PHA Plans

Streamlined Annual Version 2

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

Office of Public and Indian Housing

OMB No. 2577-0226

(exp. 05/31/2006)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal Year: 20_04_ PHA Name:

Housing and Redevelopment Authority of Mora

mn101v02

Version #2

NOTE: This PHA Plan to contained in previous No (HA), 2001-4 (HA), 2001	otices PIH 99-33 (HA)	, 99-51 (HA), 2000	-22 (HA), 2000-36 (H	IA), 2000-43

Other (list below)

Streamlined Annual PHA Plan Agency Identification

PHA Name: Housing and Redevelopment Authority of Mora PHA Number: MN101 PHA Fiscal Year Beginning: (mm/yyyy) 4/2004 **PHA Programs Administered: ☑**Public Housing and Section 8 Section 8 Only | Public Housing Only Number of public housing units: 42 (43 units but one unit used for the caretaker) Number of S8 units: 81 PHA Consortia: (check box if submitting a joint PHA Plan and complete table) # of Units **Participating PHAs PHA** Program(s) Included in Programs Not in Code the Consortium the Consortium Each Program Participating PHA 1: **Participating PHA 2:** Participating PHA 3: **PHA Plan Contact Information:** Name: Laura Howell Phone: 320-679-4789 TDD: Email (if available): pinecrest@ncis.com **Public Access to Information** Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) \square PHA's main administrative office PHA's development management offices **Display Locations For PHA Plans and Supporting Documents** The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. ☐ Yes No. If yes, select all that apply: Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government PHA website Public library 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

Streamlined Annual PHA Plan Fiscal Year 2004

[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

71.	THAT LAN COME ONEMED	

DHA DI AN COMPONENTS

	1. Site-Based Waiting List Policies
903.7(b	(2) Policies on Eligibility, Selection, and Admissions
\boxtimes	2. Capital Improvement Needs
903.7(g)) Statement of Capital Improvements Needed
	3. Section 8(y) Homeownership
903.7(k	(1)(i) Statement of Homeownership Programs
	4. Project-Based Voucher Programs
	5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has
	changed any policies, programs, or plan components from its last Annual Plan.
\boxtimes	6. Supporting Documents Available for Review
\boxtimes	7. Capital Fund Program and Capital Fund Program Replacement Housing Factor,
	Annual Statement/Performance and Evaluation Report
\boxtimes	8. Capital Fund Program 5-Year Action Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, <u>PHA Certifications of Compliance with the PHA Plans and Related Regulations:</u> <u>Board Resolution to Accompany the Streamlined Annual Plan</u> identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLLa, <u>Disclosure of Lobbying Activities</u>.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? **No** If yes, complete the following table; if not skip to B.

	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or
Information: (Name, number, location) Initiated Racial, Ethnic or Disability Demographics Since Initiation of Disability Demographics			
er of site ba	ased waiting list deve	lopments to which fan	nilies may apply
		J	
	fers may a the PHA	fers may an applicant turn down the control of the PHA the subject of any per	- fers may an applicant turn down before being remove

B. Site-Based Waiting Lists – Coming Year

inconsistent with the order, agreement or complaint below:

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.

complaint and describe how use of a site-based waiting list will not violate or be

1.	How many site-based waiting lists will the PHA operate in the coming year? None
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?

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Other (list below) call 320-679-4789 and we will send out an application. It is

At the development to which they would like to apply

not necessary to actually come to the office.

