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: Great Bend 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: Great Bend Ho	ousing A	authority PHA	PHA Number: KS-041			
PHA Fiscal Year Beginning	g: 01/20	06				
PHA Programs Administer Public Housing and Section 8 Number of public housing units:96 Number of S8 units:80	iscal Year Beginning: 01/2006 rograms Administered: E Housing and Section 8 Section 8 Only Number of S8 units: Number of public housing units:96 Number of S8 units: Number of public housing units: Consortia: (check box if submitting a joint PHA Plan and complete table) Participating PHAs PHA Program(s) Included in the Consortium Each Program of the Consortium in the					
PAR Consortia: (check be	PHA	Program(s) Included in	Programs Not in	# of Units		
Participating PHA 1:						
Participating PHA 2:						
Participating PHA 3:	Grams Administered: Housing and Section 8 Section 8 Only Number of public Housing Only like housing units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Number of public housing units: Units: Number of S8 units: Numbe					
Public Access to Information regarding any action (select all that apply)	vities out	lined in this plan can	be obtained by co	ontacting:		
Display Locations For PHA	Plans	and Supporting D	ocuments			
public review and inspection. If yes, select all that apply: Main administrative office PHA development manage	Yes Yes e of the Plement off e of the lo	No. HA ices cal, county or State go	overnment			

PHA Name: Great Bend Housing Authority

HA Code: KS041

Streamlined Annual PHA Plan Fiscal Year 2006

[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.

Α.	PHA PLAN COMPONENTS
	1. Site-Based Waiting List Policies
903.7(b	(2) Policies on Eligibility, Selection, and Admissions
\boxtimes	2. Capital Improvement Needs
903.7(g	s) Statement of Capital Improvements Needed
	3. Section 8(y) Homeownership
903.7(k	x)(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.
\boxtimes	6. Supporting Documents Available for Review
\boxtimes	7. Capital Fund Program and Capital Fund Program Replacement Housing Factor,
	Annual Statement/Performance and Evaluation Report
\boxtimes	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-LLLa, <u>Disclosure of Lobbying Activities</u>.

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					
4. Yes 1 or any court of complaint and inconsistent v	y list? No: Is the PHA order or settlen d describe how with the order,	a the subject of any penent agreement? If ye use of a site-based wagreement or complain	n before being remove nding fair housing con s, describe the order, a aiting list will not viol nt below:	nplaint by HUD greement or					
B. Site-Based V	Vaiting Lists –	- Coming Year							
		more site-based waiti skip to next componer	ng lists in the coming nt.	year, answer each					
1. How many site	-based waiting	g lists will the PHA op	erate in the coming ye	ar? 0					
2. Yes N	•	they are not part of a	pased waiting lists new previously-HUD-appro	1 0					

If yes, how many lists?

В.

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

1. Tyes 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):

Α.

	HOPE VI Revitalization Grant Status
a. Development Name	
b. Development Num c. Status of Grant:	ber:
Revitalizat Revitalizat Revitalizat	ion Plan under development ion Plan submitted, pending approval ion Plan approved bursuant 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: V	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 R Part 903.12(c), 903.7(k)(1)(i)]
1. ☐ Yes ⊠ No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)
2. Program Descripti	on:
a. Size of Program ☐ Yes ☐ No:	Will the PHA limit the numbr of families participating in the Section 8 homeownership option?
	If the answer to the question above was yes, what is the maximum number of participants this fiscal year?
b. PHA-established e	Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:

PHA Name: Great Bend Housing Authority Streamlined Annual Plan for Fiscal Year 2006 HA Code: KS041 c. What actions will the PHA undertake to implement the program this year (list)? 3. Capacity of the PHA to Administer a Section 8 Homeownership Program: The PHA has demonstrated its capacity to administer the program by (select all that apply): Establishing a minimum homeowner down payment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources. Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards. Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below): Demonstrating that it has other relevant experience (list experience below): 4. Use of the Project-Based Voucher Program **Intent to Use Project-Based Assistance** Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions. 1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If

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

low utilization rate for vouchers due to lack of suitable rental units

access to neighborhoods outside of high poverty areas

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 Kansas

yes, check which circumstances apply:

other (describe below:)

	e PHA has taken the following steps to ensure consistency of this PHA Plan with the asolidated 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)
	Other: (list below)
	e Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions mmitments: (describe below)
By pro	viding housing and housing opportunities to low income families.

