PHA Plans

Streamlined Annual Version

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

Office of Public and Indian Housing

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

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

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

Streamlined Annual PHA Plan for Fiscal Year: 2006

PHA Name: DeWitt County Housing

Authority

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

Streamlined Annual PHA Plan Agency Identification

PHA Name: Dewitt Count	y Housi	ing Authority	PHA Number:	IL06-P031
PHA Fiscal Year Beginning	g: 10/20	006		
PHA Programs Administer Public Housing and Section 8 Number of public housing units: Number of S8 units:	8 Se		ublic Housing Onler of public housing units	
☐PHA Consortia: (check be	ox if subr	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:				
PHA Plan Contact Information Name: David O. Hinton TDD: Public Access to Information		Phone: (217) 935-8 Email (if available):		asi.com
Information regarding any actice (select all that apply) PHA's main administrative	vities out	_	be obtained by colopment management	
Display Locations For PHA	A Plans	and Supporting D	ocuments	
If yes, select all that apply: Main administrative office PHA development manage Main administrative office Public library PHA Plan Supporting Documents	Yes e of the P ement off e of the lo PHA s are avail	No. HA fices ocal, county or State g website	overnment Other (list belov (select all that app	v) ly)
Main business office of th Other (list below)	e PHA	☐ PHA develo	pment managemen	t offices

PHA Name: DeWitt County Housing Authority

HA Code: IL06-P031

Streamlined Annual PHA Plan Fiscal Year 2006

[24 CFR Part 903.12(c)]

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[24 CFR 903.7(r)]

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B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

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

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

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

PHA Name: DeWitt County Housing Authority

HA Code: IL06-P031

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

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

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

A. Site-Based Waiting Lists-Previous Year

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

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					

					1
2.	What is the nu at one time?	umber of site ba	ased waiting list devel	opments to which fam	ilies may apply
3.	How many un based waiting	•	n applicant turn down	before being removed	l from the site-
4.	or any court or complaint and	rder or settleme describe how	ent agreement? If yes	nding fair housing con , describe the order, ag itting list will not viola at below:	greement or
В.	Site-Based W	aiting Lists –	Coming Year		
	-	-	more site-based waiting to next componen	ng lists in the coming y	ear, answer each
1. I	How many site-	based waiting	lists will the PHA ope	erate in the coming yea	ar? NONE
2.	Yes No	•	hey are not part of a p	ased waiting lists new reviously-HUD-appro	

PHA Name: DeWitt County Housing Authority HA Code: IL06-P031 If yes, how many lists? 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 sitebased waiting lists (select all that apply)? PHAnain 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) 2. Capital Improvement Needs [24 CFR Part 903.12 (c), 903.7 (g)] Exemptions: Section 8 only PHAs are not required to complete this component. A. **Capital Fund Program** 1. \times Yes \cap No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B. 2. \square Yes \bowtie 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.). HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

В.

Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- 1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).
 - 2. Status of HOPE VI revitalization grant(s):

	HOPE VI Revitalization Grant Status
a. Development Nam	
b. Development Num	lber:
Revitalizat Revitalizat	ion Plan under development ion Plan submitted, pending approval ion Plan approved oursuant to an approved Revitalization Plan underway
	bursuant to an approved Revitanzation I fan underway
3. ☐ Yes ⊠ No:	Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name(s) below:
4. Yes No:	Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5. Yes No: Y	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:
	ant Based AssistanceSection 8(y) Homeownership Program FR Part 903.12(c), 903.7(k)(1)(i)]
1. Yes No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)
2. Program Descripti	ion:
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-establishd el Yes No:	igibility criteria Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:

c. What actions will the PHA undertake to implement the program this year (list)?
3. Capacity of the PHA to Administer a Section 8 Homeownership Program:
The PHA has demonstrated its capacity to administer the program by (select all that apply): Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
Partnering with a qualified agency or agencies to administer the program (list name(s)
and years of experience below): Demonstrating that it has other relevant experience (list experience below):
4. Use of the Project-Based Voucher Program
Intent to Use Project-Based Assistance
Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.
1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
low utilization rate for vouchers due to lack of suitable rental units access to neighborhoods outside of high poverty areas other (describe below:)
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):
5. PHA Statement of Consistency with the Consolidated Plan [24 CFR Part 903.15]
For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.
1. Consolidated Plan jurisdiction: State of Illinois

2.	The PHA has taken the following steps to ensure consistency of this PHA Plan with the
	Consolidated Plan for the jurisdiction: (select all that apply)
	7
\geq	-
_	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.
\times	Activities to be undertaken by the PHA in the coming year are consistent with the
	initiatives contained in the Consolidated Plan. (list below)
	Improve and update existing housing stock.
	Other: (list below)
	The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions ad commitments: (describe below)
No	one

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6. Supporting Documents Available for Review for Streamlined 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	Supporting Document	Related Plan Component
	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;	5 Year and Annual Plans
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan	Streamlined Annual Plans
	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard Annual Plans
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
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
	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	Schedule of flat rents offered at each public housing development. ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment). Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Management and Operations Annual Plan: Operations and Maintenance and
		Community Service & Self-

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Annliaghla	List of Supporting Documents Available for Review	Poloted Plan Comparant
Applicable & On Display	Supporting Document	Related Plan Component
		Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
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
X	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
X	Public Housing Community Service Policy/Programs Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	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.	Annual Plan: 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
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943	Joint Annual PHA Plan for Consortia: Agency
	pursuant to an opinion of counsel on file and available for inspection.	Identification and Annual Management and Operations

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

PHA Name: DeWi		Frant Type and Number Capital Fund Program Grant Replacement Housing Facto	t No: IL06-P031-50 2 or Grant No:	1-06	Federal FY of Grant: 2006
	al Statement Reserve for Disasters/ Emergencies Revi				
		rformance and Evaluati			. 10
Line No.	Summary by Development Account	Total Estima			tual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	75,000			
3	1408 Management Improvements	1,500			
4	1410 Administration	37,500			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	7,500			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	1,000			
10	1460 Dwelling Structures	246,400			
11	1465.1 Dwelling Equipment—Nonexpendable	4,000			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	2,000			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	100			
18	1499 Development Activities	0			
19	1501 Collaterization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	375,000			
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				

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

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

PHA Name: Dewitt County Housing Authority			d Number ogram Grant No: ousing Factor Gr			Federal FY of Gra		
Development Number Name/HA- Wide Activities	Number Major Work Categories Tame/HA- Wide		Quantity	Total Esti	mated Cost	Total Act	ual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		75,000			•	
	Total			75,000				
	Administrative Training	1408		500		+	1	
	Computer Software	1408		500				
	Consultant	1408		500				
	Total	1.00		1,500				
	Salaries & Benefits	1410		37,500				
	Total			37,500				
	Asbestos & Lead Testing	1430		0				
From 5-yr plan	Fees & Costs	1430		7,500				
	Sprinkler Testing	1430		0				
	Total			7,500				
	Concrete Repair	1450		0				
	Site Improvements	1450		1,000				
From 5-yr Plan	Asphalt Sealcoating	1450		0				
	Total			1,000				