2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

A. Capital Fund Program					
1. \(\sum \) Yes \(\sum \) No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.					
 Yes No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify i its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.). B. HOPE VI and Public Housing Development and Replacement Activities (Non- 					
Capital Fund)					
Applicability: 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.					
1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; i yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).					
2. Status of HOPE VI revitalization grant(s):					

HOPE VI Revitalization Grant Status
a. Development Name:
b. Development Number:
c. Status of Grant:
Revitalization Plan under development
Revitalization Plan submitted, pending approval
Revitalization Plan approved
Activities pursuant to an approved Revitalization Plan underway
3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name(s) below:

4.	Yes 🔀	No:	Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5.	Yes 🖂	No:	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:

3. Section 8 Tenant Based AssistanceSection 8(y) Homeownership Program (if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]			
1. ☐ Yes ⊠ No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)		
2. Program Descripti	on:		
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, what is the maximum number of participants this fiscal year?		
b. PHA-established e	eligibility criteria 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:		
c. What actions will	the PHA undertake to implement the program this year (list)?		
3. Capacity of the PI	HA to Administer a Section 8 Homeownership Program:		
Establishing a	strated its capacity to administer the program by (select all that apply): a minimum homeowner downpayment requirement of at least 3 percent of e and requiring that at least 1 percent of the purchase price comes from the purchase		
Requiring that be provided, i secondary mo	t financing for purchase of a home under its Section 8 homeownership will nsured or guaranteed by the state or Federal government; comply with ortgage market underwriting requirements; or comply with generally ate sector underwriting standards.		
Partnering win	th a qualified agency or agencies to administer the program (list name(s) experience below):		
Demonstratin	g that it has other relevant experience (list experience below):		

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4. Use of the Project-Based Voucher Program

and commitments: (describe below)

Intent to Use Project-Based Assistance					
Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.					
1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:					
low utilization rate for vouchers due to lack of suitable rental units access to neighborhoods outside of high poverty areas other (describe below:)					
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):					
5. PHA Statement of Consistency with the Consolidated Plan [24 CFR Part 903.15]					
For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.					
1. Consolidated Plan jurisdiction: (provide name here)					
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)					
The PHA has based its statement of needs of families on its waiting lists on the needs					
expressed in the Consolidated Plan/s. The PHA has participated in any consultation process organized and offered by the					
Consolidated Plan agency in the development of the Consolidated Plan. The PHA has consulted with the Consolidated Plan agency during the development of					
this PHA Plan. Activities to be undertaken by the PHA in the coming year are consistent with the					
initiatives contained in the Consolidated Plan. (list below) Other: (list below)					
3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions					

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<u>6. Supporting Documents Available for Review for Streamlined Annual PHA Plans</u>

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

List of Supporting Documents Available for Review			
Applicable & On Display	Supporting Document	Related Plan Component	
	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;	5 Year and Annual Plans	
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan	Streamlined Annual Plans	
	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard Annual Plans	
	Fair Housing Documentation Supporting Fair Housing Certifications: 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 jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans	
	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs	
	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources	
	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies	
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies	
	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. ☐ Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies	
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies	
	Public housing rent determination policies, including the method for setting public housing flat rents. Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination	
	Schedule of flat rents offered at each public housing development. Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination	
	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination	
	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	
	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment). Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if	Annual Plan: Management and Operations Annual Plan: Operations and	
	necessary)	Maintenance and Community Service & Self-	

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List of Supporting Documents Available for Review			
Applicable & On Display	Supporting Document	Related Plan Component	
		Sufficiency	
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations	
	Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance	
	Public housing grievance procedures Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures	
	Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures	
	The Capital Fund/Comprehensive Grant Program Annual Statement	Annual Plan: Capital Needs	
	/Performance and Evaluation Report for any active grant year. Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs	
	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	
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs	
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition	
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing	
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing	
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing	
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership	
	Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership	
	Public Housing Community Service Policy/Programs Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency	
	Cooperative agreement between the PHA and the TANF agency and between	Annual Plan: Community	
	the PHA and local employment and training service agencies. FSS Action Plan(s) for public housing and/or Section 8.	Service & Self-Sufficiency Annual Plan: Community Service & Self-Sufficiency	
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency	
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency	
	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy	
	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit	
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)	
	Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual	

