

# **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)

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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.

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# **Streamlined Annual PHA Plan**

## **for Fiscal Year: 2007**

### **PHA Name: Housing Authority of the City of Marion, IN**

**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:** Housing Authority of the City of Marion, Indiana

**PHA Number:** INP041 001-002-003-004-005

**PHA Fiscal Year Beginning:** 07/2006

**PHA Programs Administered:**

**Public Housing and Section 8**     **Section 8 Only**     **Public Housing Only**  
Number of public housing units: 270    Number of S8 units:    Number of public housing units:  
Number of S8 units: 421

**PHA Consortia: (check box if submitting a joint PHA Plan 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: Frederick N. Hunt  
TDD: 765-668-3044

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Email : fhunt@marionha.com

**Public Access to Information**

Information regarding any activities outlined in this plan can be obtained by contacting:  
(select all that apply)

PHA's main administrative office     PHA's development management offices

**Display Locations For PHA Plans and Supporting Documents**

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection.     Yes     No.

If yes, select all that apply:

Main administrative office of the PHA  
 PHA development management offices  
 Main administrative office of the local, county or State government  
 Public library     PHA website     Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

Main business office of the PHA     PHA development management offices

Other (list below)

## Streamlined Annual PHA Plan

**Fiscal Year 2007**

[24 CFR Part 903.12(c)]

### Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

#### A. PHA PLAN COMPONENTS

- 1. Site-Based Waiting List Policies  
**903.7(b)(2) Policies on Eligibility, Selection, and Admissions**
- 2. Capital Improvement Needs  
**903.7(g) Statement of Capital Improvements Needed**
- 3. Section 8(y) Homeownership  
**903.7(k)(1)(i) Statement of Homeownership Programs**
- 4. Project-Based Voucher Programs
- 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- 6. Supporting Documents Available for Review
- 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- 8. Capital Fund Program 5-Year Action Plan

#### B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

**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, Certification for a Drug-Free Workplace;**

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

**Form SF-LLL & SF-LLL a, Disclosure of Lobbying Activities.**

### **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.

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

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

#### **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?
2.  Yes  No: Are any or all of the PHA’s site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?

- If yes, how many lists?
3.  Yes  No: May families be on more than one list simultaneously  
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- PHA main administrative office
  - All PHA development management offices
  - Management offices at developments with site-based waiting lists
  - At the development to which they would like to apply
  - Other (list below)

## **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.  Yes  No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2.  Yes  No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

### **B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)**

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):

<b>HOPE VI Revitalization Grant Status</b>	
a. Development Name:	
b. Development Number:	
c. Status of Grant:	
<input type="checkbox"/>	Revitalization Plan under development
<input type="checkbox"/>	Revitalization Plan submitted, pending approval
<input type="checkbox"/>	Revitalization Plan approved
<input type="checkbox"/>	Activities pursuant to an approved Revitalization Plan underway

3.  Yes  No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development name(s) below:
4.  Yes  No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5.  Yes  No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

**3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program**  
(if applicable) [24 CFR 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 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? 10

b. PHA-established eligibility criteria

- Yes  No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?  
If yes, list criteria:

1. Must be a first time homeowner as defined by HUD. Specifically, applicants cannot have owned a home within the past three years.
2. Both the family and the adult members who will own the home must be able to document a minimum annual income of \$10,300.
3. One or more adult family members must be able to document that he or she has been continually employed for at least 1 year. Exemptions shall be granted to elderly and disabled participants.
4. Must complete a HUD certified homeownership counseling program provided free through the MHA.
5. Must not have defaulted previously on Section 8 Rental Assistance and otherwise be in good standing with the MHA program requirements and standards.

c. What actions will the PHA undertake to implement the program this year (list)?

The PHA will hire a Home Ownership Coordinator, develop a Home Ownership Plan and select the clientele for the Program.

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):

The PHA has had a four year successful partnership with a nonprofit agency that utilized a Home Ownership Program.