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

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

PHA Name: Dewitt County Housing Authority		Replacement H	ogram Grant No: ousing Factor Gra			Federal FY of Gra		
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Act	tual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IL06-P031-03	Replace Flooring	1460		2,400				
Nixon Manor				-				
IL06-P031-04	Replace Flooring	1460		2,400				
DeWitt Manor								
IL06-P031-01 Webster Apts.	Phase 4 – Exterior remodeling of 6-unit bldg. Includes siding, roof, window, floor, lead paint and asbestos removal.	1460		241,600				
	Total			246,400				
IL06-P031-01	Appliances	1465		4,000				
IL06-P031-04	Generator Controls	1465		0				
	Total			4,000				

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

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

	witt County Housing	Grant Type and Capital Fund Pr	d Number ogram Grant No: ousing Factor Gra	IL06-P031-501-0	06	Federal FY of Gran	nt: 2006	
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity		mated Cost	Total Act	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Community Furniture	1475		0				
PHA Wide	Computer Hardware	1475		500				
PHA Wide	Dumpsters	1475		0				
PHA Wide	Maintenance Equipment	1475		1,000				
PHA Wide	Office Equip. & Furn.	1475		500				
	Total			2,000				
IL06-P031-01	Relocation	1495		100				
	Total			100				
	Grand Total			375,000				

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

DIIA Nama. Darritt	entation S		Type and Nun	nhar			Federal FY of Grant: 2006
PHA Name: Dewitt (Authority	Lounty Hou	Capita	al Fund Program cement Housin	m No: IL06-P031-5	501-06	reueral F1 of Grant. 2000	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)				Funds Expendenter Ending Da	Reasons for Revised Target Date	
	Original	Revised	Actual	Original	Revised	Actual	
IL 31-1 Webster Apts.	9-30-08			9-30-10			
IL 31-3 Nixon Manor	9-30-08			9-30-10			
IL 31-4 DeWitt Manor	9-30-08			9-30-10			
PHA Wide	9-30-08			9-30-10			

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8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Y Part I: Summary	Year Action	n Plan				
PHA Name DeWitt County Housin	ng	ILO)31	⊠Original 5-Year Plan Revision No:		
Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5	
		FFY Grant: 2007 PHA FY: 2008	FFY Grant: 2008 PHA FY: 2009	FFY Grant: 2009 PHA FY: 2010	FFY Grant: 2010 PHA FY: 2011	
	Annual Statement					
IL31-1 Webster Apts.		7,000	241,100	7,000	241,100	
IL31-2 Macarthur Apts.		2,000	0	2,000	0	
IL31-3 Nixon Manor		4,400	2,400	65,700	2,400	
IL31-4 Family Countryside Apts.		176,600	0	46,500	0	
IL31-4 Elderly DeWitt Manor		2,400	2,400	63,700	2,400	
PHA Wide		182,600	129,100	190,100	129,100	
CFP Funds Listed for 5-year planning		222.000				
Replacement Housing Factor Funds		375,000	375,000	375,000	375,000	

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8. Capital Fund Program Five-Year Action Plan

	ind Program Five- ipporting Pages—			Dewitt County Housing Authority IL031				
Activities		ctivities for Year: 2007	7	Ac	tivities for Year: 2008			
for		FFY Grant: 2007			FFY Grant: 2008			
Year 1		PHA FY: 2008	T	PHA FY: 2009				
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost		
See	Webster/IL 31-1	Seal-coating	7,000	Webster/IL 31-1	Exterior Remodel Ph.5	241,100		
Annual	Macarthur/IL 31-2	Seal-coating	2,000	Nixon/IL 31-3	Flooring	2,400		
Statement	Nixon/IL 31-3	Seal-coating	2,000	Dewitt/IL 31-4	Flooring	2,400		
		Flooring	2,400	PHA Wide	Operations	75,000		
	Countryside/IL 31-4	Roofing	176,600		Admin. Training	500		
	DeWitt/IL 31-4	Flooring	2,400		Computer Software	500		
	PHA Wide	Operations	75,000		Consultant	500		
		Admin. Training	500		Administration	37,500		
		Computer Software	1,000		Fees & Costs	7,500		
		Consultant	500		Site Improvements	1,000		
		Administration	37,500		Flooring	500		
		Fees & Costs	30,000		Appliances	4,000		
		Site Improvements	5,000		Maint. Equipment	1,000		
		Flooring	2,500		Maint. Vehicle	0		
		Appliances	4,000		Office Equip. & Furn.	500		
		Maint. Equipment	3,000		Community Furniture	0		
		Maint. Vehicle	18,000		Computer Hardware	500		
		Office Equip. & Furn.	2,500		Relocation	100		
		Community Furniture	0					
		Computer Hardware	3,000					
		Relocation	100					
	Total CFP Estimated	Cost	\$ 375,000			\$ 375,000		

Page 17 of 18 form **HUD-50075-SA** (04/30/2003)

8. Capital Fund Program Five-Year Action Plan

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

	Activities for Year: 200 FFY Grant: 2009 PHA FY: 2010)9	Activities for Year: 2010 FFY Grant: 2010 PHA FY: 2011			
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost	
Webster/IL 31-1	Seal-coating	7,000	Webster/IL 31-1		241,100	
Macarthur/IL 31-2	Seal-coating	2,000	Nixon/IL 31-3	Flooring	2,400	
Nixon/IL 31-3	Seal-coating	2,000	DeWitt/IL 31-4	Flooring	2,400	
	Electronic Entry	17,100	PHA Wide	Operations	75,000	
	Elevator Upgrades	22,100		Admin. Training	500	
	Tuckpointing	22,100		Computer Software	500	
	Flooring	2,400		Consultant	500	
Countryside/IL 31-4	Sewer/Water Upgrades	36,500		Administration	37,500	
•	Water Heaters	10,000		Fees & Costs	7,500	
DeWitt/IL 31-4	Electronic Entry	17,100		Site Improvements	1,000	
	Elevator Upgrades	22,100		Appliances	4,000	
	Tuckpointing	22,100		Maint. Equipment	1,000	
	Flooring	2,400		Maint. Vehicle	0	
PHA Wide	Operations	75,000		Office Equip. & Furn.	500	
	Admin. Training	500		Community Furniture	0	
	Computer Software	1,000		Computer Hardware	500	
	Consultant	500		Relocation	100	
	Administration	37,500				
	Fees & Costs	30,000				
	Energy Audit	9,000				
	Site Improvements	5,000				
	Appliances	5,000				
	Maint. Equipment	3,000				
	Maint. Vehicle	18,000				
	Office Equip. & Furn.	1,500				
	Community Furniture	2,000				
	Computer Hardware	2,000				
	Relocation	100				
Total CFP E	stimated Cost	\$ 375,000			\$ 375,000	

Page 18 of 18 form **HUD-50075-SA** (04/30/2003)