	List of Supporting Documents Available for Review								
Applicable & On Display	Supporting Document	Related Plan Component							
		Management and Operations							

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Per	formance and Evaluation Report					
Capital Fund Program	n and Capital Fund Program Replacement	Housing Factor ((CFP/CFPRHF) I	Part I: Summary		
PHA Name: Housing and Re		rant Type and Number		•	Federal FY	
		apital Fund Program Gra			of Grant:	
Mo:: 14 154 4		eplacement Housing Fac			2004	
	nent Reserve for Disasters/ Emergencies Revise lation Report for Period Ending: Final Peri	ed Annual Statement formance and Evalua				
Line No.	Summary by Development Account	Total Estin		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement	20000				
10	1460 Dwelling Structures	30000				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition	2000				
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	52000				
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504					
	compliance					
24	Amount of line 21 Related to Security – Soft Costs					
25	Amount of Line 21 Related to Security – Hard					
	Costs					
26	Amount of line 21 Related to Energy Conservation Measures					

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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

Authority of Mo Development Number	General Description of Major Work Categories	Replacement H Dev. Acct	rogram Grant No: ousing Factor Gra Quantity		0104			
Development Number	General Description of	Dev. Acct	·					
Number			Quantity				1	
	Major Work Categories		Qualitity	Total Esti	mated Cost	Total Act	ual Cost	Status of
3.T /T.T.A		No.						Work
Name/HA-								
Wide								
Activities								
				Original	Revised	Funds	Funds	
				_		Obligated	Expended	
MN101	tuckpoint building	146	1 bldg	25000			-	
		0	C					
MN101	remove brick privacy	148	1 wall by	2000				
	fence and signage (not	5	patio					
	worth fixing)		1					
MN101	install new signage	145	1 sign	2000				
		0						
MN101	replace defective	146	10	5000				
	windows	0						
MN101	regrade soils away from	145	1 bldg	18000				
	the building, add rock	0						
	around entire building							
	and landscape							
	1							
			total	52000				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Capital Fund	ment/Performance an Program and Capital		-	acement Ho	ousing Fact	or (CFP/CFP)	RHF)	
Part II: Support PHA Name: How Authority of Mo	using and Redevelopment			MN46P1015	0104	2004		
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	ev. Acct Quantity Total Estimated Cost Total Actual Cost				ual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement **Housing Factor**

Annual Statemen	t/Performa	ance and I	Evaluatio	n Report			
Capital Fund Pro				-	ement Hous	ing Factor	(CFP/CFPRHF)
Part III: Implem	entation S	chedule		_		_	
PHA Name: Housing			Type and Nu		0150104	Federal FY of Grant: 2004	
Redevelopment Author	ority of Mora		al Fund Progra cement Housir	m No: MN46P10 ng Factor No:	J13010 4		
Development	<u> </u>				Funds Expend		Reasons for Revised Target Dates
Number	(Quar	ter Ending I	nding Date) (Quarter Ending Date)			ate)	
Name/HA-Wide Activities							
Activities	Original	Revised	Actual	Original	Revised	Actual	
	Oliginal	110 / 1500	Tiotaai	Griginar	110 / 1500	1101001	
MN101	6-30-06			6-30-08			

Work Statement for Year 4 FFY Grant: 2007 PHA FY: 2007 59,500	Work Statemen for Year 5 FFY Grant: 2008 PHA FY: 2008 51,300
PHA FY: 2007	PHA FY: 2008
59,500	51,300
59,500	51,300
	59,500

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities Activities for Year: _2006__ Activities Activities for Year: 2005 FFY Grant: FFY Grant: for PHA FY: 2005 PHA FY: 2006 Year 1 **Development Major Work Estimated Cost Development Major Work Estimated** Name/Number **Categories** Name/Number **Categories** Cost Construct patio MN101 Replace counter 13,000 59500 See MN101 enclousre to replace tops, sink, stove, floor, refrigerator, old patio wal fan above able area 20,000 an bathroom replace defective storage unit in 17 windows units on 2nd Floor 20,000 replace counter tops, sink, stove, floors, refrigerator, fan above table area, and bathroom storage unit in 6 units on first floor **Annual Statement**

