## **PHA Plans**

OMB Control Number.

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

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

Streamlined 5-Year/Annual Version

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

**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 2005- 2009 Streamlined Annual Plan for Fiscal Year 2005

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.

# **Streamlined Five-Year PHA Plan Agency Identification**

PHA	Name: Grant County	Housing	g Authority PHA	A Number: WV	034
PHA	Fiscal Year Beginnin	<b>g:</b> 01/20	005		
Number of Number of	Programs Administer blic Housing and Section Sof public housing units: of S8 units:  A Consortia: (check be	8 X Se Numbe	er of S8 units: 46 Numb	ublic Housing Onler of public housing units	:
	Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participa	nting PHA 1:				
Participa	nting PHA 2:				
Participa	nting PHA 3:				
	nation regarding any acti all that apply) Main administrative office PHA development manag PHA local offices	e of the P	HA	t be obtained by ex	indicated in the second
_	Main administrative office PHA development manage PHA local offices Main administrative office Main administrative office Main administrative office Public library PHA website Other (list below)	(if any) are of the Pement offer of the location of the Control of	re available for public : HA Fices ocal government County government		ct all that
PHA P X	Plan Supporting Documents Main business office of the PHA development manage	e PHA	-	(select all that appl	ly)

PHA Nam HA Code:	<u> </u>
	Other (list below)  Streamlined Five-Year PHA Plan
	PHA FISCAL YEARS 2005 - 2009 [24 CFR Part 903.12]
	ission PHA's mission for serving the needs of low-income, very low income, and extremely low-income families
in the Pl	HA's jurisdiction. (select one of the choices below)
X	The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
	The PHA's mission is: (state mission here)
in recen objectiv ENCOU OBJEC numbers right of The ma to fully availab opports program	Is and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized t 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 URAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR TIVES OVER THE COURSE OF THE 5 YEARS. (Quantifiable measures would include targets such as a of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the or below the stated objectives.  The property of this housing authority is to work closely with HUD to obtain enough funding of lease (100%) of its units at the current FMR published 10-2004. This will increase the oblity of decent housing within the county. In achieving this objective it will open more unities for applicants as well as suitable housing for residents already on the Voucher m.  Strategic Goal: Increase the availability of decent, safe, and affordable housing.
X	PHA Goal: Expand the supply of assisted housing Objectives:  X
	PHA Goal: Improve the quality of assisted housing Objectives:  X

na Code:		
	РНА С	Goal: Ensure equal opportunity and affirmatively further fair housing
	Object	ives:
	X	Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
	X	Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
	X	Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
		Other: (list below)

5-Year Plan for Fiscal Years: 20\_\_ - 20\_\_

Other PHA Goals and Objectives: (list below)

PHA Name:

Annual Plan for FY 20\_\_

## **Streamlined Annual PHA Plan**

#### PHA Fiscal Year 2005

[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.

Α.	ANNUAL STREAMLINED PHA PLAN COMPONENTS	PAGE#
	1. Housing Needs	7
同	2. Financial Resources	11
同	3. Policies on Eligibility, Selection and Admissions	12
	4. Rent Determination Policies	20
	5. Capital Improvements Needs	23
	6. Demolitions and Disposition	25
	7. Homeownership	25
	8. Civil Rights Certifications (included with PHA Certifications of Complian	ce) 26
	9. Additional Information	26
	a. PHA Progress on Meeting 5-Year Mission and Goals	26
	b. Criteria for Substantial Deviations and Significant Amendments	27
	c. Other Information Requested by HUD	27
	<ol> <li>Resident Advisory Board Membership and Consultation Process</li> </ol>	
	ii. Resident Membership on the PHA Governing Board	
	iii. PHA Statement of Consistency with Consolidated Plan	
	iv. (Reserved)	
	10. Project-Based Voucher Program	29
Ц	11. Supporting Documents Available for Review	30
	12. FY 20??? Capital Fund Program and Capital Fund Program Replacement Housi	ng 32
	Factor, Annual Statement/Performance and Evaluation Report	
	13. Capital Fund Program 5-Year Action Plan	36
	14. Other (List below, providing name for each item)	
В.	SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD O	FFICE
Form	HUD-50077, PHA Certifications of Compliance with the PHA Plans and Relations	ted
	ations: Board Resolution to Accompany the Standard Annual, Standard Five-Ye	
_	nlined Five-Year/Annual Plans;	
	ication by State or Local Official of PHA Plan Consistency with Consolidated I	Plan.
	HAS APPLYING FOR CAPITAL FUND PROGRAM (CFP) GRANTS:	
	HUD-50070, Certification for a Drug-Free Workplace;	
	HUD-50071, Certification of Payments to Influence Federal Transactions;	
	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.