#### **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 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)
    1. Enhance affordable homeownership opportunities.
    2. Preserve affordable rental housing opportunities.
  - Other: (list below)
3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

## **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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
Y	<i>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;</i>	5 Year and Annual Plans
Y	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
Y	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
	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
Y	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
Y	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. <input type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
Y	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
Y	Public housing rent determination policies, including the method for setting public housing flat rents. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
Y	Schedule of flat rents offered at each public housing development. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
Y	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. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
Y	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
Y	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	Annual Plan: Operations and

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	necessary)	Maintenance and Community Service & Self-Sufficiency
Y	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
Y	Any policies governing any Section 8 special housing types <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
Y	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
Y	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
Y	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 (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
Y	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
Y	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
Y	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
Y	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
Y	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	Joint Annual PHA Plan for Consortia: Agency

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	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

<b>Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Marion, IN		<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150203 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2003
<input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:    )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	10,000.00	7,387.06	7,387.06	7,387.06
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	12,645.00	19,693.90	19,693.90	19,693.90
10	1460 Dwelling Structures	39,412.19	40,887.06	40,887.06	40,887.06
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	9,287.81	7,105.00	7,105.00	7,105.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency	6,021.00	2,292.98	2,292.98	2,292.98
21	Amount of Annual Grant: (sum of lines 2 – 20)	77,366.00	77,366.00	77,366.00	77,366.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Marion, IN		<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150203 Replacement Housing Factor Grant No:			<b>Federal FY                      of Grant:</b> 2003
<input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:    )</b>					
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

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

<b>Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150203 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-1	Concrete/water meter pit	1450		750.00	0.00	0.00	0.00	Deleted
12 <sup>th</sup> /Upton St	Siding/Soffits/Gutters	1460		7,630.00	6,420.76	6,420.76	6,420.76	Completed
Houck St	HVAC	1460		5,250.00	7,336.21	7,336.21	7,336.21	Completed
IN41-2	Concrete/water meter pit	1450		750.00	1,804.00	1,804.00	1,804.00	Completed
Coulton Ct	Siding/Soffits/Gutters	1460		14,582.19	15,478.02	15,478.02	15,478.02	Completed
Curfman Rd	HVAC	1460		5,250.00	5,250.00	5,250.00	5,250.00	Completed
North Court								
IN41-3	Direct alarm feed to 911	1460		500.00	698.00	698.00	698.00	Completed
Norman Manor Apts								
IN41-4	Landscaping	1450		9,145.00	16,670.00	16,670.00	16,670.00	Completed
Riverside Apts	Outdoor gas grill	1450		1,000.00	609.95	609.95	609.95	Completed
	Direct alarm feed to 911	1460		500.00	698.00	698.00	698.00	Completed
	Water softener	1460		1,600.00	1,568.00	1,568.00	1,568.00	Completed

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150203 Replacement Housing Factor Grant No:			<b>Federal FY of Grant: 2003</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-5	Outdoor gas grill	1450		1,000.00	609.95	609.95	609.95	Completed
Martin Boots	Direct alarm feed to 911	1460		500.00	698.00	698.00	698.00	Completed
Apts	Water softener	1460		1,600.00	1,568.00	1,568.00	1,568.00	Completed
	Interior common area renovations	1460		2,000.00	1,172.07	1,172.07	1,172.07	Completed
IN41-ALL	Operations	1406		10,000.00	7,387.06	7,387.06	7,387.06	Completed
	Admin – Windows	1475		9,287.81	7,105.00	7,105.00	7,105.00	Completed
	Contingency	1502		6,021.00	2,292.98	2,292.98	2,292.98	Completed

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
PHA Name: Housing Authority of the City of Marion, IN		<b>Grant Type and Number</b> Capital Fund Program No: IN36P04150203 Replacement Housing Factor No:					Federal FY of Grant: 2003
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IN41-1	2/13/2006		3/31/2006	2/13/2008		3/31/2006	
12 <sup>th</sup> /Upton St Houck St							
IN41-2	2/13/2006		3/31/2006	2/13/2008		3/31/2006	
Coulton Ct Curfman Rd North Court							
IN41-3	2/13/2006		3/31/2006	2/13/2008		3/31/2006	
Norman Manor Apts							
IN41-4	2/13/2006		3/31/2006	2/13/2008		3/31/2006	
Riverside Apts							
IN41-5	2/13/2006		3/31/2006	2/13/2008		3/31/2006	
Martin Boots Apts							
IN41-ALL	2/13/2006		3/31/2006	2/13/2008		3/31/2006	