Total CFP Estimated	Cost	\$53,000		\$59,500

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities Activities for Year: 2007 Activities for Year: _2008__ FFY Grant: FFY Grant: PHA FY: 2007 PHA FY: 2008 **Estimated Cost** Development **Major Work Development Major Work Estimated Cost** Name/Number Name/Number Categories **Categories** MN101 MN101 replace counter tops, 59,500 11,300 Replace hot sink, stove, water tank refrigerator, floor, fan above table, bathroom storage unit in 17 units on 3rd floor. Replace all 40,000 original light fixtures in all units with energy efficient ones.

Total CFP Esti	mated Cost	\$59,500		\$53,300

PHA Name: HRA		Grant Type and Number Capital Fund Program Grant No: MN46P10150103 Replacement Housing Factor Grant No:					
					2003		
	al Statement Reserve for Disasters/ Emergencies Revi nd Evaluation Report for Period Ending: 11-30-2003			a-u4			
Line No.	Summary by Development Account		and Evaluation Rep		Actual Cost		
Line No.	Summary by Development Account	Original	Revised	Obligated Obligated	Expended		
1	Total non-CFP Funds	Original	Reviseu	Obligated	Expended		
<u>1</u>		3263	0	0	0		
2	1406 Operations	3203	0	0	0		
3	1408 Management Improvements						
4	1410 Administration						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement	40,500	24000				
10	1460 Dwelling Structures	40500	34000	0	0		
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Nondwelling Structures		9,763				
13	1475 Nondwelling Equipment						
14	1485 Demolition						
15	1490 Replacement Reserve						
16	1492 Moving to Work Demonstration						
17	1495.1 Relocation Costs						
18	1499 Development Activities						
19	1501 Collaterization or Debt Service						
20	1502 Contingency						
21	Amount of Annual Grant: (sum of lines 2 – 20)	43763	43763	0	0		
22	Amount of line 21 Related to LBP Activities						
23	Amount of line 21 Related to Section 504 compliance						
24	Amount of line 21 Related to Security – Soft Costs						
25	Amount of Line 21 Related to Security – Hard Costs						
26	Amount of line 21 Related to Energy Conservation Measures						

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: HR					Federal FY of Grant: 2003			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct Quantity No.		Total Estimated Cost		Total Act	Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended	
MN101-001	operations	140 6	1	3263	0			
MN101-001	install new carpet in all units where there has been no new carpet for at least 15 years	146 0	15	20,000	0			
MN101-001	make a wall opening in the wall opening in the wall of the second and third floor common gathering area and install ac in each	146 0	2	3500	0			
MN101-001	balance of closet doors in all units	146 0	40	8000	0			
MN101-001	purchase air conditioner covers and install in all units and in common areas to replace those that are now 27 years old. For better insulation purposes.	146 0	50	4000	0			

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: HR	A of Mora	Grant Type and		3 D 14 C 24 C 4 C	0402	Federal FY of Gran	Federal FY of Grant: 2003		
			rogram Grant No: ousing Factor Gr	MN46P1015 ant No:	0103				
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Act	Total Actual Cost		
				Original	Revised	Funds Obligated	Funds Expended		
MN101-001	additional monies toward handicapped accessibility	146	3	5000	0				
MN101	new gazebo or patio enclosures	147 0	1	0	9763	0	0		
MN101	10 new windows replacing old ones little at a time	146 0	10	0	5000	0	0		

