PHA Plans

U.S. Department of Housing and Urban Development

OMB No. 2577-0226 (exp 05/31/2006)

Streamlined 5-Year/Annual Version

Office of Public and Indian Housing

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 to certain 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 5-Year Plan for Fiscal Years 20<u>05</u> - 20<u>09</u> Streamlined Annual Plan for Fiscal Year 20<u>05</u>

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. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.

PHA Name: The Housing Authority Of the City of Williston

5-Year Plan for Fiscal Years: 2005 - 2009

Annual Plan for FY 2005

ND002 HA Code:

Streamlined Five-Year PHA Plan Agency Identification

PHA Name: The Housing Au	thority Of	the City of Williston	PHA Number	r: ND002
PHA Fiscal Year Beginnin	g: (mm/	yyyy) 01/2005		
PHA Programs Administer	red:			
Public Housing and Section		ction 8 Only	ublic Housing Onl	V
Number of public housing units: 128 Number of S8 units: 32			er of public housing units	
PHA Consortia: (check be	ox if subn	nitting a joint PHA P	lan and complete	table)
Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				
Public Access to Information Information regarding any action (select all that apply) Main administrative office PHA development manage PHA local offices	vities out e of the Pl	НА	be obtained by co	ontacting:
Display Locations For PH The PHA Plans and attachments				ct all that
apply) ⊠ Main administrative offic	e of the PI	ЦΛ		
PHA development manag				
PHA local offices				
Main administrative office	e of the lo	cal government		
Main administrative office		• •		
Main administrative office	e of the St	ate government		
Public library				
PHA website Other (list below)				
PHA Plan Supporting Documents		able for inspection at:	(select all that appl	ly)
Main business office of the	ie PHA			

PHA Nam	e: The Housing Authority Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005
HA Code:	ND002 PHA development management offices Other (list below)
	Streamlined Five-Year PHA Plan
	PHA FISCAL YEARS 20_05 20_09
	[24 CFR Part 903.12]
	<u>ission</u>
	PHA's mission for serving the needs of low-income, very low income, and extremely low-income families HA'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.
\boxtimes	The PHA's mission is:
and aff	ssion of the Housing Authority of the City of Williston is to provide clean, safe, decent, ordable housing to families regardless of race, color, national origin, religion, sex, family age, or disability, and to serve our community in a professional and compassionate r.
in recent objective ENCOU OBJEC numbers	Is and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized a legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or es. Whether selecting the HUD-suggested objectives or their own, PHAs ARE STRONGLY PRAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR TIVES OVER THE COURSE OF THE 5 YEARS. (Quantifiable measures would include targets such as: of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the or below the stated objectives.
HUD S	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: by 75% Leverage private or other public funds to create additional housing opportunities: Acquire or build units or developments Other (list below)
	PHA Goal: Improve the quality of assisted housing Objectives: Improve public housing management: (PHAS score) move from "Standard Performer" to "High Performer" Improve voucher management: (SEMAP score) increase score by 10 pts. Increase customer satisfaction:

PHA Nam	e: The Housing Authority Of the City of Williston	5-Year Plan for Fiscal Years: 2005 -	2009 Annual Plan for FY 2005	
HA Code:	Concentrate on (list; e.g., public Renovate or mo Demolish or dis		unit inspections) s:	
	Conduct outread Introduct maintain Increase vouche Implement vouc Implement publ Implement publ	r mobility counseling: ch efforts to potential vouch e more landlords to the ben a list of potential landlords r payment standards cher homeownership progra ic housing or other homeow ic housing site-based waitin housing to vouchers:	efits of the voucher program ans. m: vnership programs:	ıd
HUD S	Strategic Goal: Improv	ve community quality of li	fe and economic vitality	
	Objectives: Implement mean housing househousing househousing househousehousehousehousehousehousehouse	olds into lower income deversures to promote income mistincome families into higher ic housing security improve opments or buildings for parabilities) w) ge formation of neighborhow enforcement agencies.	rty by bringing higher income pelopments: xing in public housing by assurer income developments: ements: articular resident groups (elderly od watch groups and cooperation	ring y, on with
HUD S individ	_	te self-sufficiency and asse	et development of families and	1
	Objectives: Increase the nur Work w	nber and percentage of emp	elopment of assisted household loyed persons in assisted famili information of job opportunitie	ies:

PHA Name	The Housing Authority Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005
HA Code:	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 St	trategic 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: Increase outreach efforts and develop informational materials promoting housing opportunities for all members of our community.
	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 unit size required:
[Other: (list below) Expand availability of accessible units by utilizing CFP funds to add accessible features to current non-accessible units.

Other PHA Goals and Objectives: (list below)

PHA Name: The Housing Authority Of the City of Williston

5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005

ND002 HA Code:

Annual Plan for FY 2005

HA Code: ND002

Streamlined Annual PHA Plan

PHA Fiscal Year 20_05_

[24 CFR Part 903.12(b)]

Table of Contents

Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

A. ANNUAL STREAMLINED PHA PLAN COMPONENTS

\boxtimes	1. Housing Needs
\boxtimes	2. Financial Resources
\boxtimes	3. Policies on Eligibility, Selection and Admissions
\boxtimes	4. Rent Determination Policies
\boxtimes	5. Capital Improvements Needs
	6. Demolition and Disposition
	7. Homeownership
	8. Civil Rights Certifications (included with PHA Certifications of Compliance)
\boxtimes	9. Additional Information
	a. PHA Progress on Meeting 5-Year Mission and Goals
	b. Criteria for Substantial Deviations and Significant Amendments
	c. Other Information Requested by HUD
	 Resident Advisory Board Membership and Consultation Process
	ii. Resident Membership on the PHA Governing Board
	iii. PHA Statement of Consistency with Consolidated Plan
	iv. (Reserved)
	10. Project-Based Voucher Program
\boxtimes	11. Supporting Documents Available for Review
	12. FY 20_05_ Capital Fund Program and Capital Fund Program Replacement Housing
	Factor, Annual Statement/Performance and Evaluation Report
\boxtimes	13. Capital Fund Program 5-Year Action Plan
\boxtimes	14. Other (List below, providing name for each item)
	Attachment A: CFP 2000 Final Report
	Attachment B: CFP 2001 Performance and Evaluation Report
	Attachment C: CFP 2002 Performance and Evaluation Report
	Attachment D: CFP 2003-1 Performance and Evaluation Report
	Attachment E: CFP 2003-2 Performance and Evaluation Report
	Attachment F: CFP 2004 Performance and Evaluation Report

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50077, <u>PHA Certifications of Compliance with the PHA Plans and Related</u>
Regulations: Board Resolution to Accompany the Standard Annual, Standard Five-Year, and
Streamlined Five-Year/Annual Plans;

Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.

Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009

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For PHAs APPLYING FOR CAPITAL FUND PROGRAM (CFP) GRANTS:

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

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

Form SF-LLL & SF-LLLa, Disclosure of Lobbying Activities.