## 1. 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)						
X Section 8 tenant-based as	ssistance					
Public Housing	Public Housing					
Combined Section 8 an						
Public Housing Site-Ba						
If used, identify whic	h development/subjuris		T			
	# of families	% of total families	Annual Turnover			
Waiting list total	9		6			
Extremely low income		78%				
<=30% AMI	7					
Very low income	2	22%				
(>30% but <=50% AMI)						
Low income	0	0				
(>50% but <80% AMI)						
Families with children	8	89%				
Elderly families	0	0				
Families with Disabilities	1	11%				
Race/ethnicity	W	100%				
Race/ethnicity						
Race/ethnicity						
Race/ethnicity						
Characteristics by Bedroom						
Size (Public Housing Only)						
1BR	1	11%				
2 BR	6	67%				
3 BR	1	11%				
4 BR	1	11%				
5 BR						
5+ BR						
Is the waiting list closed (select one)? X No Yes						
If yes:						
	closed (# of months)?		_			
		e PHA Plan year? No				
	t specific categories of	families onto the waiting list	, even if generally closed?			
X No  Yes						

#### **B.** Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families on the PHA's public housing and Section 8 waiting lists **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

	Employ effective maintenance and management policies to minimize the number of public housing units off-line
	Reduce turnover time for vacated public housing units
	Reduce time to renovate public housing units
H	
Ш	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 measures to ensure access to affordable housing among families assisted by
	the PHA, regardless of unit size required
	Maintain or increase section 8 lease-up rates by marketing the program to owners,
	particularly those outside of areas of minority and poverty concentration
X	Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants
	to increase owner acceptance of program
	Participate in the Consolidated Plan development process to ensure coordination with
	broader community strategies
	Other (list below)
	gy 2: Increase the number of affordable housing units by:
Select al	ll that apply
X	Apply for additional section 8 units should they become available
	Leverage affordable housing resources in the community through the creation of mixed -
	e housing
X	Pursue housing resources other than public housing or Section 8 tenant-based
	assistance.
	Other: (list below)

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

PHA Name: HA Code:

Strateg	gy 1: Target available assistance to families at or below 30 % of AMI
Select al	l that apply
x	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work Other: (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
	Time upply
	Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below)
Need:	Specific Family Types: The Elderly
	gy 1: Target available assistance to the elderly:
X	Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available Other: (list below)
	Specific Family Types: Families with Disabilities
_	gy 1: Target available assistance to Families with Disabilities:  I 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
X	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)

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

Strate	gy 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)
Strates	gy 2: Conduct activities to affirmatively further fair housing
	Il that apply
	Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units  Market the section 8 program to owners outside of areas of poverty /minority concentrations  Other: (list below)
(2) Re	Housing Needs & Strategies: (list needs and strategies below)  asons for Selecting Strategies factors listed below, select all that influenced the PHA's selection of the strategies it will
X X X X	Funding constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government
X $\square$	Results of consultation with residents and the Resident Advisory Board Results of consultation with advocacy groups Other: (list below)

