### **PHA Plans**

### Streamlined Annual Version

### U.S. Department of Housing and **Urban Development**

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: 2004

**PHA Name: Appleton Housing Authority** 

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

# **Streamlined Annual PHA Plan Agency Identification**

PHA Number: WI065					
PHA	PHA Fiscal Year Beginning: 01/2004				
Number	Programs Administer blic Housing and Section of public housing units: 211 of S8 units: 547	8 <b>□</b> Se	ection 8 Only Pur of S8 Number of publi	ablic Housing Onl c housing units:	y
□PH	A Consortia: (check be	ox if subn			# of Units
	Participating PHAs	Code	Program(s) Included in the Consortium	Programs Not in the Consortium	Each Program
Participa	ating PHA 1:				
Participa	nting PHA 2:				
Participa	nting PHA 3:				
Name: TDD: <b>Publi</b> <b>Inforn</b>	Plan Contact Information Debra Dillenberg 920-731-2406  c Access to Information regarding any actional that apply) PHA's main administrative	on vities out	Email: debra	e: 920-739-6811 x d@appletonhousin  be obtained by co opment manageme	ng.org
Displa	ay Locations For PHA	A Plans	and Supporting D	ocuments	
The PI public If yes,	HA Plan revised policies or review and inspection. select all that apply: Main administrative offic PHA development manag Main administrative offic Public library	r program Yes  e of the Placement off e of the lo PHA	changes (including att  No.  HA fices ocal, county or State green website	overnment Other (list below	v)
	Plan Supporting Documents Main business office of the			pment managemen	-

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PHA Name: HA Code:	Streamlined Annual Plan for Fiscal Year 20
Other (list below)	
Streamlined Annual PHA P Fiscal Year 2004 [24 CFR Part 903.12(c)]	lan
Table of Contents [24 CFR 903.7(r)]	
Provide a table of contents for the Plan, including applicable additional required documents available for public inspection.	rements, and a list of supporting
A. PHA PLAN COMPONENTS	
<ol> <li>Site-Based Waiting List Policies</li> <li>903.7(b)(2) Policies on Eligibility, Selection, and Admissions</li> <li>Capital Improvement Needs</li> <li>903.7(g) Statement of Capital Improvements Needed</li> <li>Section 8(y) Homeownership</li> <li>903.7(k)(1)(i) Statement of Homeownership Programs</li> <li>Project-Based Voucher Programs</li> <li>PHA Statement of Consistency with Consolidated Plachanged any policies, programs, or plan components from</li> <li>Supporting Documents Available for Review</li> <li>Capital Fund Program and Capital Fund Program Reparament Statement/Performance and Evaluation Report</li> <li>Capital Fund Program 5-Year Action Plan</li> </ol>	m its last Annual Plan.
B. SEPARATE HARD COPY SUBMISSIONS TO LOC	AL HUD FIELD OFFICE
Form HUD-50076, <u>PHA Certifications of Compliance with the PHA A Board Resolution to Accompany the Streamlined Annual Plan</u> identify has revised since submission of its last Annual Plan, and including Civassurances the changed policies were presented to the Resident Advisor approved by the PHA governing board, and made available for review principal office; For PHAs Applying for Formula Capital Fund Program (CFP) Gram HUD-50070, <u>Certification for a Drug-Free Workplace</u> ; Form HUD-50071, <u>Certification of Payments to Influence Federal Transports and Payments to Influence Federal Transports.</u>	ring policies or programs the PHA vil Rights certifications and ory Board for review and comment, and inspection at the PHA's Grants:

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? If yes, complete the following table; if not skip to B.

Site-Based Waiting Lists				
Development Information: (Name, number, location)	Date Initiated	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 Disability demographics
Oneida Heights	01/2004	58.82% Disabled	N/a	N/a
		17.65% Elderly		
Washington Place	01/2004	40% Disabled	N/a	N/a
		40% Elderly		

2.	What is the number of site based waiting list developments to which families may apply at one time? $\underline{2}$
3.	How many unit offers may an applicant turn down before being removed from the site-based waiting list? $\underline{4}$
4.	Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

### **B.** Site-Based Waiting Lists – Coming Year

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.