Executive Summary (optional)

[903.7(r)]. If desired, provide a brief overview of the contents of the streamlined 5-Year/Annual Plan.

1a. Statement of Housing Needs [24 CFR Part 903.12 (b), 903.7(a)]

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

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

	Housing Needs of Families on the PHA's Waiting Lists				
Waiting list type: (select one)					
Section 8 tenant-based	assistance				
Public Housing					
Combined Section 8 ar					
		al waiting list (optional)			
If used, identify which	ch development/subjuri		1		
	# of families	% of total families	Annual Turnover		
Waiting list total					
Extremely low income	41	100			
<=30% AMI					
Very low income	0	0			
(>30% but <=50% AMI)					
Low income	0	0			
(>50% but <80% AMI)					
Families with children	26	63			
Elderly families	4	10			
Families with Disabilities	11	27			
Race/ethnicity	28	68			
White Non-Hispanic			'		
Race/ethnicity	11	27			
Native Am. Non-Hispanic					
Race/ethnicity	2	5			
White Hispanic					
Race/ethnicity					
Characteristics by Bedroom					
Size (Public Housing Only)					
1BR					
2 BR					
3 BR					
4 BR					

1b. Statement of Housing Needs [24 CFR Part 903.12 (b), 903.7(a)]

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

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

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one)	sing recess of Families	on the Hill 5 watting Lis	10
Section 8 tenant-based	assistance		
Public Housing	assistance		
Combined Section 8 an	d Public Housing		
	ased or sub-jurisdictiona	l waiting list (optional)	
	ch development/subjuris		
	# of families	% of total families	Annual Turnover
Waiting list total	3		
Extremely low income	3	100	
<=30% AMI			
Very low income	0	0	
(>30% but <=50% AMI)			
Low income	0	0	
(>50% but <80% AMI)			
Families with children	2	67	
Elderly families	0	0	
Families with Disabilities	2	67	
Race/ethnicity	2	67	
White Non-Hispanic			
Race/ethnicity	1	33	
Native Am. Non-Hispanic			
Race/ethnicity			
White Hispanic			
Race/ethnicity			
Characteristics by Bedroom			
Size (Public Housing Only)			
1BR			
2 BR	1	33	
3 BR			
4 BR	2	67	

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HA Code:	ND002				
	Hous	ing Needs of Families	on the PHA's Waiting List	ts	
5 BR					
5+ BR	1.1 11 1 1 1 1				
Is the w If yes:	vaiting list closed (selec	ct one)? 🛛 No 🔲 Ye	es		
n yes.	How long has it been	closed (# of months)?			
			e PHA Plan year? 🔲 No 🗀	Yes	
			families onto the waiting list,		
	☐ No ☐ Yes				
	rategy for Address		11 ' 3 1 ' 1	66 ''' 4 DYYA 11'	
				s of families on the PHA's public by's reasons for choosing this	
strategy	_	iists IIV THE OT COM	invo Tean, and the Agenc	y s reasons for choosing this	
(1) St	<u>rategies</u>				
		dable housing for	all eligible population	S	
	G	G			
Strate	gy 1. Maximize th	ne number of affor	dable units available t	to the PHA within its	
currer	nt resources by:				
Select a	ll that apply				
	- •		anagement policies to n	ninimize 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 finance				
	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 measur	res to ensure access	to affordable housing a	mong families assisted by	
_	_	ss of unit size requi			
			ip rates by marketing th	- -	
_	-		minority and poverty co		
			-	creening Section 8 applicants	
		acceptance of progr			
	_		levelopment process to	ensure coordination with	
-	broader communi	ty strategies			
\boxtimes	Other (list below)				
			Housing availability to	decrease vacancies thus	
	assisting more households.				
		e number of afford	able housing units by:		
Select a	ll that apply				

PHA Nam	e: The Housing Authority Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005
	Apply for additional section 8 units should they become available Leverage affordable housing resources in the community through the creation of mixed - e housing Pursue housing resources other than public housing or Section 8 tenant-based assistance. Other: (list below) Rather than increase the number of affordable housing units at this time, our goal is to fully utilize the units we currently have vacant and then more accurately determine what needs may exist. Specific Family Types: Families at or below 30% of median
Strate	gy 1: Target available assistance to families at or below 30 % of AMI
	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
	Our current waiting list consists of families below 30% of the AMI. Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
	Our current waiting list consists of families below 30% of the AMI. Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work Other: (list below)
Need:	Specific Family Types: Families at or below 50% of median
	gy 1: Target available assistance to families at or below 50% of AMI l that apply
	Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below) Households currently on our waiting list are at or below 50% of AMI.
Need:	Specific Family Types: The Elderly
	gy 1: Target available assistance to the elderly:
	Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available Other: (list below) Increase outreach efforts to elderly to fill vacant units in our elderly complex.
Need:	Specific Family Types: Families with Disabilities

Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005 HA Code: ND002 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 vouchers targeted to families with disabilities, should they become available Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below) Utilize CFP funding to increase the number of accessible units in current housing stock. 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) Increase outreach efforts to families of races and ethnicities with disproportionate needs by more frequent advertising and contacts. 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 \boxtimes Other: (list below) Increase tenant awareness of fair housing rights. Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

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

-	
	Funding constraints
	Staffing constraints
I	Limited availability of sites for assisted housing
\boxtimes	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

HA Code:	ND002
\boxtimes	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)

5-Year Plan for Fiscal Years: 2005 - 2009

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2. Statement of Financial Resources

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

PHA Name: The Housing Authority

Of the City of Williston

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

Financial Resources:				
Planned Sources and Uses Sources Planned \$ Planned Uses				
1. Federal Grants (FY 2005 grants)				
a) Public Housing Operating Fund	224,369 (est.)			
b) Public Housing Capital Fund	0			
c) HOPE VI Revitalization	0			
d) HOPE VI Demolition	0			
e) Annual Contributions for Section 8 Tenant- Based Assistance	84,206 (est.)			
f) Resident Opportunity and Self-Sufficiency Grants	0			
g) Community Development Block Grant	0			
h) HOME	0			
Other Federal Grants (list below)				
2. Prior Year Federal Grants (unobligated				
funds only) (list below)				

