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: Noblesville 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: Noblesville He PHA Number: IN080 | ousing <i>P</i> | Autnority | | |
|--|---|---|---|-------------------------|
| PHA Fiscal Year Beginnin | g: (mm/ | /yyyy) 01/2006 | | |
| PHA Programs Administer Public Housing and Section Solumber of public housing units: Number of S8 units: | 8 Se Numbe | er of S8 units: 185 Number | ablic Housing Onler of public housing units | : |
| PHA Consortia: (check be 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: | | | | |
| Name: Troy Halsell TDD: Public Access to Information regarding any action (select all that apply) | vities out | Email (if ava | • | ontacting: |
| PHA's main administrativ | ve office | PHA's devel | opment manageme | ent offices |
| Display Locations For PH | A Plans | and Supporting D | ocuments | |
| The PHA Plan revised policies or public review and inspection. If yes, select all that apply: Main administrative offic PHA development manag Main administrative offic Public library | Yes e of the P gement off e of the lo PHA | ☐ No. HA fices ocal, county or State go website ☐ | overnment Other (list below | v) |
| PHA Plan Supporting Documents | s are avail | lable for inspection at: | (select all that app | ly) |

Form HUD-50076, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*: *Board Resolution to Accompany the Streamlined Annual Plan* 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, <u>Certification for a Drug-Free Workplace;</u>

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

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

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

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

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

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

| Site-Based Waiting Lists | | | | | | | | | |
|---|-------------------|---|--|--|--|--|--|--|--|
| Development Information: (Name, number, location) | Date Initiated | Initial mix of Racial, Ethnic or Disability Demographics | Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL | Percent change between initial and current mix of Racial, Ethnic, or Disability demographics | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| 2. | What is the number of site based waiting list developments to which families may appl | y |
|----|---|---|
| | 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: |

B. Site-Based Waiting Lists – Coming Year

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

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

PHA Name: Noblesville Housing Authority

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Streamlined Annual Plan for Fiscal Year 2006

| HOPE VI Revitalization Grant Status | | | | | |
|---|---|--|--|--|--|
| a. Development Nam | | | | | |
| b. Development Num | ber: | | | | |
| c. Status of Grant: | ion Dian under development | | | | |
| | ion Plan under development ion Plan submitted, pending approval | | | | |
| | ion Plan approved | | | | |
| <u> </u> | bursuant to an approved Revitalization Plan underway | | | | |
| 3. | 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)] | | | | |
| (II applicable) [24 CI | K 1 att 703.12(c), 703.7(k)(1)(1) | | | | |
| 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 Description: | | | | | |
| a. Size of Program Yes No: | Will the PHA limit the number of families participating in the Section 8 homeownership option? | | | | |
| | If the answer to the question above was yes, what is the maximum number of participants this fiscal year? | | | | |
| b. PHA-established eligibility criteria | | | | | |

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- 1. Consolidated Plan jurisdiction: (provide name here) Hamilton County, Indiana.
- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
- The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
 The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
 The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
 Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
 - ➤ Partner with area housing providers to increase supply of shelter and/or transitional housing.
 - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
 - ➤ Continue to provide a voluntary Family Self-Sufficiency Program to Voucher participants.
 - ➤ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability by providing Fair Housing Training to participating owners.
 - Make available at the Main administrative office of the PHA and all briefings of Voucher participants, HUD's fair housing booklet along with the housing discrimination complaint form.
 - Maximize the number of affordable units available by maintaing or increasing section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction.
 - ➤ Increase the number of affordable housing units by applying for additional section 8 units should they become available.
 - > Apply for special-purpose section 8 vouchers targeted to the elderly and families with disabilities, should they become available.

| Other: (list below) | | |
|---------------------|--|--|

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

Actions: Hamilton County and Noblesville Housing Authority (NHA) will undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability by partnering to provide annual Fair Housing Training to area property owners/managers/realtors. Hamilton County and NHA will also distribute Fair Housing booklets to several city/county offices and local libraries.

PHA Name: Noblesville Housing Authority

HA Code: IN080

Commitments: Hamilton County has committed Community Development Block Grant, public service funds to local Non-Profit agencies to provide services for income eligible residents, many whom are NHA participants:

- > counseling and supportive services to assist victims of spousal abuse;
- > expand existing Meals on Wheels service to provide additional meals;
- ➤ fund equipment in the relocation of the existing Riverview Community Health Clinic to a larger facility that will allow for expended services and increase in patients treated;
- > provision of emergency shelter for victims of domestic violence;
- > expansion of a food voucher program for perishable and non-perishable items;
- > emergency assistance payments to very-low income and low income residents;
- ➤ fund a coordinator position that will recruit and coordinate volunteers that will provide services to elderly and handicap individuals.
- legal services and preventive law education to eligible households;
- ➤ fund ADA accessibility to remodel an existing restroom and entrance ramp/system at the Trinity Free Clinic;
- > English as a second language at Westfield Public Library;

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

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

| | List of Supporting Documents Available for Review | |
|-------------------------------|---|---|
| Applicable & On Display | Supporting Document | Related Plan Component |
| X | 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 |
| X | 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 |
| | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources |
| | Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure. | Annual Plan: Eligibility, Selection, and Admissions Policies |
| | Deconcentration Income Analysis | Annual Plan: Eligibility, Selection, and Admissions Policies |
| | Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. Check here if included in the public housing A&O Policy. | Annual Plan: Eligibility, Selection, and Admissions Policies |
| 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- |