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

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If yes, how many lists?  3. Yes No: May families be on more than one list simultaneously If yes, how many lists? 3 Including Oneida Heights, Washington Place and the Section 8 Housing Choice Voucher Program.				
<ul> <li>4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?</li> <li></li></ul>				
housing at two sites are defined Substantial Rel sign up at the nother non-profi	ovement Needs			
	n 8 only PHAs are not required to complete this component.			
A. Capital Fund				
1. Xes 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.			
2. ☐ 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 in 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 an Capital Fund	nd Public Housing Development and Replacement Activities (Non-			

HOPE VI does not pertain to the Appleton Housing Authority at this time.

PHA Name: HA Code:

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. Tes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if 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			
<ul><li>a. Development Name:</li><li>b. Development Number:</li></ul>			
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:			
The Appleton Housing Authority will continue to research public housing development activities in 2004. The Appleton Housing Authority is interested in acquiring additional properties under the public housing regulations or free standing mixed market rate with affordable housing units. The AHA will work with the local HUD Field Office.			
3. Section 8 Tenant Based AssistanceSection 8(y) Homeownership Program (if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]			
1. X 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			

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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. Pro	2. Program Description:				
	e of Program es 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? The Appleton Housing Authority has determined the maximum number at 3 for disabled households.			
	A-established € es ⊠ 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:			
c. W	hat actions will	the PHA undertake to implement the program this year (list)?			
	disable The A underv The A rehabi The A homeo	ppleton Housing Authority will market the homeownership program to all ed families or disabled head of households. ppleton Housing Authority will market the program to local lenders & writers for participation. ppleton Housing Authority will allow these participants down-payment & litation assistance in the purchase of a home. ppleton Housing Authority will provide pre and post purchase ownership counseling. ppleton Housing Authority will research applying with HUD to become a ed Counseling Agency.			
3. Ca <sub>1</sub>	pacity of the PH	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 arces.			
	be provided, i secondary mo	t financing for purchase of a home under its Section 8 homewnership will nsured or guaranteed by the state or Federal government; comply with rtgage market underwriting requirements; or comply with generally ate sector underwriting standards.			
	Partnering with	th a qualified agency or agencies to administer the program (list name(s) xperience below):			
$\boxtimes$	•	g that it has other relevant experience (list experience below):			

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PHA Name: HA Code:

The Appleton Housing Authority has successfully implemented a First Time Home Buyer Program since 1993. This program is geared towards low income families. The program uses HOME dollars from the State of Wisconsin, CDBG Funds from the City of Appleton, Federal Home Loan Grant dollars and funds from the Outagamie County Housing Authority Foundation Fund. These funds provide down-payment and rehabilitation assistance to the families.

In addition, in 2003 WE Energies granted \$10,000 towards the rehab of two homes as a demonstration project.

The Housing Authority offers extensive homeownership counseling and educational classroom training, coupled with financial assistance. The Housing Authority has created a Lender Consortium of local participating lenders who have agreed to minimize closing costs, waive PMI charges, and consider liberal debt and loan-to-value ratios. More than 300 applicants have become successful home owners through the Housing Authority's program.

While some of the clients have come from the Section 8 Housing Choice Voucher Program and the Public Housing Family units, we have used no Section 8 funds to date in assisting these families with homeownership. In some cases, the family utilized their FSS Program Escrow towards downpayment.

The Appleton Housing Authority has entered into an agreement with the Outagamie County Housing Authority and the Kaukauna Housing Authority to operate our home ownership program within their PHA jurisdiction.

The Appleton Housing Authority's First Time Home Buyer's Program was the recipient of a merit award from the National Association of Housing & Redevelopment Officials (NAHRO).