PHA Name: The Housing Authority Of the City of Williston

5-Year Plan for Fiscal Years: 2005 - 2009

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HA Code: ND002		
	nancial Resources: ned Sources and Uses	
Sources	Planned \$	Planned Uses
CFP FY 2001	79,000 (est.)	Public Housing Operations
3. Public Housing Dwelling Rental Income	153,320 (est.)	
3. I ubile Housing Dweining Rental Income	133,320 (cst.)	
4. Other income (list below)		
4. Non-federal sources (list below)		
Total resources		
	ATA: 07 T	
3. PHA Policies Governing Eligib	oility, Selection, and	<u>Admissions</u>
[24 CFR Part 903.12 (b), 903.7 (b)]		
A. Public Housing		
Exemptions: PHAs that do not administer public l	housing are not required to con	mplete subcomponent 3A.
(1) Eligibility		
777 1 d 7774 10 d 11 d 11 d		
a. When does the PHA verify eligibility for	<u>=</u>	
When families are within a certain When families are within a certain	•	
Other: (describe)	tillle of being offered a t	init. (state time) 4 weeks
Guier. (deseribe)		
b. Which non-income (screening) factors	does the PHA use to esta	blish eligibility for admission
to public housing (select all that apply)		
Criminal or Drug-related activity		
Rental history		
Housekeeping		
Other (describe)		
a ✓ Vas ☐ No: Doos the DHA request	ariminal records from lo	and law enforcement agencies
c. Yes No: Does the PHA request for screening purp		car iaw chroicement agencies
d. Yes No: Does the PHA reques		State law enforcement agencies
for screening purp		
e. Yes No: Does the PHA access		om the FBI for screening
	directly or through an NC	

HA Code:

ND002

(2)Waiting List Organization

a. Whi	ch methods does the PHA plan to use to organize its public housing waiting list (select all
that	apply)
\boxtimes	Community-wide list
	Sub-jurisdictional lists
	Site-based waiting lists
	Other (describe)
b. Wh	ere may interested persons apply for admission to public housing?
\boxtimes	PHA main administrative office
	PHA development site management office
	Other (list below)
c. Site	e-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 d.
	No

		Site-Based Waiting Li	sts	
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

2. What is the nuat one time?	mber of site ba	ased waiting list devel	lopments to which fam	ilies may apply
3. How many unbased waiting list	•	n applicant turn down	before being removed	from the site-
			nding fair housing com scribe the order, agree	-

HA Code:

ND002

complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

d. 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 subsection (3) Assignment

1. How many site-based waiting lists will the PHA operate in the coming year?
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below) (3) Assignment
 a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one) One Two Three or More
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 admissions to public housing to families at or below 30% of median area income?

PHA Name: The Housing Authority Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005
b. Transfer policies: In what circumstances will transfers take precedence over new admissions? (list below) Emergencies Over-housed Under-housed Medical justification Administrative reasons determined by the PHA (e.g., to permit modernization work) Resident choice: (state circumstances below) Other: (list below)
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 point 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

	Of the City of Williston	5-Year Plan for Fiscal Years: 2005 - 2009	Annual Plan for FY 2005
	ND002 Federal preferences: Involuntary Displaceme Owner, Inaccessibility, Victims of domestic vic Substandard housing Homelessness High rent burden	- · -	Action of Housing
	Veterans and veterans' Residents who live and Those enrolled currentl Households that contrib Households that contrib	hose unable to work because of age families /or work in the jurisdiction y in educational, training, or upware oute to meeting income goals (broad oute to meeting income requirement led in educational, training, or upware that crimes	d mobility programs d range of incomes) ts (targeting)
	The PHA applies prefer	to income targeting requirements: rences within income tiers of of applicant families ensures that	the PHA will meet income
(5) Occ	<u>cupancy</u>		
of od 	ecupancy of public hous The PHA-resident lease	and (Continued) Occupancy policy	
apply		osition changes	composition? (select all that
(6) Dec	concentration and Inco	ome Mixing	
		PHA have any general occupancy (family) public housing

PHA Name: The Housing Auth Of the City of Wi		Year Plan for Fiscal Years: 2005 - 2009	Annual Plan for FY 2005
HA Code: ND002	-	s covered by the deconcentration yes, continue to the next question	
b. Yes No:	below 85%	nese covered developments have to 115% of the average incomes ion is complete. If yes, list these ble:	of all such developments? If
	Deconcer	tration Policy for Covered Developm	nents
Development Name	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]
Unless otherwise specifi	ied, all question	r section 8 are not required to complete s in this section apply only to the tens	ant-based section 8 assistance
program (vouchers, and	d until complete	ly merged into the voucher program	, certificates).
(1) Eligibility			
Criminal or d	lrug-related ac drug-related a screening tha	conducted by the PHA? (select a tivity only to the extent required activity, more extensively than remains and drug-related activity.	by law or regulation equired by law or regulation
b. Xes No: D		request criminal records from looning purposes?	cal law enforcement agencies
c. Yes No: 1		request criminal records from S ng purposes?	tate law enforcement agencies
d. Yes No: 1		access FBI criminal records from the directly or through an NC	_
e. Indicate what kind	ds of informat	ion you share with prospective la	andlords? (select all that
apply)	lrug-related ac		
(2) Waiting List Or	ganization		
a. With which of the	e following pro	ogram waiting lists is the section	8 tenant-based assistance

	Of the City of Williston	5-Year Plan for Fiscal Years: 2005 - 2009	Annual Plan for FY 2005
	ND002 ting list merged? (selec None Federal public housing Federal moderate rehab Federal project-based c Other federal or local p	ilitation ertificate program	
(sel	ere may interested person ect all that apply) PHA main administrati Other (list below)	ons apply for admission to section 8 ve office	tenant-based assistance?
(3) Sea	rch Time		
	Yes No: Does the Funit? state circumstances below For hard-to-hou		-day period to search for a
(1) Adr	nissions Preferences		
(4) Aui	mssions i references		
a. Inco	me targeting		
	more than or below 30	HA plan to exceed the federal target 75% of all new admissions to the second of median area income?	
b. Prefe	Yes No: Has the based as	PHA established preferences for addissistance? (other than date and time conent (5) Special purpose section	of application) (if no, skip to
	_	nission preferences does the PHA pl n either former Federal preferences of	± •
	Inaccessibility, Property Victims of domestic vic Substandard housing Homelessness	•	Action of Housing Owner,
	references (select all th Working families and t Veterans and veterans'	hose unable to work because of age	or disability

	Of the City of Williston	5-Year Plan for Fiscal Years: 200)5 - 2009	Annual Plan for FY 2005	
HA Code:	Residents who live and Those enrolled current Households that contri Households that contri		g, or upward n goals (broad ra requirements (ange of incomes) targeting)	
that rep If you g through	presents your first priori	nissions preferences, pleaty, a "2" in the box represe or more of these choice the same number next to a, etc.	esenting your ses (either throu	second priority, and so igh an absolute hierarc	on. hy or
\boxtimes	Date and Time				
Former	Federal preferences: Involuntary Displacem Inaccessibility, Propert Victims of domestic vi Substandard housing Homelessness High rent burden	• 1 /	nt Action, Act	tion of Housing Owner	•,
Other p	Veterans and veterans' Residents who live and Those enrolled current Households that contri Households that contri	those unable to work bec families dor work in your jurisdic ly in educational, training bute to meeting income g bute to meeting income a led in educational, training hate crimes	ction g, or upward n goals (broad ra requirements (nobility programs ange of incomes) targeting)	
	d? (select one) Date and time of applie	vaiting list with equal pre cation her random choice techn		, how are applicants	
	diction" (select one) This preference has pre	preferences for "resident eviously been reviewed a roval for this preference	and approved b	by HUD	