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Marion, IN		<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150104 Replacement Housing Factor Grant No:			<b>Federal FY                      of Grant:</b> 2004
<input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:    )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	55,120	48,612.97	36,215.72	36,215.72
3	1408 Management Improvements	21,000	21,000.00	21,000.00	15,000.00
4	1410 Administration	48,500	48,500.00	48,500.00	39,628.64
5	1411 Audit	5,000	5,000.00	5,000.00	5,000.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30,000	30,000.00	28,535.80	28,535.80
8	1440 Site Acquisition				
9	1450 Site Improvement	40,000	32,926.41	10,442.70	9,792.70
10	1460 Dwelling Structures	178,250	192,655.77	178,676.41	142,209.09
11	1465.1 Dwelling Equipment—Nonexpendable	14,500	22,261.06	18,970.00	15,605.50
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	22,300	23,971.52	9,032.60	7,213.34
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	34,900	24,642.27	19,474.76	9,362.84
21	Amount of Annual Grant: (sum of lines 2 – 20)	449,570	449,570.00	369,847.99	308,563.63
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				

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>						
<b>PHA Name:</b> Housing Authority of the City of Marion, IN		<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150104 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2004	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )						
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
	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: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150104 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-1	Concrete/Grading	1450		12,000	10,524.76	3,672.70	3,672.70	In Process
12 <sup>th</sup> /Upton St	Basement wall repair	1450		5,000	1,920.00	1,920.00	1,920.00	Completed
Houck St	Doors/Trim	1460		3,500	9,194.40	8,467.64	8,198.17	In Process
	Bathroom remodel	1460		5,000	3,800.00	3,295.84	993.23	In Process
	Cabinets/Countertop	1460		3,000	5,000.00	4,659.97	3,991.99	In Process
	Water Heaters	1460		375	375.00	37.26	0	In Process
	Light fixtures	1460		750	1,453.57	1,453.57	1,453.57	Completed
	Painting	1460		3,000	12,743.76	12,725.35	12,725.35	Completed
	Floor Tile	1460		1,500	3,944.84	3,944.84	3,648.09	In Process
	Window Replacement	1460		1,500	2,109.76	2,109.76	2,109.76	In Process
	Rehab unit/Contract labor	1460		7,000	0	0	0	Deleted
	Roof repair/Replace	1460		2,500	1,500.00	0	0	Proposed
	Carpet	1460		2,000	0	0	0	Deleted
	HVAC	1460		14,000	23,386.89	23,386.89	14,332.75	In Process
	Ranges/Refrigerators	1465		3,000	5,828.10	5,828.10	4,305.60	In Process

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

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150104 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-2	Concrete/Grading	1450		12,000	11,847.18	4,200.00	4,200.00	In Process
Coulton Ct	Fence	1450		6,000	4,159.47	0.00	0.00	Deleted
Curfman Rd	Basement wall repair	1450		5,000	4,475.00	650.00	0.00	Deleted
North Court	Doors/Trim	1460		3,500	3,500.00	1,998.81	1,998.81	In Process
	Bathroom remodel	1460		5,000	3,036.00	2,372.73	2,372.73	In Process
	Cabinets/Countertop	1460		3,000	3,068.90	1,543.15	292.10	In Process
	Water Heaters	1460		375	43.19	43.19	0.00	Completed
	Light fixtures	1460		750	737.35	737.35	737.35	Completed
	Painting	1460		3,000	9,056.15	9,056.15	8,946.15	In Process
	Floor Tile	1460		1,500	4,371.29	4,371.29	3,555.81	In Process
	Window Replacement	1460		1,500	1,503.10	1,503.10	1,503.10	Completed
	Rehab unit/Contract labor	1460		7,000	0.00	0.00	0.00	Deleted
	Roof repair/Replace	1460		2,500	2,500.00	0.00	0.00	Proposed
	Carpet	1460		2,000	0.00	0.00	0.00	Deleted
	HVAC	1460		14,000	31,247.24	31,247.24	9,054.14	In Process
	Ranges/Refrigerators	1465		3,000	2,096.10	2,096.10	573.60	In Process