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: HR					Federal FY of Grant: 2003 Total Actual Cost Status of			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Act		
				Original	Revised	Funds Obligated	Funds Expended	
MN101	install the cupboards that we took from the units that we did the handicapped renovation on, into the common kitchen area and extend into the craft room add a new sink, new lights, new countertop, new fan, new linoleum. will take the old kitchen cupboards to the barn for use there	146 0	3 sets of cupboards into the kitche/ craft room	0	10000	0	0	
MN101	repaint smoke stack	146 0	1	0	3000	0	0	
MN101	carpet and linoleum in 7 units	146 0	7	0	16000	0	0	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages PHA Name: HRA of Mora **Grant Type and Number** Federal FY of Grant: 2003 Capital Fund Program Grant No: MN46P10150103 Replacement Housing Factor Grant No: General Description of **Total Estimated Cost Total Actual Cost** Status of Development Dev. Acct Quantity Number Major Work Categories No. Work Name/HA-Wide Activities Original Funds Funds Revised Obligated Expended

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) **Part III: Implementation Schedule Grant Type and Number** 2003 PHA Name: HRA of Mora Capital Fund Program No: MN10150103 Replacement Housing Factor No: All Fund Obligated All Funds Expended Reasons for Revised Target Dates Development Number (Quarter Ending Date) (Quarter Ending Date) Name/HA-Wide Activities Original Revised Original Revised Actual Actual MN101 9-16-05 9-16-05 9-16-07 9-16-07

	ent/Performance and Evaluation Report Program and Capital Fund Program Replacemen	nt Housing Fact	or (CFP/CFPRHF)	Part I: Summarv	•			
PHA Name: HRA		Grant Type and Number						
		Capital Fund Program	n Grant No: MN46P101	50203	of Grant:			
		Replacement Housing	g Factor Grant No:		2003			
Original Annua	al Statement Reserve for Disasters/ Emergencies Rev				I			
Performance an	nd Evaluation Report for Period Ending: Final Perforn	nance and Evaluati	ion Report					
Line No.	Summary by Development Account	Total F	Estimated Cost	Total Ac	tual Cost			
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds							
2	1406 Operations	8722	0					
3	1408 Management Improvements							
4	1410 Administration							
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures							
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Nondwelling Structures	0	8722					
13	1475 Nondwelling Equipment							
14	1485 Demolition							
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	8722	8722					
22	Amount of line 21 Related to LBP Activities							
23	Amount of line 21 Related to Section 504							
	compliance							
24	Amount of line 21 Related to Security – Soft Costs	3						
25	Amount of Line 21 Related to Security – Hard							
	Costs							
26	Amount of line 21 Related to Energy Conservation	1						
	Measures							

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

PHA Name: Hou Authority of Mo	using and Redevelopment ra	Grant Type and Capital Fund Pr Replacement H		MN46P10150 ant No:	Federal FY of Grant: 2003			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Act	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
HA-wide	operations	140 6	lump sum	8722	0			
MN101	construct new gazebo or patio enclosure (a continuation of 50103 CFP)	147 0	1	0	8722			

Annual Statement/Performance and Evaluation Report										
Capital Fund	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II: Supp	oorting Pages									
PHA Name: Hou Authority of Mo	using and Redevelopment ra			MN46P10150 ant No:	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 Act	Status of Work			
				Original	Revised	Funds Obligated	Funds Expended			

gram and	Capital F		-	ement Hous	ing Factor	(CFP/CFPRHF)
PHA Name: Mora HRA			m No: MN46P10	Federal FY of Grant: 2003		
All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
Original	Revised	Actual	Original	Revised	Actual	
2-12-06	n/a		2-12-08	n/a		to match e-loccs
n/a	2-12-06		n/a	2-12-08		
	entation S A All (Quar Original	All Fund Obligate (Quarter Ending In Property Control of the Contr	gram and Capital Fund Program and Schedule A Grant Type and Nun Capital Fund Program Replacement Housing All Fund Obligated (Quarter Ending Date) Original Revised Actual 2-12-06 n/a	Capital Fund Program No: MN46P10 Replacement Housing Factor No: All Fund Obligated (Quarter Ending Date) (Qua Original Revised Actual Original 2-12-06 n/a 2-12-08	Gram and Capital Fund Program Replacement Housing Entation Schedule A Grant Type and Number Capital Fund Program No: MN46P10150203 Replacement Housing Factor No: All Fund Obligated (Quarter Ending Date) Original Revised Actual Original Revised 2-12-06 n/a 2-12-08 n/a	Gram and Capital Fund Program Replacement Housing Factor entation Schedule A Grant Type and Number Capital Fund Program No: MN46P10150203 Replacement Housing Factor No: All Fund Obligated (Quarter Ending Date) Original Revised Actual Original Revised Actual 2-12-06 n/a 2-12-08 n/a