1 112 1 1 1 1111	Of the City of Williston	5-Year Plan for Fiscal Years:	2005 - 2009	Annual Plan for FY 2005
HA Code: 6. Rel	ationship of preferences The PHA applies prefer	ences within income	tiers	lect one) e PHA will meet income
(5) S ₁	pecial Purpose Section S	8 Assistance Progra	<u>ms</u>	
sele	which documents or other ction, and admissions to tained? (select all that ap The Section 8 Administ Briefing sessions and w Other (list below) N/A	any special-purpose ply) rative Plan		governing eligibility, m administered by the PHA
	w does the PHA announg public? Through published notice Other (list below) N/A	•	any special-purp	ose section 8 programs to
[24 CFF A. P t	HA Rent Determinate Part 903.12(b), 903.7(d)] ablic Housing ions: PHAs that do not admir		not required to comp	nlete sub-component 4A
		_	iot required to comp	pete suo-component +A.
Describ	come Based Rent Polici e the PHA's income based rer irred by statute or regulation)	nt setting policy/ies for pu		including discretionary (that is, ropriate spaces below.
a. Use	of discretionary policies	: (select one of the fo	ollowing two)	
	public housing. Income income, 10% of unadjust	e-based rents are set a sted monthly income	at the higher of 30, the welfare rent	cies for income-based rent in 0% of adjusted monthly c, or minimum rent (less ip to sub-component (2))
	The PHA <u>employs</u> discrecontinue to question b.)	retionary policies for	determining inco	ome-based rent (If selected,
b. Miı	nimum Rent			
1. Wha	at amount best reflects th \$0 \$1-\$25	e PHA's minimum re	ent? (select one)	

PHA Name: The Housing Authority Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005
HA Code: ND002 \$26-\$50
2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?
3. If yes to question 2, list these policies below:
c. Rents set at less than 30% of 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:
 d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply) For the earned income of a previously unemployed household member For increases in earned income Fixed amount (other than general rent-setting policy) If yes, state amount/s and circumstances below:
Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances below:
For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below)
e. Ceiling rents
1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)
Yes for all developments 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)

PHA Name: The Housing Authority Of the City of Williston 5-Year Plan for Fiscal Year	ars: 2005 - 2009 Annual Plan for FY 2005
HA Code: ND002 For specified general occupancy developm For certain parts of developments; e.g., the For certain size units; e.g., larger bedroom Other (list below)	e high-rise portion
3. Select the space or spaces that best describe he apply)	ow you arrive at ceiling rents (select all that
Market comparability study Fair market rents (FMR) 95 th percentile rents 75 percent of operating costs 100 percent of operating costs for general Operating costs plus debt service The "rental value" of the unit Other (list below)	occupancy (family) developments
f. Rent re-determinations:1. Between income reexaminations, how often m composition to the PHA such that the changes res apply)	
Never At family option Any time the family experiences an income percentage: (if selected, specify threshold) Other (list below)	increase above a threshold amount or
g. Yes No: Does the PHA plan to implem (ISAs) as an alternative to the required 12 month of rent increases in the next year?	nent individual savings accounts for residents disallowance of earned income and phasing in
(2) Flat Rents	
 a. In setting the market-based flat rents, what sou establish comparability? (select all that apply.) The section 8 rent reasonableness study of Survey of rents listed in local newspaper Survey of similar unassisted units in the notother (list/describe below) 	comparable housing
B. Section 8 Tenant-Based Assistance	hand assistance are not required to complete sub-

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete subcomponent 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 HA Code:

ND002

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 below100% 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 payment 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) HUD-determined FMR's for the County
(2) Minimum Rent
 a. What amount best reflects the PHA's minimum rent? (select one) \$0 \$1-\$25 \$26-\$50

PHA Name: The Housing Auth Of the City of Wil	
HA Code: ND002 b. Yes No: H	Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)
5. Capital Impro [24 CFR Part 903.12(b),	903.7 (g)]
Exemptions from Compo Component 6.	nent 5: Section 8 only PHAs are not required to complete this component and may skip to
A. Capital Fund	Activities
Exemptions from sub-cor	mponent 5A: PHAs that will not participate in the Capital Fund Program may skip to PHAs must complete 5A as instructed.
(1) Capital Fund Pr	ogram
a. Xes No	Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 12 and 13 of this template (Capital Fund Program tables). If no, skip to B.
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 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 and (Non-Capital Fu	d Public Housing Development and Replacement Activities nd)
	ponent 5B: All PHAs administering public housing. Identify any approved HOPE VI velopment or replacement activities not described in the Capital Fund Program Annual
(1) Hope VI Revital	ization
a. Yes No:	Has the PHA received a HOPE VI revitalization grant? (if no, skip to next component; if yes, provide responses to questions on chart below for each grant, copying and completing as many times as necessary)
b.	Status of HOPE VI revitalization grant (complete one set of questions for each grant) Development name: Development (project) number: Status of grant: (select the statement that best describes the current status)

	e Housing Author the City of Will		lan for Fiscal Years: 2005	- 2009	Annual Plan for FY 2005	
HA Code:	ND002	Revitali:	zation Plan under o zation Plan submit zation Plan approv es pursuant to an a	tted, pendinged		
c. Yes	No:	-	lan to apply for a les, list developmen		evitalization grant in the low:	
d. Yes No: Will the PHA be engaging in any mixed-finance developments of below:		-				
e. Yes	e. 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:				pital Fund Program Annual	
	lition and t 903.12(b), 9	Disposition				
			PHAs are not require	d to complete	this section.	
a. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 or 24 (Hope VI)of the U.S. Housing Act of 1937 (42 U.S.C. 1437p) or Section 202/Section 33 (Mandatory Conversion) in the plan Fiscal Year? (If "No", skip to component 7; if "yes", complete one activity description for each development on the following chart.)			U.S. Housing Act of 1937 (Mandatory Conversion) in onent 7; if "yes", complete			
	Demolition/Disposition Activity Description					
1b. Develop	oment name oment (proje type: Demo					
Disposition						
3. Application status (select one) Approved Submitted, pending approval Planned application						
			or planned for subm	ission: (DD/	/MM/YY)	
5. Number of units affected:						
6. Coverage of action (select one)						
Part of the development Total development						
	7. Timeline for activity:					
	•	jected start date o	f activity:			
	_	date of activity:	-			

Of the City of Williston

5-Year Plan for Fiscal Years: 2005 - 2009

Annual Plan for FY 2005

HA Code: ND002

7. Section 8 Tena	ant Based AssistanceSection 8(y) Homeownership Program
[24 CFR Part 903.120	(b), 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 Descrip	otion
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	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:
c. What actions will	the PHA undertake to implement the program this year (list)?
(3) Capacity of the	PHA to Administer a Section 8 Homeownership Program
a. Establishing a repurchase price and repurchase price and repressurces. b. Requiring that provided, insured or a mortgage market undunderwriting standard c. Partnering with years of experience be	a qualified agency or agencies to administer the program (list name(s) and

8. Civil Rights Certifications [24 CFR Part 903.12 (b), 903.7 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the

HA Code:

ND002

PHA Plans and Related Regulations: Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans, which is submitted to the Field Office in hard copy—see Table of Contents.