	Statement/Performance and Evaluation Report				
	l Fund Program and Capital Fund Program Replaceme		CFP/CFPRHF) Part		
PHA N		e and Number			Federal FY of Grant
DEWI	1	and Program Grant No.]	FFY 2003
	1	ent Housing Factor Gra			
	ginal Annual Statement Reserve for Disasters/ Emer		Annual Statement (
	ormance and Evaluation Report for Period Ending:		rformance and Eval		4 10 4
Line	Summary by Development Account	Total Estima	ated Cost	Total Ac	etual Cost
No.		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0	0.00	0.00	0.00
2	1406 Operations	78,750	0.00	0.00	0.00
3	1408 Management Improvements	4,000	2,845.08	2,845.08	2,845.08
4	1410 Administration	39,380	39,380.00	39,380.00	39,380.00
5	1411 Audit	0	0.00	0.00	0.00
6	1415 Liquidated Damages	0	0.00	0.00	0.00
7	1430 Fees and Costs	23,200	43,949.90	43,949.90	43,949.90
8	1440 Site Acquisition	0	0.00	0.00	0.00
9	1450 Site Improvement	5,800	2,104.00	2,104.00	2,104.00
10	1460 Dwelling Structures	223,764	285,558.67	285,558.67	285,558.67
11	1465.1 Dwelling Equipment—Nonexpendable	11,000	11,160.00	11,160.00	11,160.00
12	1470 Non-dwelling Structures	0	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	5,000	8,335.98	8,335.98	8,335.98
14	1485 Demolition	0	0.00	0.00	0.00
15	1490 Replacement Reserve	0	0.00	0.00	0.00
16	1492 Moving to Work Demonstration	0	0.00	0.00	0.00
17	1495.1 Relocation Costs	3,000	560.37	560.37	560.37
18	1499 Development Activities	0	0.00	0.00	0.00
19	1501 Collaterization or Debt Service	0	0.00	0.00	0.00
20	1502 Contingency	0	0.00	0.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	393,894	393,894.00	393,894.00	393,894.00
22	Amount of line 21 Related to LBP Activities	20,000			
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	Amt. line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report

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

Part II: Supporting Pages Final Performance & Evaluation Report

PHA Name		Grant Type an				Federal FY of Grant		
DEWITT COUNT	TY HOUSING AUTHORITY	Capital Fund			31-501-03	FFY 2003		
	<u>, </u>	Replacement						
Development	General Description of Major	Developme	Quantity	Total Esti	mated Cost	Total Act	ual Cost	Status of
Number	Work Categories	nt Account						Work
Name/HA-Wide		Number		Original	Revised	Funds	Funds	
Activities						Obligated	Expended	
PHA-WIDE	Operations	1406		78,750	0.00	0.00	0.00	Omitted
	Total from page one	1406		78,750	0.00	0.00	0.00	
	Administrative Training	1408		2,000	2,471.82	2,471.82	2,471.82	Completed
	Computer Software	1408		2,000	373.26	373.26	373.26	Completed
	Total from page one	1408		4,000	2,845.08	2,845.08	2,845.08	Completed
	Total from page one	1400		7,000	2,045.00	2,043.00	2,043.00	
	Salaries & Benefits	1410		39,380	39,380.00	39,380.00	39,380.00	Completed
	Total from page one	1410		39,380	39,380.00	39,380.00	39,380.00	
	E	1.420		100	0.00	0.00	0.00	0 '4 1
	Environmental Review	1430		100	0.00	0.00	0.00	Omitted
T	Fire Sprinkler Testing	1430		800	2,183.25	2,183.25	2,183.25	Completed
From 5-yr plan	A/E Fees & Costs	1430		300	725.00	725.00	725.00	Completed
	Asbestos & Lead Paint Testing	1430		22,000	41,041.65	41,041.65	41,041.65	Completed
	Total from page one	1430		23,200	43,949.90	43,949.90	43,949.90	
	Concrete Repair	1450		1,000	2,104.00	2,104.00	2,104.00	Completed
	Site Improvements/Landscaping	1450		4,800	0.00	0.00	0.00	Omitted
	Total from page one	1450		5,800	2,104.00	2,104.00	2,104.00	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages Final Performance & Evaluation Report PHA Name Grant Type and Number Federal FY of Grant Capital Fund Program No. IL06-P031-501-03 **DEWITT COUNTY HOUSING AUTHORITY FFY 2003** Replacement Housing Factor No. General Description of Major Developme Ouantity **Total Estimated Cost** Development Total Actual Cost Status of **Work Categories** Number nt Account Work Funds Name/HA-Wide Number Original Revised Funds Obligated Expended **Activities** Repair/Replace Windows 0.00 Omitted 1460 IL06-P031-003 500 0.000.00**Nixon Manor** Replace Apartment Flooring 1460 1.000 1,091.00 1.091.00 1.091.00 1 Completed Elevator Upgrades 1460 4.530.29 4.530.29 Completed 4,530.29 0 IL06-P031-004 Repair/Replace Windows 1460 500 0.00 0.00 0.00 Omitted **DeWitt Manor** Replace Apartment Flooring 1460 3 1.000 2,375.00 2,375.00 2,375.00 Completed Elevator Upgrades 1460 4,530.29 4.530.29 4.530.29 Completed II06-P031-001 **Emergency Roof Repair** 1460 Completed 0 0.000.000.00217,817.48 Phase 1– Continuation 1460 220,764 217.817.48 217,817,48 Completed Webster Apts. 16 units Exterior remodel of 4 4-unit apts. Includes replacing: siding, windows, roofs... Phase 2 1460 55,214.61 55,214.61 55,214.61 Completed 6 units 1460 223,764 285,558.67 285,558.67 285,558.67 Total from page one IL06-P031-001 **Appliances** 1465 11,000 11,160.00 11,160.00 11,160.00 Completed 39 11,160.00Total from page one 1465 11,000 11,160.00 11.160.00 Computer Hardware 2,000 **PHA WIDE** 1475 1,116.39 1,116.39 1,116.39 Completed **PHA WIDE** Maintenance Equipment 1475 2,000 904.67 904.67 904.67 Completed 1475 **PHA WIDE** Community Furniture 0.00 0.00 0.00 Omitted 500 **PHA WIDE** Office Equipment 1475 500 379.92 379.92 379.92 Completed 1475 5,935.00 5,935.00 5,935.00 Completed **PHA WIDE Dumpsters** 0

5,000

8.335.98

8.335.98

8.335.98

1475

Total from page one

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages Final Performance & Evaluation Report PHA Name Grant Type and Number Federal FY of Grant **DEWITT COUNTY HOUSING AUTHORITY** Capital Fund Program No. IL06-P031-501-03 **FFY 2003** Replacement Housing Factor No. Development General Description of Major Developme Quantity Total Estimated Cost Status of Total Actual Cost Work Categories Number nt Account Work Name/HA-Wide Number Original Revised **Funds** Funds Obligated Activities Expended Relocation 1495 3,000 560.37 560.37 560.37 Completed IL06-P031-001 16 1495 3,000 560.37 560.37 560.37 **Total from page one** 16 393,894.00 393,894.00 **Grand Total** 393,894 393,894.00

