeted 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)

- 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)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

## B. Section 8

Exemptions: PHAs 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)

- 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): Rental history with other assisted living provider
- Other (list below)

b.  Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d.  Yes  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  
 Other: Rental history with HAO.

### **(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)

- 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 -based assistance? (select all that apply)

- PHA main administrative office  
 Other: Home or other place if necessary; mail.

### **(3) Search Time**

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

If yes, state circumstances below: If applicant cannot find unit, or if other circumstances interfere with lease up of unit in 60 day limit.

### **(4) Admissions Preferences**

a. Income targeting

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

b. Preferences



1.  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
- 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): Families not living in subsidized housing.  
Families with incomes less than 30% of area median

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

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

Homelessness  
Highrentburden

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
- 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 preferences:
  - 2. Families not residing in subsidized housing
  - 3. Families with incomes less than 30% of area median

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

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

5. If the PHA plan 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
- 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)

- The Section 8 Administrative Plan
- Briefing sessions and written materials

Other(listbelow)

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

Through published notices

Other(listbelow)

#### **4.PHA Rent Determination Policies**

[24CFR Part 903.79(d)]

##### **A.Public Housing**

Exemptions: PHAs 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)

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, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub -component (2))

---or---

The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

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 : **waiver to income based rent available to all families with hardship**

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?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below: 20% earned income exclusion and any other HUD required income exclusions or disregards.

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: no rent increase unless 100% or annual re-exam.

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 circumstance s 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

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 space cost that best describes how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95<sup>th</sup> 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 (however, interim change must result in 100% increase in rent before rent is recalculated up prior to annual reexam; decreases effective month following report).
- Anytime a family experiences an income increase above a threshold amount or percentage.
- Other: when family composition changes.

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.)

- Thesection8rentreasonablenessstudyofcomparablehousing
- Surveyofrentslistedinlocalnewspaper
- Surveyofsimilarunassistedunitsintheneighborhood
- Other:

**B. Section 8 Tenant -Based Assistance**

Exemptions: PHA 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 (vouchers, 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
- 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)

- FMRs are not adequate to ensure success among assisted families in the PHA’s segment of the FMR area
- Reflects market or submarket

- To increase housing options for families
- Other (list below)

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

- 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)

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

**(2) Minimum Rent**

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

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

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

**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.
- A brief description of the management structure and organization of the PHA follows

**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.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing		
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs (list individually)		

**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)

(2) Section 8 Management: (list below)

**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 24CFR 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  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)

- 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: PHAs 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:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) Capital Fund Program Annual Statement

-or-

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

### **(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.  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) Capital Fund Program 5 Year Action Plan.

-or-

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

## **B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)**

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI 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 Plans 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 HOPEVI 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:

- 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: Perhaps assisted living or renewal or negotiations with HUD for acquisition of site. No dollar amount committed.

## **8. Demolition and Disposition**

[24CFR 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.)

<b>Demolition/Disposition Activity Description</b>	
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: (DD/MM/YY)	
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**

[24 CFR 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 a 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.

<b>Designation of Public Housing Activity Description</b>	
1a. Development name: Baker Drive/Rolling Heights Addition.	
1b. Development (project) number: KY009 -5	
2. Designation type:	
Occupancy by only the elderly	<input checked="" 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 checked="" type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>12/06/2000</u>	
5. If approved, will this designation constitute a (select one)	
<input checked="" type="checkbox"/> New Designation Plan	
<input type="checkbox"/> Revision of a previously -approved Designation Plan?	
6. Number of units affected: 30	
7. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input checked="" type="checkbox"/> Total development	

<b>Designation of Public Housing Activity Description</b>	
1a. Development name: Adams Village	
1b. Development (project) number: KY009 -6	
2. Designation type:	
Occupancy by only the elderly	<input checked="" 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 checked="" type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>12/06/2000</u>	
5. If approved, will this designation constitute a (select one)	

<input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously -approved Designation Plan?
6. Number of units affected: 76 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" 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 FY 19 96 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete 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.

<b>Conversion of Public Housing Activity Description</b>
1a. Development name: 1b. Development (project) number:
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 Plans 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**

- a. How many of the PHA's developments are subject to the Required Initial Assessment: 4.
- 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?): 2
- c. How many Assessments were conducted for the PHA's covered developments?: 1 each.
- d. Identify PHA developments that may be appropriate for conversion based upon the Required Initial Assessments: None.