**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: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150104 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-3	HVAC	1460		2,000	2,423.65	1,648.00	1,648.00	In Process
Norman	Carpet	1460		2,500	4,633.22	4,633.22	4,633.22	Completed
Manor Apts	Painting	1460		2,000	4,030.75	4,030.75	4,030.75	Completed
	Re-Glaze bathtubs	1460		500	0.00	0.00	0.00	Deleted
	Smoke Detectors	1460		1,000	0.00	0.00	0.00	Deleted
	Floor tile	1460		1,000	0.00	0.00	0.00	Deleted
	Renovate 2 apts.	1460		30,000	0.00	0.00	0.00	Deleted
	Renovate arts/craft room	1460		15,000	3,371.80	3,371.80	3,446.66	Completed
	Ranges/refrigerators	1465		2,500	5,479.83	4,306.60	4,146.86	In Process
IN41-4	HVAC	1460		4,500	9,216.00	9,216.00	4,652.00	In Process
Riverside	Carpet	1460		3,000	4,681.65	2,729.86	2,729.86	In Process
Apts	Painting	1460		2,000	2,691.25	2,691.25	2,691.25	Completed
	Re-Glaze bathtubs	1460		500	0.00	0.00	0.00	Deleted
	Elevator (rebuild)	1460		3,000	0.00	0.00	0.00	Deleted
	Water Heater	1460		5,000	3,670.88	3,601.10	84.10	In Process
	Ranges/refrigerators	1465		3,000	5,857.03	5,304.60	5,224.72	In Process



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

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150104 Replacement Housing Factor Grant No:			<b>Federal FY of Grant: 2004</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-ALL	Operations	1406		55,120	48,612.97	36,215.72	36,215.72	In Process
	Section 3	1408		6,000	6,000.00	0.00	0.00	Proposed
	Staff Training	1408		15,000	15,000.00	15,000.00	15,000.00	Completed
	Salary/Fringes/Travel Sundry	1410		48,500	48,500.00	48,500.00	39,628.64	In Process
	Audit	1411		5,000	5,000.00	5,000.00	5,000.00	Completed
	A/E Services	1430		30,000	30,000.00	28,535.80	28,535.80	In Process
	Seal Ext. Admin bldg	1475		12,000	10,143.59	0.00	0.00	Proposed
	Maintenance equipment	1475		3,300	6,827.93	6,289.30	5,627.57	In Process
	Office equipment	1475		7,000	7,000.00	2,743.30	1,585.77	In Process
	Contingency	1502		34,900	20,073.73	19,474.76	9,362.84	In Process

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
PHA Name: Housing Authority of the City of Marion, IN			<b>Grant Type and Number</b> Capital Fund Program No: IN36P04150104 Replacement Housing Factor No:				Federal FY of Grant: 2004
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IN\$1-1	9/30/2006			9/30/2008			
12 <sup>th</sup> /Upton St							
Houck St							
IN41-2	9/30/2006			9/30/2008			
Coulton Ct							
Curfman Rd							
North Court							
IN41-3	9/30/2006			9/30/2008			
Norman							
Manor Apts							
IN41-4	9/30/2006			9/30/2008			
Riverside Apts							
IN41-5	9/30/2006			9/30/2008			
Martin Boots Apts							
IN41-ALL	9/30/2006			9/30/2008			

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

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHA Name: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150105 Replacement Housing Factor Grant No:		Federal FY of Grant: 2005
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:   )					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	93,112			
3	1408 Management Improvements	21,000		6,598.97	6,598.97
4	1410 Administration	54,000			
5	1411 Audit	5,000		1,860.00	1,860.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	8,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	104,202			
10	1460 Dwelling Structures	100,188			
11	1465.1 Dwelling Equipment—Nonexpendable	4,000			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	69,500			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	6,560			
21	Amount of Annual Grant: (sum of lines 2 – 20)	465,562		8,458.97	8,458.97
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				

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

<b>Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Marion, IN		<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150105 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2005
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
26	Amount of line 21 Related to Energy Conservation Measures				