Annual Statement/Perfo Capital Fund Program Part III: Implementation	and Capital I	Fund Progra i	m Replaceme			CFPRHF)	
PHA Name				and Number			Federal FY of Grant
DEWITT COUNTY HO	OUSING AUT	THORITY		nd Program No	. IL06-P03	FFY 2003	
				nt Housing Fa			
Development Number	A1	Fund Obliga	_		Funds Exper	nded	Reasons for Revised Target Dates
Name/HA-Wide							Treasons for the vised Tanger Dates
	Original	Revised	Actual	Original	Revised	Actual	
IL06-P031-002	9-16-05		03-31-06	9-16-07		11-30-05	
Webster Apt.							
IL06-P031-003	9-16-05		03-31-06	9-16-07		11-30-05	
Nixon Manor							
IL06-P031-004	9-16-05		03-31-06	9-16-07		11-30-05	
DeWitt Manor							
PHA-WIDE	9-16-05		03-31-06	9-16-07		11-30-05	

	Statement/Performance and Evaluation Report		CED/GEDDIIE\ D	T C	
PHA N	TT COUNTY HOUSING AUTHORITY Capital Fu	e and Number and Program Grant No.	IL06-P031-502-03	I	Federal FY of Grant FFY 2003
	1	ent Housing Factor Gr			
	ginal Annual Statement Reserve for Disasters/ Emer formance and Evaluation Report for Period Ending:		Annual Statement () ance and Evaluation		
Line	Summary by Development Account	Total Estim		•	tual Cost
No.	Summary by Development Account	Total Estim	ateu Cost	10141710	tuai Cost
2,00		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0	0.00	0.00	0.00
2	1406 Operations	15,700	14,145.26	14,145.26	14,145.26
3	1408 Management Improvements	1,000	0.00	0.00	0.00
4	1410 Administration	7,850	7,850.00	7,850.00	7,850.00
5	1411 Audit	0	0.00	0.00	0.00
6	1415 Liquidated Damages	0	0.00	0.00	0.00
7	1430 Fees and Costs	500	11,728.39	11,728.39	11,728.39
8	1440 Site Acquisition	0	0.00	0.00	0.00
9	1450 Site Improvement	3,000	12,795.74	12,795.74	12,795.74
10	1460 Dwelling Structures	41,000	24,471.08	24,471.08	24,471.08
11	1465.1 Dwelling Equipment—Nonexpendable	6,000	6,347.25	6,347.25	6,347.25
12	1470 Non-dwelling Structures	0	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	3,450	1,162.28	1,162.28	1,162.28
14	1485 Demolition	0	0.00	0.00	0.00
15	1490 Replacement Reserve	0	0.00	0.00	0.00
16	1492 Moving to Work Demonstration	0	0.00	0.00	0.00
17	1495.1 Relocation Costs	0	0.00	0.00	0.00
18	1499 Development Activities	0	0.00	0.00	0.00
19	1501 Collaterization or Debt Service	0	0.00	0.00	0.00
20	1502 Contingency	0	0.00	0.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	78,500	78,500.00	78,500.00	78,500.00
22	Amount of line 21 Related to LBP Activities	500			
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	Amt. line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages Final Performance & Evaluation Report PHA Name Grant Type and Number Federal FY of Grant Capital Fund Program No. IL06-P031-502-03 **DEWITT COUNTY HOUSING AUTHORITY FFY 2003** Replacement Housing Factor No. General Description of Major Developme Ouantity **Total Estimated Cost** Development Total Actual Cost Status of **Work Categories** Number nt Account Work Funds Name/HA-Wide Number Original Revised Funds Obligated Activities Expended 15,700 14,145.26 14,145.26 14,145.26 **Operations** Completed **PHA-WIDE** 1406 15,700 14,145,26 14,145,26 1406 14.145.26 **Total from page one** Administrative Training 1408 Omitted 500 0.000.000.00 Computer Software 1408 500 0.00 0.00 0.00 Omitted **Total from page one** 1408 1.000 0.00 0.00 0.00 1410 7,850 7,850.00 7,850.00 7,850.00 Completed Salaries & Benefits Total from page one 1410 7.850 7.850.00 7.850.00 7.850.00 A/E Fees & Costs 1430 10,153.39 10,153.39 10,153.39 Completed From 5-yr plan Asbestos & Lead Paint Testing 1,575.00 1430 500 1,575.00 1,575.00 Completed Total from page one 1430 **500** 11,728.39 11,728.39 11,728.39 Concrete Repair 1450 1,000 3,471.00 3,471.00 3,471.00 Completed Site Improvements/Landscaping 1450 2,000 1,325.00 1,325.00 1,325.00 Completed 7,999.74 **Asphalt Sealcoating** 1450 7,999.74 7,999.74 Completed 0 Total from page one 1450 3.000 12,795.74 12,795.74 12,795.74

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages Final Performance & Evaluation Report PHA Name Grant Type and Number Federal FY of Grant Capital Fund Program No. IL06-P031-502-03 **DEWITT COUNTY HOUSING AUTHORITY FFY 2003** Replacement Housing Factor No. General Description of Major Developme Ouantity **Total Estimated Cost** Development Total Actual Cost Status of **Work Categories** Number nt Account Work Funds Name/HA-Wide Number Original Revised Funds Obligated **Activities** Expended Repair/Replace Windows 9,078.22 9,078.22 9,078.22 1460 20,000 Completed IL06-P031-003 1,527.35 **Nixon Manor** Replace Apartment Flooring 2,000 1.527.35 1.527.35 1460 Completed Completed Repair/Replace Windows 1460 17,000 10,099.15 10,099.15 10,099.15 IL06-P031-004 **DeWitt Manor** Replace Apartment Flooring 1460 2,000 1.527.36 1.527.36 1.527.36 Completed II06-P031-001 **Emergency Roof Repair** 1460 2,239.00 2.239.00 2,239.00 Completed 24,471.08 Total from page one 24,471.08 1460 41,000 24,471.08 6,236.00 IL06-P031-001 **Appliances** 1465 6,000 6,236.00 6,236.00 Completed Generator Controls 111.25 IL06-P031-004 1465 0 111.25 111.25 Completed **Total from page one** 6.000 6,347.25 6.347.25 6,347.25 1465 Computer Hardware Omitted **PHA WIDE** 1475 450 0.00 0.00 0.00 **PHA WIDE** Maintenance Equipment 1475 1.000 1.162.28 1.162.28 1,162.28 Completed **PHA WIDE** Community Furniture 1475 0.000 0.00 0.00 2,000 Omitted **Total from page one** 1475 1,162.28 1,162.28 3,450 1.162.28 **Grand Total** 78,500 78,500.00 78,500.00 78,500.00