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| | List of Supporting Documents Available for Review | D 1 4 1 D1 2 |
|-------------------------------|---|--|
| Applicable & On Display | Supporting Document | Related Plan Component |
| | | Sufficiency |
| X | Results of latest Section 8 Management Assessment System (SEMAP) | Annual Plan: Management and Operations |
| | Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan | Annual Plan: Operations and Maintenance |
| | Public housing grievance procedures Check here if included in the public housing A & O Policy | Annual Plan: Grievance Procedures |
| X | Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan. | Annual Plan: Grievance Procedures |
| | The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year. | Annual Plan: Capital Needs |
| | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants. | Annual Plan: Capital Needs |
| | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing. | Annual Plan: Capital Needs |
| | Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA). | Annual Plan: Capital Needs |
| | Approved or submitted applications for demolition and/or disposition of public housing. | Annual Plan: Demolition and Disposition |
| | Approved or submitted applications for designation of public housing (Designated Housing Plans). | Annual Plan: Designation of Public Housing |
| | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937. | Annual Plan: Conversion of Public Housing |
| | Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion. | Annual Plan: Voluntary Conversion of Public Housing |
| | Approved or submitted public housing homeownership programs/plans. | Annual Plan: Homeownership |
| | Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan) | Annual Plan: Homeownership |
| | Public Housing Community Service Policy/Programs Check here if included in Public Housing A & O Policy | Annual Plan: Community Service & Self-Sufficiency |
| | Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies. | Annual Plan: Community Service & Self-Sufficiency |
| X | FSS Action Plan(s) for public housing and/or Section 8. | Annual Plan: Community Service & Self-Sufficiency |
| | Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing. | Annual Plan: Community Service & Self-Sufficiency |
| | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing. | Annual Plan: Community Service & Self-Sufficiency |
| | Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). Check here if included in the public housing A & O Policy. | Annual Plan: Pet Policy |
| 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 <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection. | Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations |

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

| Annual Statement/Per | rformance and Evaluation Report | | | | |
|----------------------|---|---|--------------|-----------------|------------|
| Capital Fund Program | n and Capital Fund Program Replacemen | t Housing Factor | (CFP/CFPRHF) | Part I: Summary | |
| PHA Name: | | rant Type and Number | | • | Federal FY |
| | | Capital Fund Program Gra | | | of Grant: |
| | | Replacement Housing Fac | | | |
| | nent Reserve for Disasters/ Emergencies Revisuation Report for Period Ending: Final Per | sed Annual Statement formance and Evalua | | | |
| Line No. | Summary by Development Account | Total Estir | | Total Act | tual 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 | | | | |

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: | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: | | | | Federal FY of Grant: | | | |
|---|---|------------------|----------|------------|----------------------|--------------------|-------------------|--|
| Development Number Name/HA- Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Esti | mated Cost | Total Act | Status of Work | |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
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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 III: Implementation Schedule | | | | | | | | | |
| PHA Name: | Federal FY of Grant: | | | | | | | | |
| Development | All | Fund Obliga | ted | | Funds Expende | | Reasons for Revised Target Dates | | |
| Number Name/HA-Wide Activities | (Quar | (Quarter Ending Date) (Quarter Ending Date) | | | | te) | | | |
| | Original | Revised | Actual | Original | Revised | Actual | | | |
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8. Capital Fund Program Five-Year Action Plan

| _ | _ | ve-Year Action Plan | | | |
|--|---------------------|------------------------------|------------------------------|-----------------------------------|------------------------------|
| PHA Name | ry | | | Original 5-Year Plan Revision No: | 1 |
| 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: PHA FY: | FFY Grant: PHA FY: | FFY Grant: PHA FY: | FFY Grant: PHA FY: |
| | Annual Statement | | | | |
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| CED E 1 II' 1 | | | | | |
| CFP Funds Listed for 5-year planning | | | | | |
| Replacement Housing Factor Funds | | | | | |

8. Capital Fund Program Five-Year Action Plan

| Capital Fund Program Five-Year Action Plan | | | | | | | |
|--|---------------------|-------------------|-----------------------|----------------------|------------|-----------|--|
| Part II: Supporting Pages—Work Activities | | | | | | | |
| Activities | Act | ivities for Year: | _ | Activities for Year: | | | |
| for | FFY Grant: | | | FFY Grant: | | | |
| Year 1 | PHA FY: | | | PHA FY: | | | |
| | Development | Major Work | Estimated Cost | Development | Major Work | Estimated | |
| | Name/Number | Categories | | Name/Number | Categories | Cost | |
| See | | | | | | | |
| Annual | | | | | | | |
| Statement | | | | | | | |
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| | Total CFP Estimated | Cost | \$ | | | \$ | |

8. Capital Fund Program Five-Year Action Plan

| Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities | | | | | | | |
|--|--------------------------|-----------------------|----------------------|------------|-----------------------|--|--|
| | Activities for Year: | | Activities for Year: | | | | |
| | FFY Grant: | | FFY Grant: | | | | |
| | PHA FY: | 1 | PHA FY: | | | | |
| Development | Major Work | Estimated Cost | Development | Major Work | Estimated Cost | | |
| Name/Number | Categories | | Name/Number | Categories | | | |
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