### **C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937**

## **11. Homeownership Programs Administered by the PHA**

[24CFR Part 903.79(k)]

### **A. Public Housing**

1.  Yes  No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z -4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

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 12. If "No", complete the Activity Description table below.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
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 24CFR 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**

[24CFR 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 supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed?

DD/MM/YY

2. Other coordination efforts 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 homeownership option participation
- Preference/eligibility for section 8 homeownership 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/ PHA main office/ other provider name)	Eligibility (public housing or section 8 participants or both)

**(2) Family Self Sufficiency program/s**

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

- 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:

**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)

- Adopting appropriate changes to the PHA’s public housing rent determination policies and train staff to carry out those policies

- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- 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**

### **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 PHDEP 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 level 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
- Police reports

- Demonstrable, quantifiable success with previous or ongoing anti-crime/anti drug programs
- Other (describe below)

3. Which developments are most affected? (list below)

**B. Crime and Drug Prevention activities the PHA has undertaken or plan to undertake in the next PHA fiscal year**

1. List the crime prevention activities the PHA has undertaken or plan to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime-and/or drug -prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at -risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

2. Which developments are most affected? (list below)

**C. Coordination between PHA and the police**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

2. Which developments are most affected? (list below)

**D. Additional information as required by PHDEP/PHDEP Plan**

PHA eligible for FY2000 PHDEP funds must provide a PHDEP Plan meeting specific requirements prior to receipt of PHDEP funds.

- 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 FY2000 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_\_)

#### **14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

The HA O has adopted a pet policy which is part of its ACOP. See description under "Required Attachments" at end of Plan Document.

#### **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?

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**

[24 CFR 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 comments were received, the PHA **MUST** select one)

- Attached at Attachment (Filename)
- Provided below: The HAO held four meetings for residents regarding the plan. The previous plans, and the purposes of the plans were reviewed with those who attended. An inquiry regarding installation of decks or patios at 9-3 was made. This is not in the plan given the topography of the site, but may be considered in the future if a method to install them at all units can be devised. Residents inquired about a playground at the KY9-4 site. That will be installed outside of the plan process depending on funding. One resident at KY9-4 suggested remodeling the community room. The remodeling of the room is in the plan. A resident suggested construction of a laundromat. At this time, construction of new facilities is not financially feasible, but the HAO will remain open to consideration of this as a possibility. A question was raised regarding new stoves. Stoves are in the five year plan. The residents at KY9-6 were satisfied with the current plans for their site. Their concern for washer/dryer hookup has been previously noted in the planning process.

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:.

Other: (list below): Comments were received prior to the final preparation of the plan; some comments will be addressed outside the capital fund program.

### **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

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
- Other: (describe)

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.ConsolidatedPlanjurisdiction:Owensboro,Ky.

2.ThePHAhasstakenthefollowingstepstoensureconsistencyofthisPHAPlanwith theConsolidatedPlanforthejurisdiction:(selectallthatapply)

- ThePHAhasbaseditsstatementofneedsoffamiliesinthejurisdictiononthe needsexpressedintheConsolidatedPlan/s.
- ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
- ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan.
- ActivitiestobeundertakenbythePHAinthecomingyearareconsistentwith theinitiativescontainedintheConsolidatedPlan.(listbelow)
  
- Other:(listbelow)

4.TheConsolidatedPlanofthejurisdictionsthePHAPlanwiththefollowing actionsandcommitments:Bystrivingtoreducebarrierstoaffordablehousing andbyimprovingmarketabilityofhousingbyneighborhoodimprovements.

#### **D.OtherInformationRequiredbyHUD**

**SubstantialDeviationDefinition:** Asubstantialdeviationorsignificantamendment orsignificantmodificationisadiscretionarychangeintheplan(s)orpolicy(ies)ofthe HousingAuthoritythatfundamentallychangesthemission(s),goals(s),objectives(s), orplans(s)oftheagency,and whichrequiresformalapprovalbytheBoardof Commissioners.

#### **Component3,(6)DeconcentrationandIncomeMixing**

- a.  Yes  No: DoesthePHAhaveanygeneraloccupancy(family)public housingdevelopmentscoveredbythedeconcentrationrule?If no,thissectioniscomplete.Ifyes,continuetothenext question.
  