## 2. Statement of Financial Resources

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

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				
Sources 1. Federal Grants (FY 20_ grants)	Planned \$	Framed Uses		
a) Public Housing Operating Fund				
,				
d) HOPE VI Demolition	\$172.170			
e) Annual Contributions for Section 8 Tenant- Based Assistance	\$172,179			
f) Resident Opportunity and Self-Sufficiency				
Grants				
g) Community Development Block Grant				
h) HOME				
Other Federal Grants (list below)				
2. Prior Year Federal Grants (unobligated				
funds only) (list below)				
3. Public Housing Dwelling Rental Income				
4. Other income (list below)				
W Other medite (list selow)				
4. Non-federal sources (list below)				
7. INDIFICUCIAL SOULCES (HSt OCIOW)				
Total magazinasa				
Total resources				

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

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

A. Public Housing
Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.
Grant County Housing Authority is Choice Voucher Only
(1) Eligibility
<ul> <li>a. When does the PHA verify eligibility for admission to public housing? (select all that apply)</li> <li>When families are within a certain number of being offered a unit: (state number)</li> <li>When families are within a certain time of being offered a unit: (state time)</li> <li>Other: (describe)</li> </ul>
<ul> <li>b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?</li> <li>Criminal or Drug-related activity</li> <li>Rental history</li> <li>Housekeeping</li> <li>Other (describe)</li> </ul>
c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
(2)Waiting List Organization
<ul> <li>a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)</li> <li>Community-wide list</li> <li>Sub-jurisdictional lists</li> <li>Site-based waiting lists</li> <li>Other (describe)</li> </ul>
<ul> <li>b. Where may interested persons apply for admission to public housing?</li> <li>PHA main administrative office</li> <li>PHA development site management office</li> <li>Other (list below)</li> </ul>
c. Site-Based Waiting Lists-Previous Year

- 8 ....
  - 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.

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	

2. What is the number of site based waiting list developments to which families may apply at one time?
3. How many unit offers may an applicant turn down before being removed from the site-based waiting list?
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:
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) <b>Assignment</b>
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?

<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>PHA main administrative office</li> <li>All PHA development management offices</li> <li>Management offices at developments with site-based waiting lists</li> <li>At the development to which they would like to apply</li> <li>Other (list below)</li> </ul> (3) Assignment
<ul> <li>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)</li> <li>One</li> <li>Two</li> <li>Three or More</li> </ul>
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
<ul> <li>a. Income targeting:</li> <li>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?</li> </ul>
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)
c. Preferences  1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
2. Which of the following admission preferences does the PHA plan to employ in the coming

year? (select all that apply from either former Federal preferences or other preferences)

Other preferences (select all that apply)

Working families and those unable to work because of age or disability

Veterans and veterans' families

Residents who live and/or work in the jurisdiction

Those enrolled currently in educational, training, or upward mobility programs

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)

<ul> <li>4. Relationship of preferences to income targeting requirements:</li> <li>The PHA applies preferences within income tiers</li> <li>Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements</li> </ul>			
(5) Occupancy			
<ul> <li>a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)</li> <li>The PHA-resident lease</li> <li>The PHA's Admissions and (Continued) Occupancy policy</li> <li>PHA briefing seminars or written materials</li> <li>Other source (list)</li> </ul>			
<ul> <li>b. How often must residents notify the PHA of changes in family composition? (select all that apply)</li> <li>At an annual reexamination and lease renewal</li> <li>Any time family composition changes</li> <li>At family request for revision</li> <li>Other (list)</li> </ul>			
(6) Deconcentration and Income Mixing			
a.  Yes No:	Yes No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.		
b.  Yes No:	Yes No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete. If yes, list these developments on the following table:		
Deconcentration Policy for Covered Developments			
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)]