9. Additional Information

[24 CFR Part 903.12 (b), 903.7 (r)]

A. PHA Progress in Meeting the Mission and Goals Described in the 5-Year Plan

The Housing Authority of the City of Williston has continued to make progress on the goals that were established in the 5-Year Plan. Improvements have been made to individual dwelling units as well as project sites and better implementation of established policies and procedures benefit current tenants as well as individuals looking for clean, safe, affordable housing opportunities.

B. Criteria for Substantial Deviations and Significant Amendments

(1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

a. Substantial Deviation from the 5-Year Plan

A substantial deviation from the 5-year plan will be allowed for emergency, health, safety issues, or for unanticipated items not identified in the plan. Any changes identified above may be made with the consultation of the Resident Advisory Board and by resolution from the Board of Commissioners for items which were not included in the 5 year plan

b. Significant Amendment or Modification to the Annual Plan

Any significant amendment or modification to the Annual Plan will be allowed with the consultation of the Resident Advisory Board and by resolution from the Board of Commissioners for items not included in the Annual Plan.

C. Other Information

[24 CFR Part 903.13, 903.15]

Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005 HA Code: ND002 (1) Resident Advisory Board Recommendations a. \(\bigcap\) Yes \(\infty\) No: Didhe PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? If yes, provide the comments below: b. 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) (2) Resident Membership on PHA Governing Board The governing board of each PHA is required to have at least one member who is directly assisted by the PHA, unless the PHA meets certain exemption criteria. Regulations governing the resident board member are found at 24 CFR Part 964, Subpart E. a. Does the PHA governing board include at least one member who is directly assisted by the PHA this year? Yes No: If yes, complete the following: Name of Resident Member of the PHA Governing Board: Method of Selection: **Appointment** The term of appointment is (include the date term expires): Election by Residents (if checked, complete next section--Description of Resident Election Process) **Description of Resident Election Process** 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)

Any head of household receiving PHA assistance

Eligible candidates: (select one)

Any recipient of PHA assistance

PHA Name: The Hou Of the C	Sing Authority City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005		
HA Code: ND0	Any adult recipient of PHA assistance Any adult member of a resident or assisted family organization Other (list)		
Eligibl	e 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)		
	e PHA governing board does not have at least one member who is directly assisted PHA, why not?		
	The PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis The PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.		
	Other (explain):		
Date of	f next term expiration of a governing board member: January 31, 2005		
	and title of appointing official(s) for governing board (indicate appointing official next available position): Ward Koeser, City Council President		
, ,	A Statement of Consistency with the Consolidated Plan [Part 903.15]		
	applicable Consolidated Plan, make the following statement (copy questions as many times as		
Consolidated Plan jurisdiction: (provide name here)			
a. The PHA has taken the following steps to ensure consistency of this PHA Plan w Consolidated Plan for the jurisdiction: (select all that apply):			
	The PHA has based its statement of needs of families on its waiting list 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)		

HA Code: ND002

b. The Consolidated Plan of the jurisdiction supports the PHA Plan with the followin	g
actions and commitments; (describe below)	

(4) (Reserved)

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

10. Project-Based Voucher Program

a.	Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If yes, answer the following questions.
b.	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:)
C	Indicate the number of units and general location of units (e.g. eligible census tracts or

c. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

Of the City of Williston 5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005

HA Code: ND002

11. List of Supporting Documents Available for Review for Streamlined **Five-Year/ Annual PHA 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						
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations	Standard 5 Year and				
	and Board Resolution to Accompany the Standard Annual, Standard Five-Year,	Annual Plans; streamlined				
	and Streamlined Five-Year/Annual Plans.	5 Year Plans				
V	State/Local Government Certification of Consistency with the Consolidated Plan.	5 Year Plans				
X	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	5 Year and Annual Plans				
	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.					
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which	Annual Plan:				
	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	Housing Needs				
	lists.					
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),	Annual Plan: Eligibility,				
	which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-	Selection, and Admissions				
	Based Waiting List Procedure.	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				
X	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				
X						
	Check here if included in the public housing A & O Policy.	Determination				
X	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.	Annual Plan: Rent Determination				
	Check here if included in Section 8 Administrative Plan.					
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	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations				
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations				
Alitual Francopera and Maintenance ar						
	Community Service					
	Self-Sufficiency					
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations				
X	Any policies governing any Section 8 special housing types Annual Plan: Operation					
	check here if included in Section 8 Administrative Plan	and Maintenance				

HA Code: ND002

	List of Supporting Documents Available for Review	
Applicable &	Supporting Document	Related Plan Component
On Display		A 1.D1 A
	Consortium agreement(s).	Annual Plan: Agency Identification and Operations/ Management
X	Public housing grievance procedures ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Grievance Procedures
X	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
X	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
X	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 the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
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
	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
X	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.	Pet Policy
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
	Consortium agreement(s), if a consortium administers PHA programs.	Joint PHA Plan for Consortia
	Consortia 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 PHA Plan for Consortia
	Other supporting documents (optional). List individually.	(Specify as needed)

PHA Name: The Housing Authority Of the City of Williston

5-Year Plan for Fiscal Years: 2005 - 2009 Annual Plan for FY 2005

ND002 HA Code:

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

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA N	ame: The Housing Authority of the City of Williston	Grant Type and Number			Federal	
			rant No: ND 06P002501-05		FY of	
		Replacement Housing Fa	ctor Grant No:		Grant: 2005	
⊠Ori	☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)					
	formance and Evaluation Report for Period Ending:		and Evaluation Report	,		
Line	Summary by Development Account		timated Cost	Total Actu	ıal Cost	
	•	Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	60,000				
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	124,000				
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					
20	1502 Contingency	10100				
21	Amount of Annual Grant: (sum of lines 2 – 20)	184,000				
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					

12. Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report					
Substituting 1 011011111unice unit 21 unituation 140ports					

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

Annual Statement/	Performance and Evaluation R	eport											
	ram and Capital Fund Progran	n Replacem	ent Hous	ing Facto	r (CFP/C	CFPRHF)							
Part II: Supportin		T				T							
PHA Name: The Housing	Grant Type a Capital Fund Replacement	Prog Grant N	No: ND 06P0		Federal FY of G	Federal FY of Grant: 2005							
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct Quantity Total Estimated Total Actual Cost		Total Estimated		Total Estimated		Total Estimated		Dev. Acct Quantity Total Estimated		ctual Cost	Status of Work
					Funds Expended								
HA-Wide	Operations	1406		60,000									
ND 002-002	PV1 Efficiencies remodel	1460		124,000									