- b.  Yes  No: Doanyofthesecovereddevelopmentshaveaverageincomes aboveorbelow85%to115%oftheaverageincomes ofallsuch developments?Ifno,thissectioniscomplete.\*\*\*  
**\*\*\*\*NOTE:Thetemplatedoesnotreflectthenewrule whichprovidesthatifadevelopmenthasanaverageincome abovethe115%,butbelowthemedianincomeforavery lowincomefamily,thenthedevelopmentisnotcovered**

**development. Under the new rule, the HAO has no covered developments.**

If yes, list these developments as follows:

<b>Deconcentration Policy for Covered Developments</b>			
<b>Development Name :</b>	<b>Number of Units</b>	<b>Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]</b>	<b>Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]</b>

**Community Service:** The HAO has in place a community service policy, which it may revise, implementation of which will begin 7/1/03, unless other guidance is received from HUD, or if pending legislation to eliminate or suspend its application passes.

**Pet Policy:** The HAO has adopted a pet policy which allows one or more pets in certain apartments. Residents who have pets are subject to certain requirements, including payment of deposits, fees, compliance with local ordinances, spaying and neutering, size restrictions, requirements of keeping an animal fed, under control, clean up of animal waste, observing neighbor's right to peaceful enjoyment of the premises.

**Resident Board Member:** Board members are appointed by the mayor. A resident has not been appointed since there has not been a vacancy in the board. It is anticipated that a vacancy will occur as of April 4, 2003. The name of the appointing officer is: Hon. Waymond Morris, Mayor, City of Owensboro.

Resident Advisory Board Members:

Fong Maddox	Wendy Jackson	Jonell Modock
Debi McKannan	Billie Quisenberry	Rita Morton
Phillip Reynolds	Darlene Reynolds	Linda Kincaid
William Kincaid	Dorothy Carlock	Barbara Ward
Sally Hamilton		

Progress In Meeting Mission and Goals:

The HAO continues its capital fund work. It has completed one EDSS program and continues to offer supportive services to residents, including ROS grant opportunities. It has received and begun implementation of an Elderly Services grant. The HAO continues to provide housing according to fair housing requirements. The

HAO continues to maximize the number of units available by minimizing the number of units offline. The HAO maintains its rent structures at affordable rates, and encourages work by providing an earned income credit in addition to the mandatory disregard required by law. The HAO admissions policies remain stringent in terms of screening persons for eligibility and past history. In accordance with its original plan, the HAO has successfully had two of its sites designated as elderly only. The HAO has maintained its long-range capital fund program on schedule. It has let bids for planned work, and has completed other capital projects. Through its association with a developer of low income housing in cooperation with the City of Owensboro, the HAO has received the option to purchase low income units at the end of the original term in the event the occupants choose not to purchase the units. The HAO has begun investigation of assisted living services/units.

**Resident Satisfaction Survey Follow -Up Plan:** The HAO has a follow-up plan for the "Neighborhood Appearance" component of the RASS. The plan is focused on advising residents to communicate to the HAO if they see problems in the specific areas noted on the survey. The HAO does not know what specific physical locations were the subject of concern, therefore cannot address this issue with greater specificity.

Use this section to provide any additional information requested by HUD.





Attachments

**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHAName: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program Grant No: Ky36P00950103 Replacement Housing Factor Grant No: KY36R00950103		Federal FY of Grant: 2003	
<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: <input type="checkbox"/> 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	-0-			
2	1406 Operations	153,927			
3	1408 Management Improvements	110,000			
4	1410 Administration	95,000			
5	1411 Audit	3,000			
6	1415 Liquidated Damages	-0-			
7	1430 Fees and Costs	10,000			
8	1440 Site Acquisition	-0-			
9	1450 Site Improvement	60,000			
10	1460 Dwelling Structures	512,000			
11	1465.1 Dwelling Equipment — Nonexpendable	-0-			
12	1470 Nondwelling Structures	161,893			
13	1475 Nondwelling Equipment	-0-			
14	1485 Demolition	-0-			
15	1490 Replacement Reserve	-0-			
16	1492 Moving to Work Demonstration	-0-			
17	1495.1 Relocation Costs	-0-			

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

<b>PHAName:</b> HOUSINGAUTHORITYOFOWENSBORO	<b>Grant Type and Number</b> Capital Fund Program Grant No: Ky36P00950103 Replacement Housing Factor Grant No: KY36R00950103	<b>Federal FY of Grant:</b> 2003
---	--	-------------------------------------