### **B. Section 8**

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

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a. Wh  X  X	at is the extent of screening conducted by the PHA? (select all that apply) Criminal or drug-related activity only to the extent required by law or regulation Criminal and drug-related activity, more extensively than required by law or regulation More general screening than criminal and drug-related activity (list factors): Rental history both present and past landlords Other (list below)
b. X Y	Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
c. X Y	Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
d. X Y	Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
	cate what kinds of information you share with prospective landlords? (select all that ply)  Criminal or drug-related activity  Other (describe below): Past rental history with the housing authority if any. The housing authority does not screen residents for the landlord. We do however do all screening required by HUD guidelines.
(2) Wa	aiting List Organization
	h which of the following program waiting lists is the section 8 tenant-based assistance iting list merged? (select all that apply)  None  Federal public housing  Federal moderate rehabilitation  Federal project-based certificate program  Other federal or local program (list below)
	ere may interested persons apply for admission to section 8 tenant-based assistance? lect all that apply) PHA main administrative office Other (list below)

3) Search Time
----------------

a. X Yes No: Does the PHA give extensions on standard 60-day period to search for a unit? If yes, state circumstances below: The Grant County Housing Authority will issue one 30-day extension at a time up to a maximum of 120 days total following a written request and documentation of efforts made to find housing. Additional time may be granted to families with a member with disabilities as a reasonable accommodation.

#### (4) Admissions Preferences

a. Income targeti	ng
X Yes No:	Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
b. Preferences	
1. X Yes No:	Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)
2 Which of the	following admission preferences does the PHA plan to employ in the coming

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)

X Victims of domestic violence

Substandard housing
Homelessness
High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

Working families and those unable to work because of age or disability

Veterans and veterans' families

Residents who live and/or work in your jurisdiction

Those enrolled currently in educational, training, or upward mobility programs

Households that contribute to meeting income goals (broad range of incomes)

Households that contribute to meeting income requirements (targeting)

Those previously enrolled in educational, training, or upward mobility programsVictims 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.	

1	Date and Time
Forme	r Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Other	Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
	anong applicants on the waiting list with equal preference status, how are applicants ed? (select one)  Date and time of application  Drawing (lottery) or other random choice technique
	he PHA plans to employ preferences for "residents who live and/or work in the sdiction" (select one)  This preference has previously been reviewed and approved by HUD  The PHA requests approval for this preference through this PHA Plan
6. Rel	ationship of preferences to income targeting requirements: (select one)  The PHA applies preferences within income tiers  Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

### (5) Special Purpose Section 8 Assistance Programs

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

PHA Name	e: 5-Year Plan for Fiscal Years: 20 20	Annual Plan for FY 20	
	Briefing sessions and written materials Other (list below)		
the	w does the PHA announce the availability of any special-purpose sect public? Through published notices Other (list below)	ion 8 programs to	
[24 CFR	IA Rent Determination Policies (Part 903.12(b), 903.7(d))		
	iblic Housing		
Exemption N/A	ons: PHAs that do not administer public housing are not required to complete sub-	component 4A.	
	come Based Rent Policies		
Describe	e the PHA's income based rent setting policy/ies for public housing using, including ired by statute or regulation) income disregards and exclusions, in the appropriate s	•	
a. Use	of discretionary policies: (select one of the following two)		
	The PHA will <u>not employ</u> any discretionary rent-setting policies for in public housing. Income-based rents are set at the higher of 30% of a income, 10% of unadjusted monthly income, the welfare rent, or min HUD mandatory deductions and exclusions). (If selected, skip to subtract the PHA <u>employs</u> discretionary policies for determining income-base continue to question b.)	djusted monthly imum rent (less o-component (2))	
b. Min	nimum Rent		
1. Wha	t amount best reflects the PHA's minimum rent? (select one)  \$0  \$1-\$25  \$26-\$50		
2.	Yes No: Has the PHA adopted any discretionary minimum rent hapolicies?	ardship exemption	
3. If ye	s 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 of percentage less than 30% of adjusted income?	or	