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-1	Replace driveways/Aprons	1450		72,000				Proposed
12 <sup>th</sup> /Upton St	Replace siding	1460		11,000				Proposed
Houck St	Ext. Doors	1460		10,000				Proposed
	Steel lintel	1460		3,000				Proposed
	Basement wall repair	1460		500				Proposed
	Doors/Trim	1460		1,000				Proposed
	Cabinets/Countertops	1460		1,000				Proposed
	Water heaters	1460		500				Proposed
	Light & wall fixtures	1460		500				Proposed
	Painting	1460		1,178				Proposed
	Floor Tile	1460		1,000				Proposed
	Window Replacement	1460		1,000				Proposed
	HVAC	1460		3,124				Proposed
	Ranges/Refrigerators	1465		800				Proposed

**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: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-2	Replace siding	1460		5,500				Proposed
Coulton Ct	Ext. Doors	1460		8,000				Proposed
Curfman Rd	Steel lintel	1460		2,000				Proposed
North Court	Basement wall repair	1460		500				Proposed
	Door/Wood trim	1460		1,000				Proposed
	Cabinets/Countertops	1460		1,000				Proposed
	Water Heaters	1460		500				Proposed
	Light & wall fixtures	1460		500				Proposed
	Painting	1460		1,178				Proposed
	Floor tile	1460		1,000				Proposed
	Window replacement	1460		1,000				Proposed
	HVAC	1460		3,124				Proposed
	Ranges/refrigerators	1465		800				Proposed

**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: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-3	Water heaters	1460		250				Proposed
Norman	Carpet	1460		1,000				Proposed
Manor Apts	Painting	1460		1,178				Proposed
	Floor tile	1460		1,000				Proposed
	HVAC	1460		2,700				Proposed
	Ranges/refrigerators	1465		800				Proposed
IN41-4	Sealant at curbs	1450		250				Proposed
Riverside	Replace asphalt/Restripe lot	1450		29,952				Proposed
Apts	Concrete curbs in Prkg lot	1450		2,000				Proposed
	Emerg. Generator installation	1460		20,000				Proposed
	Water Heater	1460		500				Proposed
	Carpet	1460		1,000				Proposed
	Painting	1460		1,178				Proposed
	Floor tile	1460		1,000				Proposed
	HVAC	1460		3,800				Proposed
	Ranges/Range hood/Refrigerators	1465		800				Proposed

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

<b>Annual Statement/Performance and Evaluation Report</b>								
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>								
<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-5	Water Heater	1460		500				Proposed
Martin Boots	Carpet	1460		1,000				Proposed
Apts	Painting	1460		1,178				Proposed
	Floor tile	1460		1,000				Proposed
	HVAC	1460		3,800				Proposed
	Ranges/Range hood/Refrigerators	1465		800				Proposed
IN41-ALL	Operations	1406		93,112				Proposed
	Section 3	1408		6,000				Proposed
	Staff Training	1408		15,000		6,598.97	6,598.97	In Process
	Salary/Fringes/Travel Sundry	1410		54,000				Proposed
	Audit	1411		5,000		1,860.00	1,860.00	In Process
	A/E Services	1430		8,000				Proposed
	Maintenance Vehicle	1475		22,000				Proposed
	Office equipment	1502		47,500				Proposed
	Contingency			6,560				Proposed

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

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
PHA Name: Housing Authority of the City of Marion, IN			<b>Grant Type and Number</b> Capital Fund Program No: IN36P04150105 Replacement Housing Factor No:				<b>Federal FY of Grant: 2005</b>
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IN\$1-1 12 <sup>th</sup> /Upton St Houck St	9/30/2007			9/30/2009			
IN41-2 Coulton Ct Curfman Rd North Court	9/30/2007			9/30/2009			
IN41-3 Norman Manor Apts	9/30/2007			9/30/2009			
IN41-4 Riverside Apts	9/30/2007			9/30/2009			
IN41-5 Martin Boots Apts	9/30/2007			9/30/2009			
IN41-ALL	9/30/2007			9/30/2009			

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

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHA Name: Housing Authority of the City of Marion, IN		Grant Type and Number Capital Fund Program Grant No: IN36P04150106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	93,112			
3	1408 Management Improvements	21,000			
4	1410 Administration	54,000			
5	1411 Audit	5,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	8,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	211,202			
10	1460 Dwelling Structures	40,688			
11	1465.1 Dwelling Equipment—Nonexpendable	4,000			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	20,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	8,560			
21	Amount of Annual Grant: (sum of lines 2 – 20)	465,562			
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				