**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	
		Original	Revised	Obligated	Expended
18	1499 Development Activities	29,388			
19	1501 Collateralization or Debt Service	-0-			
20	1502 Contingency	-0-			
21	Amount of Annual Grant: (sum of lines 2 - 20)	1,135,208			
22	Amount of line 21 Related to LBP Activities	-0-			
23	Amount of line 21 Related to Section 504 compliance	-0-			
24	Amount of line 21 Related to Security - Soft Costs	15,600			
25	Amount of Line 21 Related to Security - Hard Costs	-0-			
26	Amount of line 21 Related to Energy Conservation Measures	-0-	-0-		

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

PHAName: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program Grant No: KY36P00950103 Replacement Housing Factor Grant No: KY36P000950103				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Rolling Heights Ky9 -3	Landscaping of Parking Lot	1450		10,000				
	Continue Mini -Modin Units -Replace interior wood doors, kitchen cabinets, new VCT in bedrooms, kitchen, living room, new wood base, painting/repair of all existing trim, walls & ceilings, new range, hood, refrigerator, install washer/dryer hookups in units where there are none	1460	35	363,000				
	Construct addition of C. Martel Wightman Youth Facility, Boys & Girls Club unit, including a play pool/swimming pool	1470		161,893				
Nannie Locke Ky9 -4	Repair portion of parking lot, landscape, and add playground	1450		50,000				



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

PHAName: HOUSING AUTHORITY OF OWENSBORO		<b>Grant Type and Number</b> Capital Fund Program Grant No: KY36P00950103 Replacement Housing Factor Grant No: KY36P000950103				<b>Federal FY of Grant: 2003</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Adams Village Ky9 -6	Replace cabinets where needed, replace interior doors, install new tub surrounds in bathroom, replace carpet where needed, and install central air/heat in 0 bedrooms	1460		149,000				
PHAWIDE								
Fees and Costs	A/E Fees for various items of work	1430		10,000				
Management Improvements	Drug Elimination Program, Boys Club, Girls, Inc. Latch Key Program, Off Duty Patrol	1408		95,000				
	High School Employment/Resident Opportunities	1408		15,000				
Administration	Capital Fund Program Administrative Salaries/other expenses	1410		95,000				
Audit	Audit of Capital Fund Program	1411		3,000				
Operations		1406		153,927				



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

PHAName: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number Capital Fund Program No: Ky36P00950103 Replacement Housing Factor No:	Federal FY of Grant: 2003
---	---	---------------------------

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHAWIDE	03/30/05			09/30/06			

Capital Fund Program Five - Year Action Plan

Part I: Summary

PHAName Housing Authority of Owensboro		2161 E. 19 <sup>th</sup> Street, Owensboro, Ky. 42303			<input checked="" type="checkbox"/> <b>Original 5 - Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 10/1/04 PHAFY: 7/1/05	Work Statement for Year 3 FFY Grant: 10/1/05 PHAFY: 7/1/06	Work Statement for Year 4 FFY Grant: 10/1/06 PHAFY: 7/1/07	Work Statement for Year 5 FFY Grant: 10/1/07 PHAFY: 7/1/08	
	Annual Statement					
Harry Smith Homes KY9 -1		Noworkplanned	Noworkplanned	Noworkplanned	Noworkplanned	
PG Walker Apts KY 9-2		Noworkplanned	Noworkplanned	Noworkplanned	Noworkplanned	
Rolling Heights Ky9 -3		\$297,393	\$635,820	\$297,393	NoworkPlanned	
Nannie Locke Homes Ky9 -4		Noworkplanned	Noworkplanned	Noworkplanned	Noworkplanned	
Baker Drive KY9 -5		\$140,000	Noworkplanned	Noworkplanned	Noworkplanned	
Adams Village Ky9 -6		\$358,427	Noworkplanned	Noworkplanned	Noworkplanned	
PHA Wide Operations		\$310,000	\$340,000 \$130,000	\$808,427	\$1,005,820 \$100,000	
CFP Funds for 5 - year planning		\$1,105,820	\$1,105,820	\$1,105,820	\$1,105,820	
Replacement Housing Factor Funds		\$29,388	\$29,388	\$29,388	\$29,388	