Annual Statement Capital Fund Pro				-	ement Housi	ing Factor	(CFP/CFPRHF)
Part III: Impleme	_	_	unu 110g	ram Replac		ing ractor	(CIT/CITIMIT)
PHA Name: The Housing . City of Williston		e Grant Capita	Type and Nur al Fund Progra cement Housin	m No: : ND 06P002	2501-05		Federal FY of Grant: 2005
Development Number Name/HA-Wide Activities	Name/HA-Wide (Quarter Er			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide	5/30/07			5/30/09			

Capital Fund Program Five-Y Part I: Summary	ear Action	n Plan			
PHA Name The Housing Authority of Williston	f the City of			☐ Original 5-Year Plan ☐ Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2006 PHA FY: 2006	Work Statement for Year 3 FFY Grant: 2007 PHA FY: 2007	Work Statement for Year 4 FFY Grant: 2008 PHA FY: 2008	Work Statement for Year 5 FFY Grant: 2009 PHA FY: 2009
HA-Wide	Annual Statement	184,000	184,000	184,000	184,000
CFP Funds Listed for 5-year planning		184,000	184,000	184,000	184,000
Replacement Housing Factor Funds					

		Five-Year Action Plan							
	pporting Pages—W								
Activities for		Activities for Year :2006			Activities for Year:2007				
Year 1		FFY Grant: 2006		FFY Grant: 2007					
		PHA FY:2006	T		PHA FY: 2007	T			
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost			
See									
Annual	HA-Wide	Operations	60,000	HA-Wide	Operations	60,000			
Statement	HA-Wide	Funds allocated to physical improvements and rehab	124,000	HA-Wide	Funds allocated to physical improvements and rehab	124,000			
	Total CFP Estim	nated Cost	\$ 184,000			\$ 184,000			

	d Program Five-Year Action Pages—Work Activities	on Plan					
11 8	Activities for Year :2008		Activities for Year: 2009				
	FFY Grant: 2008 PHA FY: 2008			FFY Grant: 2009 PHA FY: 2009			
Development	Major Work Categories	Estimated Cost	Development	Major Work Categories	Estimated Cost		
Name/Number	initial of the control of the contro		Name/Number	inaujor († oraz outogorios			
**		60,000	**		60.000		
HA-Wide	Operations	60,000	HA-Wide	Operations	60,000		
HA-Wide	Funds allocated to physical improvements and rehab	124,000	HA-Wide	Funds allocated to physical improvements and rehab	124,000		
Total CF.	P Estimated Cost	\$ 184,000			\$ 184,000		

Annual Statem	nent/Performance and Evaluation Report				
Capital Fund l	Program and Capital Fund Program Replaceme	nt Housing Factor	(CFP/CFPRHF	F) Part I: Summar	ry
		Grant Type and Number		•	Federal FY
		Capital Fund Program Gr	rant No: ND 06P0	02501-00	of Grant:
		Replacement Housing Fa			2000
	al Statement Reserve for Disasters/ Emergencies Rev				
	nd Evaluation Report for Period Ending 🛛 Final Perfor				
Line No.	Summary by Development Account		mated Cost		Actual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	62,023.05		62,023.05	62,023.05
3	1408 Management Improvements				
4	1410 Administration	19,890		19,890	19,890
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	23,970.22		23,970.22	23,970.22
10	1460 Dwelling Structures	79,515		79,515	79,515
11	1465.1 Dwelling Equipment—Nonexpendable	19,794		19,794	19,794
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	4377.73		4377.73	4377.73
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)	209,570		209,570	209,570
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				

Annual Statement/Performance and Evaluation Report								
Capital Fund Program	n and Capital Fund Program Replacemer	nt Housing Factor ((CFP/CFPRHF)	Part I: Summary				
PHA Name: The Housing Au	thority of the City of Williston	Grant Type and Number			Federal FY			
		Capital Fund Program Gra	ant No: ND 06P002	501-00	of Grant:			
		Replacement Housing Fac	ctor Grant No:		2000			
Original Annual Statem	ent Reserve for Disasters/ Emergencies Rev	ised Annual Statement	(revision no:)					
Performance and Evalu	ation Report for Period Ending 🔀 Final Perfor	mance and Evaluation	Report					
Line No. Summary by Development Account Total Estimated Cost Total Actual Cost								
Original Revised Obligated Expended								
	Measures							

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

	e Housing Authority of the		rogram Grant No:	ND 06P0025	Federal FY of Grant: 2000			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	ousing Factor Gra Quantity	Total Estimated Cost		d Cost Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations	1406		62,023.05		62,023.05	62,023.05	
HA-Wide	Administration	1410		19,890		19,890	19,890	
ND 002-001	Park Sprinkler System	1450		18,770.22		18,770.22	18,770.22	
ND 002-001	NP rear sidewalks 17-20, 25- 44	1450		5,200		5,200	5,200	
ND 002-002	PV1 Hall and Outside Lighting	1460		10,300		10,300	10,300	
ND 002-001	NP furnaces 17-20, 25-44	1460		52,185		52,185	52,185	
ND 002-001	NP rear screen doors	1460		12,000		12,000	12,000	
ND 002-004	KC basement windows	1460		5,030		5,030	5,030	
ND 002-002	PV1 Refrigerators	1465.1		19,794		19,794	19,794	
HA-Wide	Office Automation and Maint. Equipment	1475		4,377.73		4,377.73	4,377.73	

Annual Statement	Annual Statement/Performance and Evaluation Report							
Capital Fund Prog	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)							
Part III: Impleme	entation Se							
PHA Name: The House	sing Authorit	, 01	Type and Nun	nber m No: ND 06P00	02501 00		Federal FY of Grant: 2000	
the City of Williston			cement Housin					
Development		Fund Obliga			Funds Expende		Reasons for Revised Target Dates	
Number	(Quar	ter Ending I	Date)	(Qua	arter Ending Da	ite)		
Name/HA-Wide Activities								
	Original	Revised	Actual	Original	Revised	Actual		
HA-Wide	9/30/02			9/30/04				

Annual Statem	ent/Performance and Evaluation Report				
Capital Fund F	Program and Capital Fund Program Replacement	nt Housing Facto	or (CFP/CFPRHE	F) Part I: Summary	
	<u> </u>	Grant Type and Num	ber Grant No: ND 06P0	•	Federal FY of Grant: 2001
Original Annua	al Statement Reserve for Disasters/ Emergencies Rev			j	
	nd Evaluation Report for Period Ending: Final Perform				
Line No.	Summary by Development Account		stimated Cost	Total Ac	etual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	58,990	108,990	108,990	
3	1408 Management Improvements	30,000	0	0	
4	1410 Administration	20,000	0	0	
5	1411 Audit	,			
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	66,634	66,634	66,634	
10	1460 Dwelling Structures	24,500	24,500	24,500	
11	1465.1 Dwelling Equipment—Nonexpendable	12,852	12,852	12,852	
12	1470 Nondwelling Structures	,	ĺ	,	
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)	212,976	212,976	212,976	
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			