Annual Statement/Perfo Capital Fund Program Part III: Implementation	and Capital H	und Progr	am Replaceme			CFPRHF)	
PHA Name DEWITT COUNTY HO AUTHORITY		mai i ei io	Grant Type and Capital Fund P Replacement H	d Number Program No. I	Federal FY of Grant FFY 2003		
Development Number Name/HA-Wide Activities All Fund Obli (Quarter Endin		gated	All	Funds Exper		Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	
IL06-P031-002	2-12-06		11-30-05	2-12-08		12-31-05	
Webster Apt.							
IL06-P031-003	2-12-06		11-30-05	2-12-08		12-31-05	
Nixon Manor							
IL06-P031-004	2-12-06		11-30-05	2-12-08		12-31-05	
DeWitt Manor							
PHA-WIDE	2-12-06		11-30-05	2-12-08		12-31-05	

	al Statement/Performance and Evaluation Repo				
Capita	l Fund Program and Capital Fund Replaceme	nt Housing Factor	(CFP/CFPRHF)	Part I: Summar	\mathbf{y}
PHA Na	ame Grant Type	e and Number		Fee	deral FY
DEWIT	TT COUNTY HOUSING AUTHORITY Capital Fu	nd Program Grant No:	IL06-P031-501-04	of	Grant
		ent Housing Factor Gran			Y 2004
	inal Annual Statement Reserve for Disasters/ En				
	ormance and Evaluation Report for Period Ending: M				
Line #	Summary by Development Account	Total Estima		Total Actu	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0			
2	1406 Operations	91,200	50,000.00	20,000.00	20,000.00
3	1408 Management Improvements	3,000	3,000.00	1,236.39	1,236.39
4	1410 Administration	45,616	45,616.00	45,616.00	45,616.00
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	2,300	40,000.00	30,570.00	5,815.04
8	1440 Site Acquisition	0			
9	1450 Site Improvement	500	4,000.00	2,825.00	2,825.00
10	1460 Dwelling Structures	300,352	300,352.00	238,669.58	223,864.97
11	1465.1 Dwelling Equipment—Nonexpendable	4,000	4,000.00	0.00	0.00
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	7,200	7,200.00	2,933.32	2,933.32
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	2,000	2,000.00	0.00	0.00
18	1499 Development Activities	0			
19	1501 Collaterization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	456,168	456,168.00	341,850.29	302,290.72
22	Amount of line 21 Related to LBP Activities	20,000			
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	Amt. Line 21 Related to Energy Conserv. Measures				

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

PHA Name	TY HOUSING AUTHORITY	Grant Type and Capital Fund Pr Replacement H	ogram No.: ousing Facto	or No.		Federal FY of Grant FFY 2004		
Development Number	General Description of Major Work Categories	Development Account	Quantity	Total Estir	nated Cost	Total Ac	tual Cost	Status of Work
Name/HA-Wide Activities		Number		Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	Operations	1406		91,200	50,000.00	20,000.00	20,000.00	
	Total from page one	1406		91,200	50,000.00	20,000.00	20,000.00	
	Administrative Training	1408		1,000	1,000.00	0.00	0.00	
	Computer Software	1408		1,000	1,236.39	1,236.39	1,236.39	
	Consultant	1408		1,000	763.61	0.00	0.00	
	Total from page one	1408		3,000	3,000.00	1,236.39	1,236.39	
	Salaries & Benefits	1410		45,616	45,616.00	45,616.00	45,616.00	
	Total from page one	1410		45,616	45,616.00	45,616.00	45,616.00	
	Asbestos & Lead Paint Testing	1430		300	300.00	0.00	0.00	
	Environmental Review	1430		200	200.00	0.00	0.00	
From 5-yr plan	Fees & Costs	1430		1,000	38,700.00	30,570.00	5,815.04	
	Sprinkler testing	1430		800	800.00	0.00	0.00	
	Total from page one	1430		2,300	40,000.00	30,570.00	5,815.04	
	Concrete Repair	1450						
	Site Improvements/Landscaping	1450		500	4,000.00	2,825.00	2,825.00	
From 5-yr plan	Asphalt Sealcoating	1450			·		-	
	Total from page one	1450		500	4,000.00	2,825.00	2,825.00	

Annual Statement/Performance and Evaluation Report

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

PHA Name	PHA Name DEWITT COUNTY HOUSING AUTHORITY		Number	II 04 D021 5	01 04	Federal FY 6	of Grant	
DEWITT COUNT	IT HOUSING AUTHORITT	Capital Fund Pr Replacement H			U1-U 4	FF1 2004		
Development Number	General Description of Major Work Categories	Development Account	Quantity		nated Cost	Total Ac	tual Cost	Work Status
Name/HA-Wide Activities		Number		Original	Revised	Funds Obligated	Funds Expended	
IL06-P031-003	Repair/replace windows	1460						
Nixon Manor	Replace apartment flooring	1460		1,000	3,000.00	2,288.07	1,288.07	
	Smoke Detectors	1460		0	1,004.00	1,004.00	1,004.00	
IL06-P031-004	Repair/replace windows	1460						
DeWitt Manor	Replace apartment flooring	1460		1,000	3,000.00	1,815.88	1,815.88	
IL06-PO31-001 Webster Apts.	Phase II – Exterior remodeling of 6-unit bldg. Includes siding, roofs, windows, floors, lead	1460		298,352	293,348.00	233,561.63	219,757.02	
	paint and asbestos removal. Emergency Roof Repair	1460						
	Total from page one	1460		300,352	300,352.00	238,669.58	223,864.97	
PHA WIDE	Appliances	1465		4,000	4,000.00	0.00	0.00	
	Total from page one	1465		4,000	4,000.00	0.00	0.00	
PHA WIDE	Community Furniture	1475		400	400.00	0.00	0.00	
PHA WLDE	Computer Hardware	1475		400	1,762.24	1,762.24	1,762.24	
PHA WIDE	Dumpsters	1475		5,000	3,086.68	0.00	0.00	
PHA WIDE	Maintenance Equipment	1475		1,000	1,000.00	220.00	220.00	
PHA WIDE	Office Equipment & Furniture	1475		400	951.08	951.08	951.08	
	Total from page one	1475		7,200	7,200.00	2,933.32	2,933.32	

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

PHA Name	or ting rages	Grant Type and	Number			Federal FY	of Grant	
DEWITT COUNTY HOUSING AUTHORITY		Capital Fund Pr	Capital Fund Program No. IL06-P031-501-04 FFY 2004					
		Replacement H						
Development Number	General Description of Major Work Categories	Development Account	Quantity	Total Estir	nated Cost	Total Ac	tual Cost	Work Status
Name/HA-Wide Activities		Number		Original	Revised	Funds Obligated	Funds Expended	
IL06-P031-001	Relocation	1495		2,000	2,000.00	0.00	0.00	
	Total from page one	1495		2,000	2,000.00	0.00	0.00	
	Grand Total			456,168	456,168.00	341,850.29	302,290.72	
				,				
				D.				