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

PHA Name: Mora HRA Grant Type at							Federal FY of Grant: 2003
			m No: MN46P10	0150203			
Replacement Housing Factor No:							
Development	Development All Fund Obligated All Funds Expended						Reasons for Revised Target Dates
Number	(Quar	ter Ending I	Oate)	(Qua	arter Ending Da	ite)	
Name/HA-Wide							
Activities							
	Original	Revised	Actual	Original	Revised	Actual	

Note: see Part 1

PHA Name: HRA	Program and Capital Fund Program Replacemen	Grant Type and Num		rjiaiti. Summa	<u> </u>
PHA Name: HRA				0150102	Federal FY of Grant:
		Capital Fund Program Replacement Housing	Grant No: MN46P1	0150102	2002
Original Annu	al Statement □Reserve for Disasters/ Emergencies ☑Rev				2002
			and Evaluation Rep	nort	
Line No.	Summary by Development Account		stimated Cost		Actual Cost
Line 110.	Summary by Development Account	Original	Revised	Obligated	Expended
1	Total non-CFP Funds	011g	220 / 2500	0 %11.g.,	2
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5000	2419.50	2419.50	2419.50
8	1440 Site Acquisition	3000	2417.30	2417.30	2417.30
9	1450 Site Improvement				
10	1460 Dwelling Structures	48189	50769.50	27700	0
11	1465.1 Dwelling Equipment—Nonexpendable	40107	30707.30	27700	
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	53189	53189	30119.50	2419.50
22	Amount of line 21 Related to LBP Activities	23107	10107	20117.00	
23	Amount of line 21 Related to Section 504				
-	compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard				
	Costs				
26	Amount of line 21 Related to Energy Conservation				
	Measures				

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

	using and Redevelopment	Grant Type an		MN46P1015	Federal FY of Grant: 2002			
Authority of Mo	ra	Replacement H	lousing Factor Gra	ant No:				
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.			mated Cost	Total Act	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
MN101	Architectural Fees and Permits	143 0	3	5000	2419.50	2419.50	2419.50	DONE
MN101	Refrigerator, Stove, Countertop, 3 fans, linoleum, unit 109	146 0	1	0	4050	4050	0	DONE
MN101	handicapped renovation of 3 units – labor and materials	146 0	3	48189	46719.50	46719.50	0	work in process

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages PHA Name: Housing and Redevelopment **Grant Type and Number** Federal FY of Grant: 2002 Capital Fund Program Grant No: MN46P10150102 Authority of Mora Replacement Housing Factor Grant No: General Description of **Total Estimated Cost Total Actual Cost** Status of Development Dev. Acct Quantity Number Major Work Categories No. Work Name/HA-Wide Activities Original Revised **Funds** Funds Obligated Expended

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

PHA Name: Mora HRA			Type and Nur		Federal FY of Grant: 2002		
			al Fund Program	m No: MN46P10			
			cement Housin				
Development All Fund (Funds Expend		Reasons for Revised Target Dates
Number	(Quar	rter Ending I	Oate)				
Name/HA-Wide							
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
MN101	5-31-04	5-30-04		6-30-05	5-30-06		to match e-loccs
_	_						