### 4. Use of the Project-Based Voucher Program

#### **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. \( \sum \) Yes \( \sum \) 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:) Opportunity for families to receive case management services in order for them to sustain affordable housing and move into economic sufficiency.

PHA Name: HA Code:

> 2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts): The Appleton Housing Authority through a special collaboration with the Outagamie County Housing Authority, project based 16 Housing Choice Vouchers at a market rate 48 unit complex located outside of the City of Appleton limits, but within Outagamie County. These tenants receive case management support services through Housing Partnership of the Fox Cities. By project basing, families were able to move into units adjacent to the Fox Valley Technical College and out of lower-income defined poverty areas.

### 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: City of Appleton
- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction:

$\boxtimes$	The PHA has based its statement of needs of families on its waiting lists on the needs
	expressed in the Consolidated Plan/s.
$\boxtimes$	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 and commitments: (describe below)

No changes have been made and consultation is not necessary under this Streamlined Plan.

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

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 FiveYear, 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		
X	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		
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/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		
X	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		
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		
	Results of latest Public Housing Assessment System (PHAS) Assessment (or	Annual Plan: Management		

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	List of Supporting Documents Available for Review	
Applicable & On Display	Supporting Document	Related Plan Component
X	other applicable assessment).	and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self- Sufficiency
X	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
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	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
X	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 the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan(s) for public housing and/or Section 8.	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
X	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).	Annual Plan: Pet Policy
X	☐ Check here if included in the public housing A & O Policy.	Approx Dlogs Access As 19
X	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)

PHA Name: HA Code:

List of Supporting Documents Available for Review			
Applicable & On Display	Supporting Document	Related Plan Component	
X	The Blueprint to Affordable Housing and Update-A comprehensive analysis of the affordable housing needs of Appleton & surrounding communities.		
	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 Management and Operations	

	nent/Performance and Evaluation Report					
Capital Fund	Program and Capital Fund Program Replacemer	nt Housing Factor	(CFP/CFPRHF)	Part I: Summary	•	
PHA Name: Appleton Housing	Authority	Grant Type and Number Capital Fund Program Grant No: WI065 Replacement Housing Factor Grant No:				
	al Statement Reserve for Disasters/ Emergencies Rev					
		erformance and Evalu				
Line No.	Summary by Development Account		mated Cost	Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	\$49,000				
3	1408 Management Improvements					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$20,000				
8	1440 Site Acquisition					
9	1450 Site Improvement	\$55,000				
10	1460 Dwelling Structures	\$125,000				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	\$15,000				
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)	\$265,000				
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) Part II: Supporting Pages

PHA Name: Ap	pleton Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI065 Replacement Housing Factor Grant No:				Federal FY of Gra	Federal FY of Grant: 2004			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Actual Cost		Status of Work		
				Original	Revised	Funds Obligated	Funds Expended			
1406	PHA Operations			\$49,000			1			
1430	A & E/Consultant Services (fees & costs)			\$20,000						
1450	3 Stall Secured Garage			\$35,000						
1450	Covered Bike Storage			\$5,000						
1450	Oneida Heights Landscape Work-Front			\$10,000						
1450	Security Camera Enhancement at OH			\$5,000						
1460	Create Fitness Room			\$5,000						
1460	Carpet Hallways			\$25,000						
1460	Paint 35 Units			\$20,000						
1460	Com. Room Project At Oneida Heights			\$35,000						
1460	Landscape Repair at Scattered Sites			\$10,000						
1460	Install 60 Bathroom Vanities at OH			\$30,000						

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

Part II: Supporting Pages

Tartin. Supp	art II. Supporting I ages									
PHA Name: App	pleton Housing Authority	Capital Fund Program Grant No: WI065 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004				
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Act	Status of Work			
				Original	Revised	Funds Obligated	Funds Expended			
1411	Fair Share Audit			\$1,000						
HA-Wide	Purchase Work Vehicle			\$12,000						