Annual Statement/P			_				
Capital Fund Progra	_		Program R	eplacement	Housing Fa	actor (CFI	P/CFPRHF)
Part III: Implement	tation Sched	lule					
PHA Name				e and Number			Federal FY of Grant
DEWITT COUNTY HO	DUSING AUT	THORITY		nd Program No		-501-04	FFY 2004
D 1 (37.1	A 11	E 1011		ent Housing Fa			D (D) 17 (D)
Development Number		Fund Obliga			Funds Expen		Reasons for Revised Target Dates
Name/HA-Wide Activities	, -	orter Ending I	,		arter Ending I	Jate)	
	Original	Revised	Actual	Original	Revised	Actual	
IL06-P031-002	9-30-06			9-30-08			
	9-30-00			9-30-08			
Webster Apt.							
IL06-P031-003	9-30-06			9-30-08			
Nixon Manor							
IL06-P031-004	9-30-06			9-30-08			
DeWitt Manor							
PHA-WIDE	9-30-06			9-30-08			+
FHA-WIDE	9-30-00			9-30-08			
							-
4		1		1	Į l		

	Annual Statement/Performance and Evaluation Report							
	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary							
PHA Na	J 1	e and Number			deral FY			
DEWIT	±	nd Program Grant No.:			Grant:			
		ent Housing Factor Gra			FY 2005			
_ ~	inal Annual Statement Reserve for Disasters/ Em							
	ormance and Evaluation Report for Period Ending: M	, <u> </u>	nal Performance an					
Line #	Summary by Development Account	Total Estima		Total Act				
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds	0						
2	1406 Operations	80,000	60,325.00	0.00	0.00			
3	1408 Management Improvements	1,500	1,500.00	0.00	0.00			
4	1410 Administration	41,000	41,000.00	13,728.76	13,728.76			
5	1411 Audit	0						
6	1415 Liquidated Damages	0						
7	1430 Fees and Costs	11,200	31,200.00	24,000.00	0.00			
8	1440 Site Acquisition	0						
9	1450 Site Improvement	500	500.00	0.00	0.00			
10	1460 Dwelling Structures	271,000	271,000.00	0.00	0.00			
11	1465.1 Dwelling Equipment—Nonexpendable	4,500	4,500.00	0.00	0.00			
12	1470 Non-dwelling Structures	0						
13	1475 Non-dwelling Equipment	2,500	2,500.00	0.00	0.00			
14	1485 Demolition	0						
15	1490 Replacement Reserve	0						
16	1492 Moving to Work Demonstration	0						
17	1495.1 Relocation Costs	100	100.00	0.00	0.00			
18	1499 Development Activities	0						
19	1501 Collaterization or Debt Service	0						
20	1502 Contingency	0						
21	Amount of Annual Grant: (sum of lines 2 – 20)	412,300	412,625.00	37,728.76	13,728.76			
22	Amount of line 21 Related to LBP Activities	10,000	,	,	,			
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	Amt. Line 21 Related to Energy Conserv. Measures	1,000						

Annual Statement/Performance and Evaluation Report

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

PHA Name		Grant Type and Number Federal FY of Grant:						
DEWITT COUNTY HOUSING AUTHORITY		Capital Fund Pr	Capital Fund Program No.: IL06-P031-501-05 FFY 2005					
		Replacement H	ousing Facto	r No.:				
Development	General Description of Major	Development	Quantity	Total Estin	nated Cost	Total Ac	tual Cost	Status
Number	Work Categories	Account						of
								Work
Name/HA-Wide		Number		Original	Revised	Funds	Funds	
Activities						Obligated	Expended	
PHA-WIDE	Operations	1406		80,000	60,325.00	0.00	0.00	
	Total from page one	1406		80,000	60,325.00	0.00	0.00	
	Administrative Training	1408		500	500	0.00	0.00	
	Computer Software	1408		500	500	0.00	0.00	
	1	1408		500	500	0.00	0.00	
	Total from page one	1408		1,500	1,500	0.00	0.00	
	Salaries & Benefits	1410		41,000	41,000.00	13,728.76	13,728.76	
	Total from page one	1410		41,000	41,000.00	13,728.76	13,728.76	
		1.420		400	100.00	0.00	0.00	
T. 7. 1	Asbestos & Lead Paint Testing	1430		400	400.00	0.00	0.00	
From 5-yr plan	Fees & Costs	1430		10,000	30,000.00	24,000.00	0.00	
	Sprinkler Testing	1430		800	800	0.00	0.00	
	Total from page one	1430		11,200	31,200.00	24,000.00	0.00	
	Concrete Repair	1450						
	Site Improvements/Landscaping	1450		500	500	0.00	0.00	
E	Asphalt Sealcoating	1450						
From 5-yr plan				500	500	0.00	0.00	

Annual Statement/Performance and Evaluation Report

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

PHA Name DEWITT COUNTY HOUSING AUTHORITY		Grant Type an Capital Fund Pr Replacement H	Federal FY of Grant FFY 2005					
Development Number	General Description of Major Work Categories	Development Account	Quantity	Total Estir	nated Cost	Total Ac	tual Cost	Work Status
Name/HA-Wide Activities		Number		Original	Revised	Funds Obligated	Funds Expended	
IL06-P031-003	Repair/Replace Windows	1460					-	
Nixon Manor	Replace Apartment Flooring	1460		500	500	0.00	0.00	
IL06-P031-004	Repair/Replace Windows	1460						
DeWitt Manor	Replace Apartment Flooring	1460		500	500	0.00	0.00	
IL06-PO31-001	Emergency Roof Repair	1460						
Webster Apts.	Phase II – Exterior remodeling of 6-unit bldg. Includes siding, roofs, windows, floors, lead paint and asbestos removal.	1460		270,000	270,000.00	0.00	0.00	
	Total from page one	1460		271,000	271,000.00	0.00	0.00	
IL06-PO31-001	Appliances	1465		4,500	4,500.00	0.00	0.00	
LI06-PO31-004	Generator Controls	1465						
	Total from page one	1465		4,500	4,500.00	0.00	0.00	
PHA WIDE	Community Furniture	1475		500	500	0.00	0.00	
PHA WIDE	Computer Hardware	1475		500	500	0.00	0.00	
PHA WIDE	Dumpsters	1475						
PHA WIDE	Maintenance Equipment	1475		1,000	1,000	0.00	0.00	
PHA WIDE	Office Equipment & Furniture	1475		500	500	0.00	0.00	
	Total from page one	1475		2,500	2,500.00	0.00	0.00	

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

PHA Name DEWITT COUNTY HOUSING AUTHORITY		Grant Type and Capital Fund Pr Replacement H	ogram No.: ousing Facto	Federal FY of Grant FFY 2005					
Development Number	General Description of Major Work Categories	Development Account			Total Estimated Cost		Total Actual Cost		
Name/HA-Wide Activities		Number		Original	Revised	Funds Obligated	Funds Expended		
IL06-P031-001	Relocation	1495		100	100.00	0.00	0.00		
	Total from page one	1495		100	100.00	0.00	0.00		
	Grand Total			412,300	412,625.00	37,728.76	13,728.76		