CapitalFundProgramFive -YearActionPlan

**PartII:SupportingPages —WorkActivities**

Activitiesfor Year1	ActivitiesforYear: <u>2</u> — FFYGrant: 10/1/04 PHAFY: 7/1/2005			ActivitiesforYear: <u>3</u> — FFYGrant: 10/1/05 PHAFY: 7/1/2006		
	<b>Development Name/Number</b>	<b>MajorWork Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>MajorWork Categories</b>	<b>EstimatedCost</b>
<b>SeeAnnual Statement</b>						
	RollingHeights9 -3	ContinueMini -Modin units –remodelingof theinterior	\$297,393	RollingHeights9 -3	ContinueMini -Modin units –remodelingof interior/Site Enhancements	\$635,820
	BakerDrive9 -5	Replacecabinetsand countertops,installnew range/rangehood,install newdoorsonhallway shelving(28units)	\$140,000			
	AdamsVillage9 -6	Replacecabinetswhere needed,replaceinterior wooddoors,installnew tubsurroundsin bathroom,replacecarpet whereneeded,and installcentralair/heatin “0”bedrooms	\$358,427			
	PHAWIDE	Management Improvements, Administration,Audit ofCFP	\$310,000	PHAWIDE	Management Improvements, Administration, AuditofCFP	\$340,000
				Operations		\$130,000
	<b>TotalCFPEstimatedCost</b>		\$1,105,820			\$1,105,820

CapitalFundProgramFive -YearActionPlan

**PartII:SupportingPages —WorkActivities**

ActivitiesforYear: __ 4__ FFYGrant:10/1/06 PHAFY:7/1/07			ActivitiesforYear__5__ FFYGrant:10/1/07 PHAFY:7/1/08		
Development Name/Number	MajorWork Categories	Estimated Cost	Development Name/Number	MajorWork Categories	EstimatedCost
RollingHeights9 -3	ContinueMini -Mod inunits – remodelingofthe interior/Site Enhancements	\$297,393	PHAWIDE	Building/Site Enhancementsas perArchitect’s recommendations	\$300,000
PHAWIDE	Management Improvements, Administration, AuditofCFP	\$340,000		Management Improvements, Administration, AuditofCFP	\$340,000
	Developmentof AssistedLivingUnits	\$468,427		Developmentof AssistedLiving Units	\$365,820
	Operations			Operations	\$100,000
TotalCFPEstimatedCost		\$1,105,820			\$1,105,820

**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHAName: HOUSING AUTHORITY OF WENSBORO</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: KY36P00950102 Replacement Housing Factor Grant No: KY36P00950102			<b>Federal FY of Grant:</b> 2002
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/31/03 <input type="checkbox"/> 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	-0-			-0-
2	1406 Operations	135,427	135,427	-0-	-0-
3	1408 Management Improvements	151,500	105,000	105,000	-0-
4	1410 Administration	103,500	85,000	85,000	1,266
5	1411 Audit	3,000		-0-	-0-
6	1415 Liquidated Damages	-0-			
7	1430 Fees and Costs	40,000		-0-	-0-
8	1440 Site Acquisition	-0-			
9	1450 Site Improvement	-0-			
10	1460 Dwelling Structures	325,500	370,000	-0-	-0-
11	1465.1 Dwelling Equipment — Nonexpendable	-0-			
12	1470 Non dwelling Structures	346,893	367,393	-0-	-0-
13	1475 Non dwelling Equipment	-0-			
14	1485 Demolition	-0-			
15	1490 Replacement Reserve	29,388		-0-	-0-
16	1492 Moving to Work Demonstration	-0-			
17	1495.1 Relocation Costs	-0-			
18	1499 Development Activities	-0-			

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

PHAName: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number Capital Fund Program Grant No: KY36P00950102 Replacement Housing Factor Grant No: KY36P00950102	Federal FY of Grant: 2002
---	---	------------------------------

Original Annual Statement  Reserve for Disasters/Emergencies  Revised Annual Statement (revision no: 1 )  
 Performance and Evaluation Report for Period Ending: 1/31/03  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
19	1501 Collateralization or Debt Service	-0-			
20	1502 Contingency	-0-	-0-		
21	Amount of Annual Grant: (sum of lines 2 -20)	1,135,208	1,135,208	190,000	1,266
22	Amount of line 21 Related to LBP Activities	-0-			
23	Amount of line 21 Related to Section 504 compliance	-0-			
24	Amount of line 21 Related to Security - Soft Costs	15,600			
25	Amount of Line 21 Related to Security - Hard Costs	-0-			
26	Amount of line 21 Related to Energy Conservation Measures	-0-			