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

PHA Name: Appleton Authority	Housing	Capita	Type and Nund Fund Programement Housin	m No: WI065			Federal FY of Grant: 2004
Development	All l	Fund Obliga		All Funds Expended			Reasons for Revised Target Dates
Number	(Quar	ter Ending I	Oate)		arter Ending Da		
Name/HA-Wide							
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	12/30/04			12/30/04			
2004-1430-01	12/30/04			06/30/05			
2004-1450-01	12/30/04			06/30/05			
2004-1450-02	12/30/04			06/30/05			
2004-1450-03	12/30/04			06/30/05			
2004-1450-04	12/30/04			06/30/05			
2004-1460-01	12/30/04			06/30/05			
2004-1460-02	12/30/04			06/30/05			
2004-1460-03	12/30/04			06/30/05			
2004-1460-04	12/30/04			06/30/05			
2004-1460-05	12/30/04			06/30/05			
2004-1460-06	12/30/04			06/30/05			
PHA Wide	12/30/04			06/30/05			
PHA Wide 1475	12/30/04			06/30/04			

Capital Fund P	rogram Fiv	ve-Year Action Plan			
Part I: Summan	<b>.y</b>				
PHA Name				Original 5-Year Plan	
Appleton Housing	Authority			<b>⊠Revision No: 1</b>	_
Development	Year 1	Work Statement	Work Statement	Work Statement	Work Statement
Number/Name/		for Year 2	for Year 3	for Year 4	for Year 5
HA-Wide					
		FFY Grant: 2001	FFY Grant: 2002	FFY Grant: 2003	FFY Grant: 2004
		PHA FY: 2001	PHA FY: 2002	PHA FY: 2003	PHA FY: 2003
	Annual				
1406 114 3323	Statement	\$54,000	\$60,000	\$20,000	\$49,000
1406-HA Wide		\$54,000	' '	\$30,000	. ,
1408 HA Wide		\$22,547	0	\$3,000	0
1410 HA Wide		\$30,000	0	0	0
1411 HA Wide		\$1,000	\$2,000	0	\$1,000
1430		\$10,691	\$19,834	\$5,000	\$20,000
1450		\$77,656	\$72,272	0	\$55,000
1460		\$105,953	\$139,000	\$243,649	\$125,000
1465		\$18,359	0	0	0
1475		0	\$11,724	\$3,771	\$15,000
CFP Funds Listed		\$ 320,206	\$ 304,831	\$285,420	\$ 265,000
for 5-year					
planning					
Danlagament		-0-	-0-	-0-	-0-
Replacement Housing Factor		-0-	-0-	-0-	-U-
Funds					
Tullus					

Capital Fu	nd Program Five-Y	Year Action Plan						
Part II: Su	pporting Pages—V	Vork Activities						
Activities	Activi	ties for Year: 2001		Activit	ties for Year:200	2_		
for		FFY Grant:			FFY Grant:	FFY Grant:		
Year 1		PHA FY:			PHA FY:			
	Development	Major Work	<b>Estimated Cost</b>	Development	Major Work	Estimated		
	Name/Number	Categories		Name/Number	Categories	Cost		
See	1406 HA Wide	Operations	\$54,000	1406 HA Wide	Operations	\$60,000		
Annual	1408 HA Wide	Manag. Improve	\$22,547	1475	Main. Equip	\$11,724		
Statement	1410 HA Wide	Admin	\$30,000	1411 HA Wide	Audit	\$2,000		
	1411 HA Wide	Audit	\$1,000	1430 HA Wide	Fees & Costs	\$19,834		
	1430 HA Wide	Fees & Costs	\$10,691					
	1450	Site Improve	\$77,656	1450	Site Improve	\$72,273		
	1460	Dwellings	\$105,953	1460	Dwellings	\$139,000		
	1465	Dwelling Equip	\$18,359					
	Total CFP Estimated	Cost	\$320,206			\$304,831		