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

<b>Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Marion, IN		<b>Grant Type and Number</b> Capital Fund Program Grant No: IN36P04150106 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
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**

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-1	Reroof roof areas	1450		93,394				Proposed
12 <sup>th</sup> /Upton St	Replace 25% roof deck sheathing	1450		9,000				Proposed
Houck St	Remove Pod vents	1450		1,500				Proposed
	Replace alum fascia & trim	1450		11,000				Proposed
	Replace Frieze board trim	1450		5,500				Proposed
	Replace soffit w/ vinyl	1450		16,000				Proposed
	Install alum gutters & gutter guard	1450		14,500				Proposed
	Install alum downspouts	1450		3,500				Proposed
	Basement wall repair	1460		500				Proposed
	Door/wood trim	1460		1,000				Proposed
	Cabinets/Countertops	1460		1,000				Proposed
	Water heaters	1460		500				Proposed
	Replacement light & fixtures	1460		500				Proposed

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

<b>Annual Statement/Performance and Evaluation Report</b>								
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>								
<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-1	Painting	1460		1,178				Proposed
Continued	Floor Tile	1460		1,000				Proposed
	Window Replacement	1460		1,000				Proposed
	HVAC	1460		3,124				Proposed
	Ranges/Refrigerators	1465		800				Proposed
IN41-2	Basement wall repair	1460		500				Proposed
Coulton Ct	Door/Wood trim	1460		1,000				Proposed
Curfman Rd	Cabinets/Countertops	1460		1,000				Proposed
North Court	Water Heaters	1460		500				Proposed
	Replacement light & fixtures	1460		500				Proposed
	Painting	1460		1,178				Proposed
	Floor tile	1460		1,000				Proposed
	Window replacement	1460		1,000				Proposed
	HVAC	1460		3,124				Proposed
	Ranges/refrigerators	1465		800				Proposed

**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: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-3	Emergency generator	1450		20,000				Proposed
Norman	Replace asphalt & restripe parking lot	1450		34,558				Proposed
Manor Apts	Apply sealant at curbs	1450		250				Proposed
	Concrete curbs at parking lot	1450		2,000				Proposed
	Water heaters	1460		250				Proposed
	Carpet	1460		1,000				Proposed
	Painting	1460		1,178				Proposed
	Floor tile	1460		1,000				Proposed
	HVAC	1460		2,700				Proposed
	Ranges/refrigerators	1465		800				Proposed

**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: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-4	Water Heater	1460		500				Proposed
Riverside	Carpet	1460		1,000				Proposed
Apts	Painting	1460		1,178				Proposed
	Floor tile	1460		1,000				Proposed
	HVAC	1460		3,800				Proposed
	Ranges/Range hood/Refrigerators	1465		800				Proposed
IN41-5	Water Heater	1460		500				Proposed
Martin Boots	Carpet	1460		1,000				Proposed
Apts	Painting	1460		1,178				Proposed
	Floor tile	1460		1,000				Proposed
	HVAC	1460		3,800				Proposed
	Ranges/Range hood/Refrigerators	1465		800				Proposed

**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: Housing Authority of the City of Marion, IN			Grant Type and Number Capital Fund Program Grant No: IN36P04150106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IN41-ALL	Operations	1406		93,112				Proposed
	Section 3	1408		6,000				Proposed
	Staff Training	1408		15,000				Proposed
	Salary/Fringes/Travel Sundry	1410		54,000				Proposed
	Audit	1411		5,000				Proposed
	A/E Services	1430		8,000				Proposed
	Maintenance Vehicle	1475		20,000				Proposed
	Contingency	1502		8,560				Proposed

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
PHA Name: Housing Authority of the City of Marion, IN			<b>Grant Type and Number</b> Capital Fund Program No: IN36P04150106 Replacement Housing Factor No:				Federal FY of Grant: 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IN41-1 12 <sup>th</sup> /Upton St Houck St	9/30/2008			9/30/2010			
IN41-2 Coulton Ct Curfman Rd North Court	9/30/2008			9/30/2010			
IN41-3 Norman Manor Apts	9/30/2008			9/30/2010			
IN41-4 Riverside Apts	9/30/2008			9/30/2010			
IN41-5 Martin Boots Apts	9/30/2008			9/30/2010			
IN41-ALL	9/30/2008			9/30/2010			