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

PHAName: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number: Capital Fund Program Grant No: KY36P00950102 Replacement Housing Factor Grant No: KY36P00950102	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 Work
--	---	---------------	----------	----------------------	-------------------	----------------



				Original	Revised	Funds Obligated	Funds Expended	
PGWalkerApts KY9 -2	RemodelCommunityRoom	1470		-0-	7,500	-0-	-0-	Added
RollingHeights Ky9 -3	Replace/RepairSidewalks	1450		-0-	115,000	-0-	-0-	Added
	ContinueMini -ModinUnits -Replace interiorwooddoors,kitchencabinets, newVCTinbedrooms,kitchen,living room,newwoodbass,painting/repairof allexistingtrim,walls&ceilings,new range/rangehood,refrigerator,install washer/dryerhookupsinunitswhere therearenone	1460	30	325,500	370,000	-0-	-0-	NotBegun
	ConstructadditionofC.Martel WightmanYouthFacility,Boys&Girls clubunit,includingplaypool/swimming pool	1470		346,893	197,393	-0-	-0-	Notbegun
	UpdateAdministrativeOffice -paint, carpet,andvariousrepairs	1470		-0-	15,000	-0-	-0-	Added
NannieLocke HomesKY9 -4	RemodelCommunityRoom	1470		-0-	7,500	-0-	-0-	Added
AdamsVillage KY9 -6	HandicapAccessibleRamps - Addanaccessibleramptofrontof buildingswhereneeded	1460		-0-	25,000	-0-	-0-	Added
PHAWide								
Fees&Cos ts	A/EFeesforvariousitemsofwork	1430		40,000	40,000	-0-	-0-	Notbegun
Audit	AuditofCompGrant/CapitalFund	1411		3,000	3,000	-0-	-0-	NotBegun
Administration	CompGrantAdministrativeExpenses	1410		103,500	85,000	85,000	1,266	BeganJan03
Management Improvements	DirectorofResidentInitiatives	1408		54,500	-0-	-0-	-0-	Delete

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

PHAName: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number: Capital Fund Program Grant No: KY36P00950102 Replacement Housing Factor Grant No: KY36P00950102			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 Work
				Original	Revised	Funds Obligated	Funds Expended	
	Drug Elimination, Boys Club, Girls, Inc. Off duty patrol, etc.	1408		68,000	90,000	90,000	-0-	Began Jan 03
	High School Employment, Resident Opportunities	1408		29,000	15,000	15,000	-0-	Began Jan 03
Operations	PHA Operations	1406		135,427	135,427	-0-	-0-	
				1,105,820	1,105,820	190,000	1,266	

**AnnualStatement/PerformanceandEvaluationReport**  
**CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)**  
**PartIII:ImplementationSchedule**

PHAName:HOUSINGAUTHORITYOF OWENSBORO		GrantTypeandNumber CapitalFundProgramNo:Ky36P00950102 ReplacementHousingFactorNo: KY36P009 50102				FederalFYofGrant2002	
DevelopmentNumber Name/HA-Wide Activities	AllFundObligated (QuarterEndingDate)			AllFundsExpended (QuarterEndingDate)			ReasonsforRevisedTargetDates
	Original	Revised	Actual	Original	Revised	Actual	
PHAWide	03/30/04			09/30/05			Noneedforarevision

**CAPITALFUNDPROGRAMTABLESSTARTHERE**

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

PHAName: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number Capital Fund Program Grant No: KY36P00950101 Replacement Housing Factor Grant No: KY36P00950101	Federal FY of Grant: 2001
---	---	------------------------------

Original Annual Statement     Reserve for Disasters/Emergencies     Revised Annual Statement (revision no: 1)  
 Performance and Evaluation Report for Period Ending: 1/31/03     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	-0-	-0-	-0-	-0-
2	1406 Operations	-0-	-0-	-0-	-0-
3	1408 Management Improvements	138,003	98,874	98,874	98,874
4	1410 Administration	94,050	118,115	118,115	118,115
5	1411 Audit	3,000		-0-	-0-
6	1415 Liquidated Damages	-0-			
7	1430 Fees and Costs	30,000	12,776	12,776	12,776
8	1440 Site Acquisition	-0-			
9	1450 Site Improvement	-0-			
10	1460 Dwelling Structures	877,224	908,086	792,274	471,500
11	1465.1 Dwelling Equipment — Nonexpendable	-0-		-0-	-0-
12	1470 Nondwelling Structures	16,650	18,076	18,076	18,076
13	1475 Nondwelling Equipment	-0-			
14	1485 Demolition	-0-			
15	1490 Replacement Reserve	-0-			
16	1492 Moving to Work Demonstration	-0-			
17	1495.1 Relocation Costs	-0-			
18	1499 Development Activities	30,875		-0-	-0-
19	1501 Collateralization or Debt Service	-0-			
20	1502 Contingency	-0-			
21	Amount of Annual Grant: (sum of lines 2-20)	1,189,802		1,040,115	719,341
22	Amount of line 21 Related to LBP Activities	-0-			
23	Amount of line 21 Related to Section 504 Compliance	-0-			
24	Amount of line 21 Related to Security — Soft Costs	15,600			