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

	ng Pages—Work Act		<u> </u>			
Ad		003	Act	ivities for Year: <u>20</u>	<u>04_</u>	
	FFY Grant:			FFY Grant:		
	PHA FY:			PHA FY:		
Development	Major Work	<b>Estimated Cost</b>	Development	Major Work	<b>Estimated Cos</b>	
Name/Number	Categories		Name/Number	Categories		
<i>1460-01</i>	Community Room	\$28,000	1430-01	A & E Services	\$20,000	
	Remodel					
WI-103-01	Elevator Upgrade	\$205,649	1450-01	3 Stall Garage	\$35,000	
HA-Wide	Operations	\$30,000	HA-Wide	<b>Operations</b>	\$49,000	
1408-01	Upgrade	\$3,000	1450-02	Bike Storage	\$5,000	
	Computers					
1430-01	Consultant	\$5,000	1450-03	Landscape	\$10,000	
	Services			Work		
1460-02	Hallway	\$10,000	1450-04	Security	\$5,000	
	Carpeting			Camera		
1475-01	Security	\$3,771	1460-01	Create Fitness	\$5,000	
	Equipment			Room		
			1460-02	Carpet	\$25,000	
				Hallways &		
				<i>Office</i>		
			1460-03	Interior	\$20,000	
				Painting		
			1460-04	Kitchen Room	\$35,000	
				Project	,	
			1450-05	Scattered Site	\$10,000	
				Landscape	,	
				Work		
			1460-05	Install 60	\$30,000	
				Vanities	. ,	

			HA-Wide	Audit	\$1,000
			HA-Wide	Purchase Main	\$12,000
				Vehicle	
	Total CFP Cost	\$285,420			\$262,000
Total CFP Estimated Cost					\$

# CAPITAL FUND PROGRAM TABLES START HERE

Ann	ual Statement/Performance and Evalu	ation Report					
Cap	ital Fund Program and Capital Fund P	rogram Replacem	ent Housing Factor	(CFP/CFPRHF) P	art I: Summary		
PHA N		Grant Type and Number	•		Federal FY of Grant:		
APPLI	ETON HOUSING AUTHORITY		tt No: <b>WI39PO06550203</b>		2003		
		Replacement Housing Factor					
	ginal Annual Statement $\square$ Reserve for Disasters/ Eme						
	formance and Evaluation Report for Period Ending:						
Line	Summary by Development Account	Total Es	timated Cost	Total	Actual Cost		
No.				0111 1	T		
		Original	Revised	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations						
3	1408 Management Improvements	\$3,000					
4	1410 Administration						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs	\$5,000					
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures	\$38,000					
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Nondwelling Structures						
13	1475 Nondwelling Equipment	\$3,771	\$1,139.00	\$1,139.00	\$1,139.00		
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						

Annı	Annual Statement/Performance and Evaluation Report									
Capi	tal Fund Program and Capital Fund P	rogram Replaceme	ent Housing Factor (C	CFP/CFPRHF) Par	t I: Summary					
PHA N		<b>Grant Type and Number</b>		Federal FY of Grant:						
APPLETON HOUSING AUTHORITY			No: WI39PO06550203		2003					
		r Grant No								
	Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement revision no:									
<b>⊠</b> Perf	formance and Evaluation Report for Period Ending: 0	3/31/04 Final Perform	ance and Evaluation Report							
Line	Summary by Development Account	Total Estimated Cost Total			ctual Cost					
No.										
		Original	Revised	Obligated	Expended					
20	1502 Contingency									
21	Amount of Annual Grant: (sum of lines $2-20$ )	\$49,771								
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)