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) For specified general occupancy developments For certain parts of developments; e.g., the high-rise portion For certain size units; e.g., larger bedroom sizes Other (list below)
3.	Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)
	Market comparability study Fair market rents (FMR) 95 <sup>th</sup> percentile rents 75 percent of operating costs

PHA Name: HA Code:	5-Year Plan for Fiscal Years: 20 20	Annual Plan for FY 20
Operating	nt of operating costs for general occupancy (famil costs plus debt service l value" of the unit below)	y) developments
f. Rent re-determ	inations:	
	ne reexaminations, how often must tenants report e PHA such that the changes result in an adjustme	•
Never At family	-	
Any time a	the family experiences an income increase a family experiences an income increase above a family experiences and income increase above a family experiences.	threshold amount or
	o: Does the PHA plan to implement individual sanative to the required 12 month disallowance of en the next year?	_
(2) Flat Rents		
establish compara  The section Survey of Survey of	narket-based flat rents, what sources of information bility? (select all that apply.) In 8 rent reasonableness study of comparable housements listed in local newspaper similar unassisted units in the neighborhood (describe below)	
B. Section 8 T	enant-Based Assistance	
component 4B. Unles	hat do not administer Section 8 tenant-based assistance are as otherwise specified, all questions in this section apply (vouchers, and until completely merged into the voucher	only to the tenant-based section 8
(1) Payment Stan		r . g )
	payment standards and policies.	
X At or abov 100% of F	A's payment standard? (select the category that be see 90% but below100% of FMR TMR 0% but at or below 110% of FMR	est describes your standard)
Above 110	0% of FMR (if HUD approved; describe circumst	ances below)
b. If the payment	standard is lower than FMR, why has the PHA se	elected this standard? (select

5-Year Plan for Fiscal Years: 20\_\_ - 20\_\_

PHA Name:

HA Code:

Annual Plan for FY 20\_\_\_

d. Yes X No:

	Α.	<b>Capital</b>	<b>Fund</b>	Activities
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Exemptions from sub-component 5A: PHAs that will not participate in the Capital Fund Program may skip to component 5B. All other PHAs must complete 5A as instructed.

(1) Capital Fund P	rogram
a. Yes 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 an (Non-Capital Fu	d Public Housing Development and Replacement Activities and)
	nponent 5B: All PHAs administering public housing. Identify any approved HOPE VI evelopment or replacement activities not described in the Capital Fund Program Annual
(1) Hope VI Revita	lization
a. Yes X 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)  Revitalization Plan under development  Revitalization Plan submitted, pending approval  Revitalization Plan approved  Activities pursuant to an approved Revitalization Plan underway
c. Yes X No:	Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below:

Will the PHA be engaging in any mixed-finance development activities for

PHA Name: HA Code:	5-Year Plan for Fiscal Years: 20 20	Annual Plan for FY 20					
HA Code:							
	public housing in the Plan year? If yes, list do below:	evelopments or activities					
e. Yes X No:	e. Yes X 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:						
6. Demolition and [24 CFR Part 903.12(b),							
- , , , ,	nt 6: Section 8 only PHAs are not required to complete t	his section.					
GCHA Operates Sect							
a. Yes No:	Does the PHA plan to conduct any demolition (pursuant to section 18 or 24 (Hope VI)of the (42 U.S.C. 1437p) or Section 202/Section 33 (	U.S. Housing Act of 1937					
	the plan Fiscal Year? (If "No", skip to compo	•					
one activity description for each development on the following chart.)							
	Demolition/Disposition Activity Description						
1a. Development name		2011					
1b. Development (proje							
2. Activity type: Demo							
Dispos	ition 🗌						
3. Application status (s	elect one)						
Approved							
_	ding approval						
Planned application 4. Date application approved, submitted, or planned for submission: (DD/MM/YY)							
**		MM/YY)					
5. Number of units affected: 6. Coverage of action (select one)							
6. Coverage of action (select one)  Part of the development							
Total development							
7. Timeline for activity:							
a. Actual or projected start date of activity:							
b. Projected end date of activity:							
7 Section & Tanant Record Assistance Section &(v) Hamaswaarshin Program							
7. Section 8 Tenant Based AssistanceSection 8(y) Homeownership Program [24 CFR Part 903.12(b), 903.7(k)(1)(i)]							
(1) Yes X No:	Does the PHA plan to administer a Section 8 In pursuant to Section 8(y) of the U.S.H.A. of 19 CFR part 982? (If "No", skip to the next compact program description below (copy and comprogram identified.)	37, as implemented by 24 ponent; if "yes", complete					