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

PHAName: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number Capital Fund Program Grant No: KY36P00950101 Replacement Housing Factor Grant No: KY36P00950101	Federal FY of Grant: 2001
---	---	------------------------------

Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: 1)  
 Performance and Evaluation Report for Period Ending: 1/31/03  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
25	Amount of Line 21 Related to Security – Hard Costs	-0-			
26	Amount of line 21 Related to Energy Conservation Measures	-0-			

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

PHAName: HOUSING AUTHORITY OF OW ENSBORO		Grant Type and Number Capital Fund Program Grant No: KY36P00950101 Replacement Housing Factor Grant No: KY36P00950101				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 Work
				Original	Revised	Funds Obligated	Funds Expended	
Harry Smith Homes KY9 -1	Replace ranges, rangehoods, install electric outlet	1460	124	63,463	73,349	9,045	9,045	Outlets complete
	Install washer/dryer hookups in 1 bedroom units	1460	34	34,000	82,280	82,280	38,021	In Progress
	Replace Refrigerators	1460	124	49,600		-0-	-0-	Not begun
PG Walker Apts KY9 -2	Replace ranges, rangehoods, install electric outlet	1460	52	27,463	30,600	3,784	3,784	Outlets complete
	Replace Refrigerators	1460	52	20,800		-0-	-0-	Not begun
	Install washer/dryer hookups in 1 bedroom units	1460	20	20,000	53,946	53,946	53,946	Complete
	Refinish cabinets, install new countertops, VCT in kitchen & living room, vinyl floor in bathroom	1460	52	104,000	-0-	-0-	-0-	Deleted
	Remodel Community Room	1470		8,325	-0-	-0-	-0-	Delete
Rolling Heights Ky9 -3	Continue Mini Modin Units	1460	50	523,435	546,327	523,435	341,304	80% Complete
Nannie Locke Homes KY9 -4	Replace ranges, rangehoods, install electric outlet	1460	50	26,463	29,400	3,616	3,615	Outlets complete
	Install washer/dryer hookups in 1 bedroom units	1460	8	8,000	21,784	21,784	21,784	Complete

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

PHAName: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program Grant No: KY36P00950101 Replacement Housing Factor Grant No: KY36P00950101				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 Work
				Original	Revised	Funds Obligated	Funds Expended	
	Remodel Community Room	1470		8,325	-0-	-0-	-0-	Delete
Adams Village Ky9 -6	Remodel Community Room	1470		-0-	18,076	18,076	18,076	Complete
PHAWide Fees & Costs	A/E Fees for various items of work	1430		30,000	12,776	12,776	12,776	Complete
Management Improvements	Drug Elimination, Boys Club, Girls, Inc. Latch Key Program, Off Duty Patrol	1408		61,883	53,367	53,367	53,367	Complete
	Director of Resident Initiatives	1408		49,500	39,048	39,048	39,048	Complete
	High School Employment/Resident Opportunities	1408		26,620	6,459	6,459	6,459	Complete
Administration	Capital Fund Program Administrative Salaries/other expenses	1410		94,050	118,115	118,115	118,115	Complete
Audit	Audit of Capital Fund Program	1411		3,000		-0-	-0-	Not yet paid

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

PHAName: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program No: KY36P00950101 Replacement Housing Factor No: KY36P00950101					Federal FY of Grant 2001
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	03/30/03			09/30/04			Noneedforarevision