Part II: Supporting Pages

PHA Name:	you mig 1 uges	Grant Type and I	Number			Federal FY of Grant:			
APPLETON HO	OUSING AUTHORITY	Capital Fund Prog Replacement Hou	Capital Fund Program Grant No: WI39PO6550203 Replacement Housing Factor Grant No:				2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Ac	ctual Cost	Status of Work	
retivities				Original	Revised	Funds Obligated	Funds Expended		
1408-01	Upgrade Computer Equipment & Software			\$3,000					
1430-01	PR Marketing Consultant Services & Brochure, Logo Development, A & E Fees for OH Project			\$5,000					
1460-01	Community Room Remodel			\$28,000					
1460-02	Hallway Carpeting at Oneida Heights			\$10,000					
1475-01	Security Equipment-Main Office			\$3,771	\$1,139	\$1,139	\$1,139	Completed	

	Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II: Supporting Pages										
PHA Name: APPLETON HO	OUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: WI39PO6550203 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Actual Cost		Status of Work		
				Original	Revised	Funds Obligated	Funds Expended			
	Total			\$49,771						

Annual Statement	t/Performa	ance an	d Evaluatio	n Report			
Capital Fund Pro	gram and	Capital	l Fund Prog	gram Replac	ement Hous	ing Factor	r (CFP/CFPRHF)
Part III: Impleme	entation S	chedule	2				
PHA Name:		Gr	ant Type and Nur	nber			Federal FY of Grant:
<b>APPLETON HOUSI</b>	NG	C	apital Fund Progra	m No: <b>WI39PO</b>	06550203		2003
AUTHORITY		R	eplacement Housin	g Factor No:			
Development Number	All	Fund Obli	bligated All Funds Expended			Reasons for Revised Target Dates	
Name/HA-Wide Activities	(Qua	arter Ending	g Date)	(Quarter Ending Date)			
Tienvines	Original	Revised	d Actual	Original	Revised	Actual	
1408-01	12/31/04			03/30/05			
1430-01	12/31/04			03/30/05			
1460-01	12/31/04			03/30/05			
1460-02	12/31/04			03/30/05			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: APPLETON HOUSI AUTHORITY	Capit	Grant Type and Number Capital Fund Program No: WI39PO06550203 Replacement Housing Factor No:				Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	(Qua	Fund Obligat arter Ending D	•		Reasons for Revised Target Dates		
1.455.04	Original	Revised	Actual	Original	Revised	Actual	
1475-01	12/31/04		03/31/04	03/30/05		03/31/04	Project Complete-Cost less than estimated



Ann	Annual Statement/Performance and Evaluation Report						
	tal Fund Program and Capital Fund P	-	nent Housing Facto	or (CFP/CFPRHF) P	Part 1: Summary		
PHA N	ame:	Grant Type and Number	Federal FY of Grant:				
l			VI39-PO65-501-02				
	eton Housing Authority		ng Factor Grant No:	-1	2002		
	ginal Annual Statement			Revised Annual Statement	(revision no: 3)		
	formance and Evaluation Report for Period Ending D	Ź	Final Performance a		1.0		
Line No.	Summary by Development Account	Total I	Estimated Cost	Total	Actual Cost		
NO.		Original	Revised	Obligated	Expended		
1	Total non-CFP Funds	5		9	•		
2	1406 Operations		\$60,000	\$60,000	\$60,000		
3	1408 Management Improvements	\$10,000	0	0	0		
4	1410 Administration						
5	1411 Audit	\$2,000	\$2,000	\$2,000	\$2,000		
6	1415 liquidated Damages						
7	1430 Fees and Costs	\$23,000	\$19,834	\$19,834	\$19,834		
8	1440 Site Acquisition						
9	1450 Site Improvement	\$127,000	\$72,273	\$72,272	\$60,890.		
10	1460 Dwelling Structures	\$153,000	\$139,000	\$134,449	\$134,449		
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Nondwelling Structures						
13	1475 Nondwelling Equipment	\$5,000	\$11,724	\$11,724	\$11,724		
14	1485 Demolition						
15	1490 Replacement Reserve						
16	1492 Moving to Work Demonstration						
17	1495.1 Relocation Costs						
18	1498 Mod Used for Development						
19	1502 Contingency						
20	Amount of Annual Grant: (sum of lines 2-19)	\$320,000	\$304,831		\$287,068.		
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Compliance						
23	Amount of line 20 Related to Security						

	Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary							
PHA N	ame:	Grant Type and Number			Federal FY of Grant:			
Ori	eton Housing Authority ginal Annual Statement formance and Evaluation Report for Period Ending D				2002 vision no: 3)			
Line	Summary by Development Account	Total Estimated Cost Total			tual Cost			
<b>No.</b> 24	Assessment of the 20 Deleted to Engage Conservation		T		T			
24	Amount of line 20 Related to Energy Conservation Measures							

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

PHA Name:		Grant Type and Nu	mber		Federal FY of Grant:			
Appleton Housin	ng Authority	Capital Fund Progr Capital Fund Progr Replacement I		2002				
Development	General Description of Major Work	Dev. Acct No.	Quantity	Total Esti	Total Estimated Cost		tual Cost	Status of
Number	Categories				1		ı	Proposed
Name/HA-Wide Activities				Original	Revised	Funds Obligated	Funds Expended	Work
HA-wide	Operations	1408		\$10,000	\$60,000	\$60,000	\$60,000	
HA-wide	Tools, Maintenance Office Equip.	1475		\$5,000	\$11,724	\$11,724	\$11,724	
HA-wide	Audit Costs	1411		\$2,000	\$2,000	\$2,000	\$2,000	
HA-wide	A & E Fees	1430		\$23,000	\$19,834	\$19,834	\$19,834	
002-50	Landscape project	1450		\$40,000	\$2,953.51	\$2,953.51	\$2,953.51	
002-51	Parking Lot, Curb, Blacktop-Combined	1450		\$35,000				Combined
002-52	OH Sidewalk rear to front-Combined	1450		\$6,000				Combined
002-60	Model Unit	1460		\$6,000	0			Deleted
002-53	Construct Exterior Patio OH-Combined	1450		\$30,000				Combined
002-54	Sidewalk repairs scattered sites	1450		\$3,000	0			Deleted
002-61	Painting 70 units OH	1460		\$35,000	0			Deleted
002-62	Com. Room Project OH-Combined	1460		\$30,000				Combined
002-63	Construct garage scattered site	1460		\$10,000	0			Deleted
002-64	Install 152 bathroom vanities	1460		\$50,000	0			Deleted
002-65	Replace carpet OH Halls	1460		\$20,000	0			Deleted
002-66	OH signage	1450		\$3,000	0			Deleted
002-67	Update fire alarm	1460		\$12,000	0			Deleted

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

PHA Name:		Type and Nur			Federal FY of Grant:		
Appleton Housing Authori	ity	Capit	tal Fund Progra	m #: WI30-PO65	5-501-02		2002-Proposed
	Capit	tal Fund Progra	m Replacement Hou	sing Factor #:			
Development Number	Development Number All Fund Obliga				l Funds Expended		Reasons for Revised Target Dates
Name/HA-Wide	(Qua	rt Ending Da	ate)	(Qı	uarter Ending Date	e)	
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
HA-wide	06/30/03			12/31/03			
HA-wide	6/30/03			12/31/03			
HA-wide	9/30/03			03/30/04			
HA-wide	6/30/03			12/31/03			
002-50	8/30/03			12/31/03			
002-51	8/30/03			12/31/03			
002-52	8/30/03			12/31/03			
002-60	6/30/03			12/31/03			
002-53	8/30/03			12/31/03			
002-54	8/30/03			12/31/03			
002-61	6/30/03			9/30/03			
002-62	9/30/03			12/31/03			
002-63	8/30/03			12/31/03			
002-64	9/30/03	_		12/31/03			
002-65	3/30/03			6/30/03			
002-66	6/30/03			9/30/03			
002-67	9/30/03			12/31/03			