## 8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name Housing Authority of the City of Marion, IN				<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA-Wide	Year 1 IN36P04150106 07/01/2006	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant: IN36P04150107 PHA FY: 07/01/2007	FFY Grant: IN36P04150108 PHA FY: 07/01/2008	FFY Grant: IN36P04150109 PHA FY: 07/01/2009	FFY Grant: IN36P04150110 PHA FY: 07/01/2010
	Annual Statement				
IN41-1		239,604	26,806	68,902	
IN41-2		13,902	213,200	225,604	
IN41-3		10,228	10,228	10,228	
IN41-4		11,578	11,578	11,578	
IN41-5		11,578	11,578	11,578	
IN41-HA Wide		178,672	192,172	238,072	
CFP Funds Listed for 5-year planning		465,562	465,562	565,962	565,962
Replacement Housing Factor Funds					

## 8. Capital Fund Program Five-Year Action Plan

<b>Capital Fund Program Five-Year Action Plan</b>						
<b>Part II: Supporting Pages—Work Activities</b>						
Activities for Year 1	Activities for Year : 2 FFY Grant: IN36P04150107 PHA FY: 07/01/2007			Activities for Year: 3 FFY Grant: IN36P04150108 PHA FY: 07/01/2008		
	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
<b>See</b>	IN41-1	Reroof Roof Areas	164,702	IN41-1	Reroof Roof Areas	12,904
<b>Annual</b>		Replace 25% of Roof Deck Sheathing	9,000		Basement Wall Repair	1,500
<b>Statement</b>		Remove Pod Vents	1,500		Door/Wood Trim	1,000
		Replace Alum Fascia & Trim	11,000		Cabinets/Countertops	1,000
		Replace Frieze Board Trim	5,500		Water Heaters	1,000
		Replace Soffit w/ Vinyl	16,000		Replacement Light & Wall Fixtures	1,500
		Install Alum Gutters & Gutter Guard	14,500		Painting	1,178
		Install Alum Downspouts	3,500		Floor Tile	1,000
		Basement Wall Repair	1,500		Window Replacement	1,000
		Door/Wood Trim	1,000		HVAC	3,124
		Cabinets/Countertops	1,000		Ranges/Refrigerators	1,600
		Water Heaters	1,000			
		Replacement Light & Wall Fixtures	1,500			
		Painting	1,178			
		Floor Tile	1,000			
		Window Replacement	1,000			
		HVAC	3,124			
		Ranges/Refrigerators	1,600			

## 8. Capital Fund Program Five-Year Action Plan

	IN41-2	Basement Wall Repair	1,500	IN41-2	Reroof Roof Areas	140,298
		Door/Wood Trim	1,000		Replace 25% of Roof Deck Sheathing	8,500
		Cabinets/Countertops	1,000		Remove Pod Vents	1,000
		Water Heaters	1,000		Replace alum Fascia & Trim	10,500
		Replacement Light & Wall Fixtures	1,500		Replace Frieze Board Trim	6,000
		Painting	1,178		Replace Soffit w/ Vinyl	15,500
		Floor Tile	1,000		Install Alum Gutters & Gutter Guard	14,500
		Window Replacement	1,000		Install Alum Downspouts	3,000
		HVAC	3,124		Basement Wall Repair	1,500
		Ranges/Refrigerators	1,600		Door/Wood Trim	1,000
					Cabinets/Countertops	1,000
					Water Heaters	1,000
					Replacement Light & Wall Fixtures	1,500
					Painting	1,178
					Floor Tile	1,000
					Window Replacement	1,000
					HVAC	3,124
					Ranges/Refrigerators	1,600
	IN41-3	Water Heaters	250	IN41-3	Water Heaters	250
		Carpet	2,000		Carpet	2,000
		Painting	1,178		Painting	1,178
		Floor Tile	2,500		Floor Tile	2,500
		HVAC	2,700		HVAC	3,800
		Ranges/Refrigerators	1,600		Ranges/Refrigerators	1,600