**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PH Name: HOUSING AUTHORITY OF OWENSBORO</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: KY36P00950100 Replacement Housing Factor Grant No: KY36P00950100			<b>Federal FY of Grant:</b> 2 000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <b>Performance and Evaluation Report for Period Ending: XX Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds	-0-			
2	1406 Operations	100,000		100,000	100,000
3	1408 Management Improvements	99,211		99,211	99,211
4	1410 Administration	113,027		113,027	113,027
5	1411 Audit	2,781	1,500	1,500	1,500
6	1415 Liquidated Damages	-0-			
7	1430 Fees and Costs	51,712		51,712	51,712
8	1440 Site Acquisition	-0-			
9	1450 Site Improvement	269,652		269,652	269,652
10	1460 Dwelling Structures	482,095	483,376	483,376	483,376
11	1465.1 Dwelling Equipment — Nonexpendable	-0-			
12	1470 Non Dwelling Structures	45,116		45,116	45,116
13	1475 Non Dwelling Equipment	-0-			
14	1485 Demolition	-0-			
15	1490 Replacement Reserve	-0-			
16	1492 Moving to Work Demonstration	-0-			
17	1495.1 Relocation Costs	-0-			
18	1499 Development Activities	-0-			
19	1501 Collateralization or Debt Service	-0-			

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

PHAName:HOUSINGAUTHORITYOFOWENSBORO	GrantTypeandNumber CapitalFundProgramGrantNo:KY36P00950100 ReplacementHousingFactorGrantNo:KY36P00950100	FederalFYofGrant: 2 000
-------------------------------------	--	----------------------------

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

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	-0-			
21	Amount of Annual Grant: (sum of lines 2 – 20)	1,163,594	1,163,594	1,163,594	1,163,594
22	Amount of line 21 Related to LBP Activities	-0-			
23		-0-			
24	Amount of line 21 Related to Security – Soft Costs	15,600			
25	Amount of Line 21 Related to Security – Hard Costs	-0-			
26	Amount of line 21 Related to Energy Conservation Measures	-0-			

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

PHAName: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program Grant No: KY36P00950100 Replacement Housing Factor Grant No: KY36P00950100			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 Work
				Original	Revised	Funds Obligated	Funds Expended	
Harry Smith Homes KY9 -1	Install dryer hookups in 2 bedroom units	1460	58	21,600		21,600	21,600	Completed
9-1,9 -4,9 -5,9 -6	Install new hot water heaters	1460	216	45,000		45,000	45,000	Completed
	Building/Site Enhancements	1450		269,652		269,652	269,652	Completed
PG Walker Apts Ky9 -2	Install dryer hookups in 2 bedroom units	1460	21	8,500		8,500	8,500	Completed
	Install new hot water heaters	1460	52	12,325		12,325	12,325	Completed
Rolling Heights Ky9 -3	Continue Mini Modin units/install parking	1460		255,344	256,625	256,625	256,625	Completed
	Renovation of Boys Club	1470		45,116		45,116	45,116	Completed
Nannie Locke Homes KY 9-4	Install dryer hookups in 2 bedroom units	1460	24	10,000		10,000	10,000	Completed
Baker Drive Ky9 - 5	Install dryer hookups in units	1460		3,116		3,116	3,116	Completed
	Installation of new windows and Repair of sidewalks/drives	1460	30	126,210		126,210	126,210	Completed
Fees & Costs	A/E fees for various items of work	1430		51,712		51,712	51,712	Completed
Management Improvements	Director of Resident Initiatives	1408		41,254		41,254	41,254	Completed
	Drug Elimination Program, Boys Club, Girls, Inc. Latch Key Program, Off Duty patrol	1408		44,006		44,006	44,006	Completed

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

PHAName: HOUSING AUTHORITY OF OWENSBORO		<b>Grant Type and Number</b> Capital Fund Program Grant No: KY36P00950100 Replacement Housing Factor Grant No: KY36P00950100			<b>Federal FY of Grant</b> 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 Work
				Original	Revised	Funds Obligated	Funds Expended	
	High School Employment/Resident Opportunities	1408		13,950		13,950	13,950	Completed
Administration	Capital Fund Program Administrative	1410		113,027	113,027	113,027	113,027	Completed
Audit	Audit of Capital Fund Program	1411		2,781	1,500	1,500	1,500	Completed
Operations	PHA Operations	1406		100,000		100,000	100,000	Completed
				1,163,594	1,163,594	1,163,594	1,163,594	

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

PHAName: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program No: KY36P00950100 Replacement Housing Factor No: KY36P00950100				Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHAWIDE	3/30/02		3/30/02	9/30/03			No Revision Necessary