Annual Statement/Performance and Evaluation Report								
Capital Fund Program	n and Capital Fund Program Replacemer	t Housing Factor ((CFP/CFPRHF)	Part I: Summary				
PHA Name: The Housing Au	thority of the City of Williston	Grant Type and Number			Federal FY			
		Capital Fund Program Gra	ant No: ND 06P002	501-01	of Grant:			
		Replacement Housing Fac	ctor Grant No:		2001			
Original Annual Statem	ent □Reserve for Disasters/ Emergencies ⊠Rev	ised Annual Statement	(revision no: 3)					
Performance and Evalu	ation Report for Period Ending: Final Perform	nance and Evaluation	Report					
Line No. Summary by Development Account Total Estimated Cost Total Actual Cost								
Original Revised Obligated Expended								
	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: The	Housing Authority of the City	Grant Type and I				Federal FY of Gran	nt: 2001	
of Williston		Capital Fund Prog Replacement Hou		ID 06P002501 No:	1-01			
Development	General Description of	Dev. Acct	Quantity	Total Estin	mated Cost	Total Actual Cost		Status of
Number	Major Work	No.						Work
Name/HA-	Categories							
Wide								
Activities								
				Original	Revised	Funds	Funds	
						Obligated	Expended	
HA-Wide	Operations	1406		58,990	108,990	108,990		
HA-Wide	Management Improv	1408		30,000	0	0		
HA-Wide	Administration	1410		20,000	0	0		
ND 002-004	KC Playground Equip	1450		66,634	66,634	66,634		
ND 002-002	PV1 Electrical for Ranges	1460		24,500	24,500	24,500		
ND 002-002	PV1 Unit Ranges	1465.1		12,852	12,852	12,852		
_								

Annual Statement	Annual Statement/Performance and Evaluation Report								
Capital Fund Prog	gram and	Capital F	und Prog	gram Replac	ement Hous	ing Factor	(CFP/CFPRHF)		
Part III: Impleme	entation Se								
This is the first state of the			rant Type and Number Capital Fund Program No: ND 06P002501-01				Federal FY of Grant: 2001		
the City of Williston		cement Housin							
Development	ent All Fund Obligated All Funds Expended					Reasons for Revised Target Dates			
Number	(Quar	ter Ending I	Date)	(Qua	arter Ending Da	ite)			
Name/HA-Wide Activities									
	Original	Revised	Actual	Original	Revised	Actual			
HA-Wide	6/30/03			6/30/05					
							-		

Annual Statem	nent/Performance and Evaluation Report								
Capital Fund I	Program and Capital Fund Program Replacemen	nt Housing Facto	r (CFP/CFPRHF	F) Part I: Summary					
		Grant Type and Num	Federal FY						
		Capital Fund Program	of Grant:						
		Replacement Housing			2002				
	al Statement □Reserve for Disasters/ Emergencies ⊠Rev								
Performance and Evaluation Report for Period Ending Final Performance and Evaluation Report									
Line No.	Summary by Development Account		stimated Cost		tual Cost				
		Original	Revised	Obligated	Expended				
1	Total non-CFP Funds								
2	1406 Operations	48,237	115,440.17	115,440.17					
3	1408 Management Improvements								
4	1410 Administration	20,000	0						
5	1411 Audit								
6	1415 Liquidated Damages								
7	1430 Fees and Costs	32,800	0						
8	1440 Site Acquisition								
9	1450 Site Improvement	54,496	79,910	79,910					
10	1460 Dwelling Structures	47,200	7,382.83	7,382.83					
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								
20	1502 Contingency								
21	Amount of Annual Grant: (sum of lines 2 – 20)	202,733	202,733	202,733					
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								

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary							
PHA Name: The Housing A	athority of the City of Williston	Grant Type and Number	•		Federal FY		
	Capital Fund Program Gr	ant No: ND 06P002	501-02	of Grant:			
		Replacement Housing Fac	2002				
Original Annual Staten	nent \square Reserve for Disasters/ Emergencies $igtimes$ Rev	ised Annual Statemen	t (revision no: 3)				
⊠ Performance and Evalu	nation Report for Period Ending Final Performa	nce and Evaluation Ro	eport				
Line No.	Summary by Development Account	Total Estimated Cost		Total Ac	tual Cost		
		Original	Revised	Obligated	Expended		
	Measures						

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

	Housing Authority of	Grant Type and	Number			Federal FY of Grant: 2002			
the City of Will			ogram Grant No: I ousing Factor Gran		01-02	1000101111010101			
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		
HA-Wide	Operations	1406		48,237	115,440.17	115,440.17			
HA-Wide	Administration	1410		20,000	0				
ND 002-001	Park Playground Equip	1450		54,496	54,496	54,496			
ND 002-004	Replace water mains	1460		35,000	0				
ND 002-004	Rear Entrances and Reshingle Building 1408-1410	1460		0	7,382.83	7,382.83			
ND 002-004	Replace water mains and misc sidewalk replacements	1450		0	25,414	25,414			
HA-Wide	A&E fees	1430		32,800	0				
ND 002-002	PV1 Outside Doors	1460		12,200	0				

Annual Statement	Annual Statement/Performance and Evaluation Report								
Capital Fund Prog	gram and	Capital F	und Prog	gram Replac	ement Hous	ing Factor	(CFP/CFPRHF)		
Part III: Impleme	entation Se								
PHA Name: The House	, 01	Grant Type and Number				Federal FY of Grant: 2002			
the City of Williston		Capital Fund Program No: ND 06P002501-02 Replacement Housing Factor No:							
Development		Fund Obliga			Funds Expende		Reasons for Revised Target Dates		
Number	(Quar	ter Ending I	Date)	(Qua	arter Ending Da	ite)			
Name/HA-Wide Activities									
	Original	Revised	Actual	Original	Revised	Actual			
HA-Wide	5/30/04			5/30/06					

Annual Statem	nent/Performance and Evaluation Report						
Capital Fund I	Program and Capital Fund Program Replacemen	nt Housing Facto	or (CFP/CFPRHI	F) Part I: Summary			
		Grant Type and Num	Federal FY				
		Capital Fund Program	Grant No: ND 06P0	02501-03	of Grant:		
		Replacement Housing			2003		
	al Statement \square Reserve for Disasters/ Emergencies $oxtimes$ Rev						
	nd Evaluation Report for Period Ending Final Performa						
Line No.	Summary by Development Account		stimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations	45,397	60,397	60,397			
3	1408 Management Improvements						
4	1410 Administration	15,000	0				
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement	30,000	30,000				
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Nondwelling Structures	67,000	67,000				
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)	157,397	157,397	60,397			
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						