(2) Program Description				
<ul> <li>a. Size of Program</li> <li>Yes No: Will the PHA limit the number of families participating in the Section homeownership option?</li> </ul>				
	If the answer to the question above was yes, what is the maximum number of participants this fiscal year?			
b. PHA-established eligibility criteria  Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below:				
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 purchase price and re	strated its capacity to administer the program by (select all that apply): minimum homeowner downpayment requirement of at least 3 percent of equiring that at least 1 percent of the purchase price comes from the family's			
provided, insured or	financing for purchase of a home under its Section 8 homeownership will be guaranteed by the state or Federal government; comply with secondary lerwriting requirements; or comply with generally accepted private sector			
	a qualified agency or agencies to administer the program (list name(s) and			
· — ·	that it has other relevant experience (list experience below).			

## **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 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:

Goals set forth in previous 5-year Plan were not stated in Quantifiable terms. Progress against those goals is subjective in nature. Progress however, was made in improving services to applicants by increased outreach to possible families in need of housing assistance. Progression made in reaching out to possible applicants by outreach letters to DHHR, Schools and other Community agencies. In achieving full lease up in our Choice Voucher Program thru our outreach it now has become necessary to reduce the number of families severed do to reduction in program funding.

### **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: Any Substantial deviation from the Mission Statement and/or Goals and objectives presented in the Five Year Plan that cause changes in the services provided to residents or significant changes to the agency's financial situation will be documented in subsequent Agency Plans. Exceptions to this, which will not be considered significant amendments by HUD, are the changes in HUD regulatory requirements. **Examples** of substantial deviation would be: Changes to rent or admission policies or organization of the waiting list; addition of non-emergency work items greater than 15% (items not included in current Annual Statement or Five Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and any changes with the regard to demolition or disposition, designation, homeownership programs (if applicable) or conversion activities.
- b. Significant Amendment or Modification to the Annual Plan: Significant amendment or modification to the Annual Plan will include the addition of any new services/ programs initiated by the Housing Authority or the loss of any current program/programs.

## C. Other Information [24 CFR Part 903.13, 903.15]

(1) Re	esident Advisory Board Recommendations
a. 🗌	Yes X No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
If yes,	provide the comments below:
b. In v	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) Re	esident Membership on PHA Governing Board
The gov PHA, u	verning board of each PHA is required to have at least one member who is directly assisted by the inless the PHA meets certain exemption criteria. Regulations governing the resident board member at 24 CFR Part 964, Subpart E.
	es the PHA governing board include at least one member who is directly assisted by HA this year?
X Ye	s No:
If yes,	complete the following:
Name	of Resident Member of the PHA Governing Board: Rebecca Hinkle
Metho	od of Selection:
X	Appointment The term of appointment is (include the date term expires): 10-9-2006
	Election by Residents (if checked, complete next sectionDescription of Resident Election Process)
Descr	iption of Resident Election Process
	nation of candidates for place on the ballot: (select all that apply)
	Candidates were nominated by resident and assisted family organizations
L.	Candidates could be nominated by any adult recipient of PHA assistance
Ш	Self-nomination: Candidates registered with the PHA and requested a place on ballot
	Other: (describe)
Eligib	le candidates: (select one)
	Any recipient of PHA assistance
	Any head of household receiving PHA assistance
X	Any adult recipient of PHA assistance
	Any adult member of a resident or assisted family organization Other (list)
Eligib	le voters: (select all that apply)
Ш	All adult recipients of PHA assistance (public housing and section 8 tenant-based
X	assistance) Representatives of all PHA resident and assisted family organizations
	Other (list)