# CAPITAL FUND PROGRAM TABLES START HERE

Ann	Annual Statement/Performance and Evaluation Report						
Cap	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA N	PHA Name: Grant Type and Number						
		Capital Fund Program Gra	ant No: WI39PO6550103				
	ETON HOUSING AUTHORITY	Replacement Housing Fac			2003		
	ginal Annual Statement Reserve for Disasters/ Eme						
	formance and Evaluation Report for Period Ending:		formance and Evaluation I	<u> </u>			
Line No.	Summary by Development Account	Total E	Sstimated Cost	Total	Actual Cost		
NO.		Original	Revised	Obligated	Expended		
1	Total non-CFP Funds	01.2g	22012504				
2	1406 Operations	\$30,000.00	\$30,000.00	\$30,000.00	\$30,000.00		
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	\$205,649.00	\$205,649.00	\$205,649.00	\$144,860.00		
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Nondwelling Structures						
13	1475 Nondwelling Equipment						
14	1485 Demolition						
15	1490 Replacement Reserve						
16	1492 Moving to Work Demonstration						
17	1495.1 Relocation Costs						
18	1499 Development Activities						
19	1501 Collaterization or Debt Service						

Ann	Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary								
PHA N	ame:	Grant Type and Number	•		Federal FY of Grant:			
APPLE	ETON HOUSING AUTHORITY	Capital Fund Program Gr Replacement Housing Fa	ant No: WI39PO6550103 etor Grant No:		2003			
	ginal Annual Statement Reserve for Disasters/ Emer							
⊠Per	formance and Evaluation Report for Period Ending:	3/31/04	formance and Evaluation I	Report				
Line	Summary by Development Account	Total 1	Estimated Cost	Total	Actual Cost			
No.								
		Original	Revised	Obligated	Expended			
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$235,649.00	\$235,649.00	\$235,649.00	\$174,860.00			
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)

Part II: Supporting Pages

PHA Name: AP	PHA Name: APPLETON HOUSING		Number	2020122010	Federal FY of Grant: 2003			
AUTHORITY			gram Grant No: WI					
D 1	C 1D ::: CM: W 1		sing Factor Grant N		. 10	TD + 1 A	. 10 .	C
Development	General Description of Major Work	Dev. Acct No.	Quantity	Total Estir	nated Cost	Total Actual Cost		Status of
Number Name/HA-Wide	Categories							Work
Activities								
Activities				Original	Revised	Funds	Funds	
				Original	Keviseu	Obligated	Expended	
WI-103-01	ELEVATOR UPGRADE-NEW CARS		2	\$205,649.00		\$205,629	\$144,860.00	In Process
	ONEIDA HEIGHTS PROJECT							
*** *** 1.400				<b>#20.000.00</b>		<b>#20.000.00</b>	<b>#20</b> 000 00	G 1
HA-Wide103	Operations			\$30,000.00		\$30,000.00	\$30,000.00	Complete

<b>Annual Statement</b>	t/Performa	ance and I	Evaluatio	n Report			
Capital Fund Pro	O	-	und Prog	ram Replac	ement Hous	ing Factor	(CFP/CFPRHF)
Part III: Impleme							
	PHA Name: APPLETON HOUSING		Type and Num		7770102		Federal FY of Grant: 2003
AUTHORITY			Capital Fund Program No: WI30PO6550103 Replacement Housing Factor No:				2003
Development Number All Fund Ob		Fund Obligate arter Ending Da	ted	Al	All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
11001.1000	Original	Revised	Actual	Original	Revised	Actual	
WI-103-01	6-30-04		09/30/03	9/30/04			
HA WIDE 103	12/30/04		03/31/04	12/30/04		03/31/04	
							-
			-			+	-
	+		+			+	
		<u> </u>			 		