Annual Statement/P	erformance	and Evalu	ation Repo	ort			
Capital Fund Progra					Housing F	actor (CFI	P/CFPRHF)
Part III: Implement	tation Sched	lule	C	-	C		·
PHA Name				e and Number			Federal FY of Grant
DEWITT COUNTY HO	DUSING AUT	THORITY		nd Program No		l-501-05	FFY 2005
Danilan na na Manalan	A 11	E 1 Oblice		ent Housing Fa		1. 1	Decree for Decised Toward Dates
Development Number Name/HA-Wide Activities		Fund Obliga arter Ending I			Funds Expendenter Ending I		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IL06-P031-002	9-30-07			9-30-09			
Webster Apt.							
IL06-P031-003	9-30-07			9-30-09			
Nixon Manor							
IL06-P031-004	9-30-07			9-30-09			
DeWitt Manor							
PHA-WIDE	9-30-07			9-30-09			

Dewitt County Housing Authority Resident Advisory Board March 1, 2006

31-1 Webster Apartments

Lynn Flowers 700 N. Cain, Apt. 101 Clinton, IL 61727 (217) 433-7813

Chrystal Ballenger 700 N. Cain, Apt. 120 Clinton, IL 61727 (217) 935-3313

31-2 Macarthur Apartments

Faye Ogg 700 N. Madison, Apt. 1B Clinton, IL 61727 (217) 935-5224

31-3 Nixon Manor

Stewart Allen 100 S. Railroad, Apt. 408 Clinton, IL 61727 (217) 433-1925

31-4 Countryside Apartments

31-5 DeWitt Manor

Minnie Branch 520 E. Main, Apt. 307 Clinton, IL 61727 (217) 935-4676

Resident Member – Board of Commissioners

Patricia Sympson 100 S. Railroad, Apt. 507 Clinton, IL 61727 (217) 935-3390

DEWITT COUNTY HOUSING AUTHORITY

COMMUNITY SERVICE POLICY

January 24, 2001

In compliance with the "Quality Housing and Work Responsibility Act" of 1998, the Dewitt County Housing Authority will administer a community service program the Act requires Housing Authorities to implement.

DeWitt County Housing Authority residents must comply with this policy by performing community service eight (8) hours a month beginning February 1, 2001. For our purposes, community service is defined as voluntary work of duties that are a public benefit, or increase resident self-responsibility in the community.

All residents will be required to perform community service with the following exceptions:

- 1) Elderly (age 62 or older).
- 2) Blind or disabled, as defined under the Social Security Act.
- 3) Primary caretaker of blind or disabled person.
- 4) Employed (at least 8 hours a month).
- 5) Meet the requirements for being exempted from having to engage in a work activity under the State program funded under part A of title IV of the Social Security Act or under any other welfare program of the State.
- 6) Members of families receiving assistance, benefits or services under the State program funded under Part A of title IV of the Social Security Act, or under any other welfare program of the State that administers a welfare-to-work program, and have not been found to be in noncompliance with such a program.
- 7) Under 18 years of age if living with parent(s).
- 8) Participating in an economic self-sufficiency program for at least 8 hours a month—including vocational training, GED classes, or other schooling.

COMPLIANCE

The DeWitt County Housing Authority will determine which residents must comply with this policy from information furnished by residents at application and at annual review time.

The DeWitt County Housing Authority will notify current residents if they must comply with this policy, and the residents must perform community service if ninety-six hours yearly, or eight hours a month, to be eligible to sign a new lease at re-exam time. All residents who must comply at the time this policy takes effect will be monitored monthly to ensure they are fulfilling their requirements. The Housing Authority will furnish these residents with a copy of the community service policy, a suggested list of community service activities, as well as receipts for the recipients of the community service to sign. The residents will be expected to return these receipts each month, unless circumstances change that would make them exempt from the program. RESIDENTS MUST

NOTIFY THE HOUSING AUTHORITY IF CIRCUMSTANCES CHANGE THEIR COMMUNITY SERVICE STATUS.

New residents will be informed at the time of signing their lease whether anyone in their household will have to comply with this policy. They will be provided with a copy of the community service policy, a copy of the suggested list of community service activities, and receipts for the recipients of the community service to sign.

The residents will schedule their won community service time, understanding the following rules for community service:

- 1) Must not take the place of work ordinarily performed by salaried employees.
- 2) Must not work in any conditions that would be considered hazardous.
- 3) Must not volunteer for any political activities.

NONCOMPLIANCE

At least thirty (30) days before the end of the twelve-month lease term, the Dewitt County Housing Authority will review family compliance with the service requirements. If residents are found to be in noncompliance, the Housing Authority will give notice that will describe the noncompliance, will give residents the opportunity to request a grievance, and state that the lease will not be renewed unless:

- 1) The residents enter into a written agreement to fulfill the service requirements, by completing the hours needed to make up the total number of hours required over the twelve-month term of the new lease.
- 2) The family provides written assurance satisfactory to the Housing Authority that noncompliant resident no longer resides in the unit.

The DeWitt County Housing Authority hopes this requirement will become a rewarding, valuable and beneficial contribution to the overall quality of life within the community. It allows the residents to contribute to the greater community that supports them.

DeWitt County Housing Authority

100 South Railroad Street P. O. Box 553 Clinton, IL 61727 Phone 217-935-8804

PET POLICY

October, 2000

Pets as defined below are allowed at all locations.

Any resident who wishes to own a pet, must file an application with the Housing Authority's main office to register the pet for Housing, and they must be approved before bringing the pet onto the Housing property. This application must include the following criteria

License Rabies shots, Inoculations, and Boosters Spaying or Neutering and Cats Declawed Certificates

A damage deposit of \$100.00 will be required for either a dog or cat. Gerbils, hamsters and guinea pigs must be kept in cages. Exotic animals such as ferrets, rabbits, mice, rats, spiders and snakes are not allowed. Aquariums are for fish only. Residents are responsible and will be charged for all damages caused by their pet to Housing Authority property, including the cost of cleaning carpet and/or fumigating units. This deposit is refundable at the termination of the tenant's tenancy if no damages are sustained due to the presence of the pets. If the tenant chooses to get rid of the pet, or if the pet dies before termination of tenancy, the tenant may request a refund of the Pet deposit, which will be granted after an inspection of the unit determines that there is no damage from the pet. There will be no deposit for medically prescribed animals that assist persons with disabilities.

Prospective residents must have approval of the application for pet ownership before the pet is brought onto the premises. Residents failing to comply with this procedure could face termination of their lease agreement with the DeWitt County Housing Authority. Also in the case of prospective residents, a pet reference from the current landlord may be required, as well as a home visit to evaluate the pet.

Pet registrations will be renewed annually at the time of re-examination. Current certificates verifying license and shots must be provided during each and every re-certification.