b. If the PHA governing board does not have at least one member who is directly assisted

	by the	PHA, why not?		
		The PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis  The PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.  Other (explain):		
Date of next term expiration of a governing board member:				
		and title of appointing official(s) for governing board (indicate appointing official e next available position):		
	[24 CF	HA Statement of Consistency with the Consolidated Plan R Part 903.15]		
	necessa necessa	th applicable Consolidated Plan, make the following statement (copy questions as many times as arry).		
Consolidated Plan jurisdiction: (provide name here) Grant County, West				
		PHA has taken the following steps to ensure consistency of this PHA Plan with the blidated Plan for the jurisdiction: (select all that apply):		
	X	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)		
b.	and common The Grant Cou Grant Cou The Grant	olidated Plan of the jurisdiction supports the PHA Plan with the following actions nitments: (describe below) to County Housing Authority has meet with the Development Commissioner for anty, and has discussed the possibility of adding needed housing. Currently The anty Commission is working on a new Plan for the development of Grant County. to County Housing Authority will continue to work with the Commissioners and the ent authority in a manner that would benefit the growth of the county.		

#### (4) (Reserved)

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

## 10. Project-Based Voucher Program

a.	Yes X 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 smaller areas within eligible census tracts):

## 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	Related Plan Component			
&	&			
On Display	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		
X	X State/Local Government Certification of Consistency with the Consolidated Plan.			
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 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		
	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources		
	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP),	Annual Plan: Eligibility,		
	which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-	Selection, and Admissions		

	List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component	
On Display	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	
	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	
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.  Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination	
	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance	
	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management 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	
	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	
	Consortium agreement(s).	Annual Plan: Agency Identification and Operations/ Management	
	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.  X Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures	
	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	

List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Related Plan Component		
1 0		Housing		
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership		
	Policies governing any Section 8 Homeownership program (Section of 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		
	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)		

# 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 Name:		Grant Type and Number			Federal	
		Capital Fund Program Gr			FY of	
		Replacement Housing Fac	ctor Grant No:		Grant:	
Ori	ginal Annual Statement Reserve for Disasters/ Emer	rgencies Revised Ann	ual Statement (revision no	<b>D:</b> )		
	formance and Evaluation Report for Period Ending:		and Evaluation Report	,		
Line	Summary by Development Account	Total Estimated Cost Total Actual Cost			ıal Cost	
	•	Original	Revised	Obligated	Expended	
1	Total non-CFP Funds				-	
2	1406 Operations					
3	1408 Management Improvements					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
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 $2-20$ )					
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

PHA Name:	g Pages	Grant Type a Capital Fund Replacement	Program Gra	ınt No:	:	Federal FY of G	rant:	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct Quantity No.	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part III: Impleme	entation S	chedule		_				
PHA Name:	Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:				Federal FY of Grant:			
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		

Capital Fund Program Five-Y	ear Action	n Plan			
Part I: Summary					
PHA Name				☐ Original 5-Year Plan☐ Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year  2  FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

	ital Fund Program Five						
Activities for Year 1	pporting Pages—Work Acti	Activities vities for Year : FFY Grant: PHA FY:		Activities for Year: FFY Grant: PHA FY:			
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost	
See							
Annual							
Statement							
	Total CFP Estimated	l Cost	\$			\$	

Capital Fund Prog Part II: Supporting Pages	gram Five-Year Acti —Work Activities	ion Plan					
Activi	ties for Year :		Activities for Year: FFY Grant:				
	FFY Grant:						
PHA FY:			PHA FY:				
Development Name/Number	Major Work Categories	<b>Estimated Cost</b>	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>		
Total CFP Estimated Cost \$					\$		