## 8. Capital Fund Program Five-Year Action Plan

<b>Capital Fund Program Five-Year Action Plan</b>					
<b>Part II: Supporting Pages—Work Activities</b>					
Activities for Year : 4 FFY Grant: IN36P04150109 PHA FY: 07/01/2009			Activities for Year: 5 FFY Grant: IN36P04150110 PHA FY: 07/01/2010		
<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
IN41-1	Basement Wall Repair	1,500	IN41-1	Reroof Roof Areas	5,000
	Door/Wood Trim	1,000		Replace 25% of Roof Deck Sheathing	500
	Cabinets/Countertops	1,000		Remove Pod Vents	500
	Water Heaters	1,000		Replace Alum Fascia & Trim	500
	Replacement Light & Wall Fixtures	1,500		Replace Soffit w/ Vinyl	500
	Painting	1,178		Install Alum Gutters & Gutter Guard	500
	Floor Tile	1,000		Concrete drives & walks	2,500
	Window Replacement	1,000		Basement wall repair	500
	Replace Electric Baseboard Heaters	3,124		Door/Wood Trim	1,000
	Ranges/Refrigerators	1,600		Cabinets/Countertops	33,600
	Install Electric Furnaces & Ductwork	30,000		Bathroom Remodel	5,000
	Install Central A/C Condenser	25,000		Water Heaters	500
				Replacement light & wall fixtures	500
				Painting	18,000
				Floor Tile	1,000
				Windows/Blinds/Trim	5,000
				Landscaping/Trim trees	2,500
				Garages/Carports	5,000
				HVAC	35,000
				Range/Refrigerators	800

## 8. Capital Fund Program Five-Year Action Plan

IN41-2	Reroof Roof Areas	119,702	IN41-2	Reroof Roof Areas	5,000
	Replace 25% of Roof Deck Sheathing	8,500		Replace 25% of Roof Deck Sheathing	500
	Remove Pod Vents	1,000		Remove Pod Vents	500
	Replace alum Fascia & Trim	10,500		Replace Alum Fascia & Trim	500
	Replace Frieze Board Trim	6,000		Replace Soffit w/ Vinyl	500
	Replace Soffit w/ Vinyl	15,500		Install Alum Gutters & Gutter Guard	500
	Install Alum Gutters & Gutter Guard	14,500		Concrete drives & walks	2,500
	Install Alum Downspouts	3,000		Basement wall repair	500
	Basement Wall Repair	1,500		Door/Wood Trim	1,000
	Door/Wood Trim	1,000		Cabinets/Countertops	30,800
	Cabinets/Countertops	1,000		Bathroom Remodel	5,000
	Water Heaters	1,000		Water Heaters	500
	Replacement Light & Wall Fixtures	1,500		Replacement light & wall fixtures	500
	Painting	1,178		Painting	18,000
	Floor Tile	1,000		Floor Tile	1,000
	Window Replacement	1,000		Windows/Blinds/Trim	5,000
	Replace Electric Baseboard Heaters	3,124		Landscaping/Trim trees	2,500
	Ranges/Refrigerators	1,600		Garages/Carports	5,000
	Install Electric Furnaces & Ductwork	18,000		HVAC	35,000
	Install Central A/C Condenser	15,000		Range/Refrigerators	800

## 8. Capital Fund Program Five-Year Action Plan

IN41-3	Water Heaters	500	IN41-3	Replace asphalt & restripe parking lot	3,500
	Carpet	2,000		Concrete curbs at parking lot	2,000
	Painting	1,178		Water Heaters	250
	Floor Tile	2,500		Electric fixtures	250
	HVAC	3,800		Cabinets/Countertops	7,000
	Ranges/Refrigerators/Hoods	1,600		Bathroom remodel	1,500
				Carpet	6,600
				Painting	2,500
				Floor Tile	1,000
				HVAC	2,700
				Ranges/Refrigerators/Hoods	800
IN41-4	Water Heaters	500	IN41-4	Replace asphalt & restripe parking lot	3,500
	Carpet	2,000		Water Heaters	500
	Painting	1,178		Electric fixtures	250
	Floor Tile	2,500		Cabinets/Countertops	7,000
	HVAC	3,800		Bathroom remodel	1,500
	Ranges/Refrigerators/Hoods	1,600		Carpet	6,600
				Painting	2,500
				Floor Tile	1,000
				HVAC	3,800
				Ranges/Refrigerators/Hoods	800