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary							
PHA Name: The Housing Authority of the City of Williston Grant Type and Number					Federal FY		
		Capital Fund Program Gra	ant No: ND 06P002	501-03	of Grant:		
		Replacement Housing Fac	2003				
Original Annual Statem	ent □Reserve for Disasters/ Emergencies ⊠Rev	ised Annual Statement	(revision no: 2)				
Performance and Evalu	ation Report for Period Ending Final Performa	nce and Evaluation Re	eport				
Line No.	Summary by Development Account	Total Estin	Total Estimated Cost Total Actu				
		Original	Revised	Obligated	Expended		
	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: The Housing Authority of **Grant Type and Number** Federal FY of Grant: 2003 Capital Fund Program Grant No: ND 06P002501-03 the City of Williston Replacement Housing Factor Grant No: Development General Description of **Total Estimated Cost Total Actual Cost** Status of Dev. Acct **Ouantity** Number Major Work No. Work Name/HA-Categories Wide Activities Original Funds Funds Revised Obligated Expended HA-Wide 1406 Operations 45,397 60,397 Administration 1410 HA-Wide 15,000 ND 002-004 KC Landscaping and 1450 30,000 30,000 **Sprinklers** Office and Lobby 1470 ND 002-002 67,000 67,000 remodel

Annual Statement	Annual Statement/Performance and Evaluation Report									
Capital Fund Prog	gram and	Capital F	und Prog	gram Replac	ement Hous	ing Factor	(CFP/CFPRHF)			
Part III: Impleme	entation S									
PHA Name: The House	, 01	Grant Type and Number Capital Fund Program No: ND 06P002501-03				Federal FY of Grant: 2003				
the City of Williston		cement Housin								
Development		Fund Obliga			Funds Expende		Reasons for Revised Target Dates			
Number	(Quar	ter Ending I	Date)	(Qua	arter Ending Da	ite)				
Name/HA-Wide Activities										
	Original	Revised	Actual	Original	Revised	Actual				
	0.44.540.5			0.44.540.						
HA-Wide	9/16/05			9/16/07						

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary									
		Grant Type and Number	•		Federal FY				
		Capital Fund Program Gra	of Grant:						
		Replacement Housing Fact			2003				
	nent Reserve for Disasters/ Emergencies Rev								
Performance and Evaluation Report for Period Ending Final Performance and Evaluation Report									
Line No.	Summary by Development Account	Total Estin			Actual Cost				
		Original	Revised	Obligated	Expended				
1	Total non-CFP Funds								
2	1406 Operations	\$ 33,244		\$ 33,244					
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								
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 $2-20$)	\$ 33,244		\$ 33,244					
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								

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary							
PHA Name: The Housing A	uthority of the City of Williston	Grant Type and Number			Federal FY		
	Capital Fund Program Gr	ant No: ND 06P002	502-03	of Grant:			
		Replacement Housing Fac	2003				
Original Annual Staten	nent Reserve for Disasters/ Emergencies Rev	rised Annual Statemen	t (revision no:)				
⊠ Performance and Evalu	nation Report for Period Ending Final Performa	nce and Evaluation Re	eport				
Line No.	Summary by Development Account	Total Estin	nated Cost	Total Ac	tual Cost		
		Original	Revised	Obligated	Expended		
	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: The Housing Authority of **Grant Type and Number** Federal FY of Grant: 2003 Capital Fund Program Grant No: ND 06P002502-03 the City of Williston Replacement Housing Factor Grant No: Development General Description of **Total Estimated Cost Total Actual Cost** Status of Dev. Acct **Ouantity** Number Major Work No. Work Name/HA-Categories Wide Activities Original Revised Funds Funds Obligated Expended \$ 33,244 HA-Wide 1406 \$ 33,244 Operations

Annual Statement	Annual Statement/Performance and Evaluation Report									
Capital Fund Prog	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part III: Impleme	entation S									
This is the flouring fluctionity of			Type and Nun	nber m No: ND 06P00	2502 03		Federal FY of Grant: 2003			
the City of Williston		cement Housin								
Development		Fund Obliga			Funds Expende		Reasons for Revised Target Dates			
Number	(Quar	ter Ending I	Date)	(Qua	arter Ending Da	ite)				
Name/HA-Wide Activities										
	Original	Revised	Actual	Original	Revised	Actual				
HA-Wide	2/12/06			2/12/08						

Annual Statem	nent/Performance and Evaluation Report					
Capital Fund I	Program and Capital Fund Program Replacemen	nt Housing Facto	or (CFP/CFPRHE	F) Part I: Summary		
		Grant Type and Num	Federal FY			
		Capital Fund Program	of Grant:			
		Replacement Housing			2004	
	al Statement Reserve for Disasters/Emergencies Rev					
	and Evaluation Report for Period Ending Final Performa					
Line No.	Summary by Development Account		stimated Cost	Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	40,000	55,000	55,000		
3	1408 Management Improvements					
4	1410 Administration	15,000	0			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement	30,000	30,000			
10	1460 Dwelling Structures	99,183	99,183			
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					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	184,183	184,183	55,000		
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					

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary								
PHA Name: The Housing A	uthority of the City of Williston	Grant Type and Number	Federal FY					
		Capital Fund Program Gr	of Grant:					
		Replacement Housing Fac	2004					
☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: 1)								
Performance and Evaluation Report for Period Ending Final Performance and Evaluation Report								
Line No.	Summary by Development Account	Total Estin	nated Cost	Total Actual Cost				
		Original	Revised	Obligated	Expended			
	Measures							

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

	Housing Authority of the	Grant Type and Number				Federal FY of Grant: 2004		
City of Williston		Capital Fund Program Grant No: ND 06P002501-04 Replacement Housing Factor Grant No:						
Development	General Description of	Dev. Acct	Quantit	Total Esti	mated Cost	Total Actual Cost		Status of
Number	Major Work Categories	No.	у					Work
Name/HA-								
Wide								
Activities								
				Original	Revised	Funds	Funds	
						Obligated	Expended	
HA-Wide	Operations	1406		40,000	55,000	55,000		
HA-Wide	Administration	1410		15,000	0			
ND 002-002	PV1 Unit & Hall	1460		58,000	71,183			
	Flooring							
ND 002-001	NP Cement	1450		30,000	30,000			
	Replacement							
ND 002-002	PV1 Outside Doors	1460		14,000	28,000			
N/A	Difference of estimated	1460		24,183	0			
	vs. actual funding							
	amount. HUD initially							
	allocated to 1460							

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part III: Implementation Schedule								
Timilitation in the desing fluctionity of			Grant Type and Number				Federal FY of Grant: 2004	
the City of Williston			Capital Fund Program No: ND 06P002501-04 Replacement Housing Factor No:					
Development	Development All Fund (Obligated All Funds Expended			Reasons for Revised Target Dates	
Number	(Quar	ter Ending	nding Date) (Quarter Ending Date)					
Name/HA-Wide Activities	Name/HA-Wide Activities							
	Original	Revised	Actual	Original	Revised	Actual		
HA-Wide	5/30/06	9/13/06		5/30/08	9/13/08		Revised to HUD set deadlines	