If a resident gets rid of a pet, whether by choice or by virtue of the pet's death, a new Pet Permit will be required in order to bring another pet into the unit. The original permit becomes void, once the original pet leaves the unit.

ALL RESIDENTS WITH PETS PERMITTED TO BE KEPT, SHALL COMPLY WITH THE FOLLOWING:

- 1. The weight of the dog or cat may not exceed 20 pounds at maturity.
- 2. Only one pet per dwelling unit will be permitted. Exceptions are fish, which shall be restricted to one 20-gallon aquarium per unit.
- 3. Dogs and cats must be licensed yearly with the City and residents must show proof of annual rabies and distemper booster shots.
- 4. Pets who have a history of, or who displays vicious and/or intimidating behavior will not be permitted.
- 5. All cats and dogs must be spayed/neutered, as applicable.
- 6. All dogs and cats must be kept on a leash when taken outside the unit. No animal shall be permitted to be loose in hallways, lobby, laundry area, community room, yards or any other common areas of the facility.
- 7. All cats must be declawed, as applicable.
- 8. Residents shall not permit their pets to disturb, interfere or diminish the peaceful enjoyment of other residents. The terms" disturb, interfere and diminish" shall include, but not limited to barking, howling, chirping, biting, scratching, meowing and other like activities.
- 9. Residents shall provide litter boxes for cat waste, which must be kept in the dwelling unit. Litter boxes must be changed at least once a week and disposed of in the container placed outside for that purpose.
- 10. Residents are responsible for picking up any droppings from their pets on the apartment property. Droppings must be disposed of in a sack and put in the container placed outside for that purpose. The pet owner must walk the pet to the perimeters of the property for the pet to relieve itself. Avoid traveled areas, walkways, trees and shrubs.
- 11. Residents shall keep their apartments free of pet odors at all times.
- 12. If pets are left unattended for twenty-four (24) hours or more, the DeWitt County Housing Authority may enter to remove the pet and transfer it to the proper authorities, subject to State Law or Local Ordinances. (The Housing Authority accepts no responsibility for the pet under such circumstances. Costs incurred by such actions, i.e., pets boarding fees, veterinarian charges, will be borne by the pet owner.)
- 13. Residents are prohibited from feeding or harboring stray animals. The feeding of stray animals shall constitute having a pet without the written permission of the DeWitt County Housing Authority.

- 14. Residents must identify an alternate custodian for pets in the event of resident illness or other absence from the dwelling unit. This identification of an alternate custodian must occur prior to the Housing Authority issuing a pet registration permit.
- 15. In the event of a natural disaster, management will not be held responsible for the well being of any pets on the premises.
- 16. Residents who have pets in their apartments may be subject to more frequent inspections of their units.
- 17. Cats and dogs MUST be litter trained/house broken.
- 18. Guests may not bring pets onto the premises, or are residents permitted to "baby-sit" pets. If a resident is designated "alternate pet custodian", they may keep the pet in custody in their unit, provided that Management is informed of the duration of the pets stay.

All pets must be secured or caged in the apartment when an employee if the DeWitt County Housing Authority is on-site. All pets must be caged or secured in the apartment when the owner is not home.

The resident may not alter the apartment, patio or outside area to provide an enclosure for a pet.

Management will not provide an exercise area for pets.

The privilege of maintaining a pet in a facility owned and/or operated by the DeWitt County Housing Authority shall be subject to the rules set forth in paragraph B above. This privilege may be revoked at any time subject to the Housing Authority's hearing process, if the animal should become destructive, create a nuisance, represent a threat to the health, safety or security of other residents, create a problem in the area of cleanliness and sanitation or if the owner consistently violates any of the rules governing the ownership of a pet.

Any resident who receives three (3) letters regarding violations of the Pet Policy will be required to permanently remove the animal from the premises with NO EXCEPTIONS. Three (3) violations could also result in the eviction of the resident.

Nothing in these regulations will prohibit the Housing Authority or an appropriate community authority from requiring the removal of any pet from a project if the pet's conduct or condition is duly determined to constitute, under the provisions of state or local law, a nuisance or a threat to the health or safety of other occupants of the project or of other persons in the community where the project is located.

Furthermore, in the event of an emergency, the Housing Authority reserves the right to remove any pet from the premises that constitutes an immediate threat to health and safety.

I HAVE READ AND UNDERSTAND THE ABOVE POLICY PROVISIONS REGARDING

THE REEL ING OF TETS THIS THOREE	TO TIBIDE DT THOOLITRO VISIONS.
Resident Signature	Date

THE KEEPING OF PETS AND AGREE TO ARIDE BY THOSE PROVISIONS

APPLICATION FOR PET

\$25.00 NON-REFUNDABLE APPLICATION FEE

(elderly and disabled are exempt from the application fee)

Please answer the following questions regarding the pet you are considering; SPECIES (Dog or Cat) AGE _____ EMERGENCY PERSON PHONE NUMBER _____ [] SHOTS DATE _____ [] SPAYED/NEUTERED DATE _____ [] LISCENSE DATE _____ DATE _____ [] APP. FEE [] SECURITY DEPOSIT (\$100.00) DATE _____ [] INSTALLMENT PLAN Tenant Signature Date

Apartment #

ADDENDUM TO CURRENT PET POLICY AND CITY ORDINANCE FOR ANIMALS

OCTOBER, 2000

This is intended as an addition to the Housing Authority's current pet policy and the City's ordinance for animals.

There will be a \$25.00 non-refundable application fee for permission to have a pet.

You may keep your pet as long you meet the following criteria to maintain a small common household pet:

- The dog or cat will not weigh more than 20 pounds at maturity
- Residents must be current with rent and keep rent current at all times
- Residents must maintain their apartment in a safe and sanitary condition
- Residents must pay \$100.00 security deposit which may be paid in installments
- The pet must have all required immunizations and be spayed or neutered
- Resident will bear all responsibility for any damage or injury caused by pet
- Resident must control pet so as not to disturb neighbors
- Must abide by Housing Authority's pet policy and the City Ordinance regarding animals

Once you have paid your \$25.00 application fee **and** a minimum of \$25.00 towards your security deposit you will receive a sticker to be put on both doors so that Maintenance is aware you have a pet.

IF THERE IS NOT A STICKER ON THE DOORS INDICATING THAT THERE IS A PET IN THE APARTMENT THE HOUSING AUTHORITY WILL HAVE THE PET REMOVED WITHOUT NOTICE.

I have received a copy of the Housing Authority's Pet Policy and the "City of Clinton's
Ordinance for Animals". I have also received a copy of this addendum and agree to abide
by the rules and regulations set forth in these policies regarding pets.

RESIDENT	DATE

DeWitt County Housing Authority

100 South Railroad Street P.O. Box 553 Clinton, IL 61727 Phone 217-935-8804

The numbers below are current as of Wednesday, May 31, 2006.

We have 249 apartments and the waiting list is as follows:

Apartment Size	No. on Waiting List
1 Bedroom	6
2 Bedroom	3
3 Bedroom	9
4 Bedroom	0
Elderly	2