6. Supporting Documents Available for Review for Streamlined Annual PHA **Plans**

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

	List of Supporting Documents Available for Review	
Applicable & On Display	Supporting Document	Related Plan Component
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
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. ☑ Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents. ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	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
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (f necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

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

	List of Supporting Documents Available for Review	
Applicable & On Display	Supporting Document	Related Plan Component
•		Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
N/A	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
N/A	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (Section of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
X	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
N/A	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
N/A	Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

Ann	ual Statement/Performance and Evalua	ation Report			
Capi	tal Fund Program and Capital Fund P	rogram Replacemen	t Housing Factor ((CFP/CFPRHF)	
_	1: Summary		J	,	
	ame: Great Bend	Grant Type and Number Capital Fund Program Grant N Replacement Housing Factor C	o: KS16P041501-06		Federal FY of Grant: 2006
⊠ Ori	iginal Annual Statement Reserve for Disasters		sed Annual Statement (re	vision no:	
	formance and Evaluation Report for Period Ending:		formance and Evaluation		
Line					
No.	Summary by Development Account	Total Estim			ctual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	17,000			
3	1408 Management Improvements				
2 3 4 5	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	93,464			
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 1-20)	110,464			
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 Cons Measures				

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

PHA Name: Great Bend			Grant Type and Number Capital Fund Program Grant No: KS16P041501-06 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 Estin		Total Actual Cost		Status of Work	
					Original	Revised	Obligated	Expended		
All	Operations		1406		17,000					
	Paint, carpet and vinyl floors (42 units)		1460		93,464					

Annual Statement/Performance and Evaluation Report									
Capital Fund Prog	gram and	Capital F	und Prog	gram Replac	ement Housi	ng Factor	(CFP/CFPRHF)		
Part III: Impleme	entation S	chedule							
PHA Name: Great Bend		Capita	Type and Nur al Fund Progra cement Housir	m No: KS16P04150		Federal FY of Grant: 2006			
Development Number Name/HA-Wide Activities		Fund Obligate Fund Ending Da			ll Funds Expended uarter Ending Date		Reasons for Revised Target Dates		
	Original	Revised	Actual	Original	Revised	Actual			
1									

Ann	ual Statement/Performance and Evalua	ation Report			
Capi	ital Fund Program and Capital Fund P	rogram Replacemen	t Housing Factor (CFP/CFPRHF)	
_	1: Summary	•	· ·	•	
	ame: Great Bend	Grant Type and Number Capital Fund Program Grant No Replacement Housing Factor G	o: KS16P041501-05		Federal FY of Grant: 2005
Or	iginal Annual Statement Reserve for Disasters		sed Annual Statement (rev	vision no:)	
	formance and Evaluation Report for Period Ending:		inal Performance and Eva	luation Report	
Line					
No.	Summary by Development Account	Total Estim		Total Ac	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	17,000		0	0
3	1408 Management Improvements				
2 3 4 5	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	93,464		0	0
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 1-20)	110,464			
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 Cons Measures				

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

PHA Name: Great Bend		Grant Type and Number Capital Fund Program Grant No: KS16P041501-05 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 Estin	Total Estimated Cost		Total Actual Cost Obligated Expended	
All	Operations		1406		17,000		0	0	
All	Weatherize brick and caulk windows		1460		93,464		0	0	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
_	_	-	und Prog	gram Replac	ement Housi	ng Factor	(CFP/CFPRHF)	
PHA Name: Great Bend Grant Type and Number Capital Fund Program No: KS16P041501-05 Replacement Housing Factor No:							Federal FY of Grant: 2005	
Development Number Name/HA-Wide Activities	Fund Obligate	ed	All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates		
	Original	Revised	Actual	Original	Revised	Actual		
All	8/17/2007			8/17/2009				

Ann	ual Statement/Performance and Evalua	ation Report							
	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
_	1: Summary	6 1	9	()					
	PHA Name: Great Bend Housing Authority Grant Type and Number								
		Capital Fund Program Grant No:			Federal FY of Grant: 2004				
		Replacement Housing Factor Gra							
	☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)								
	formance and Evaluation Report for Period Ending:	6/30/05	al Performance and Ev	aluation Report					
Line									
No.	Summary by Development Account	Total Estimat			tual Cost				
	The state of the s	Original	Revised	Obligated	Expended				
1	Total non-CFP Funds								
2	1406 Operations	22,666		22,666	22,666				
3	1408 Management Improvements	3,000		3,000	3,000				
4	1410 Administration	2,000		2,000	2,000				
5	1411 Audit								
6	1415 Liquidated Damages								
7	1430 Fees and Costs								
8	1440 Site Acquisition								
9	1450 Site Improvement								
10	1460 Dwelling Structures	91,643		5,433	5,433				
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 1-19)	119,309							
22	Amount of line 20 Related to LBP Activities								
23	Amount of line 20 Related to Section 504 compliance								
24	Amount of line 20 Related to Security - Soft Costs								
25	Amount of Line 20 related to Security - Hard Costs								
26	Amount of line 20 Related to Energy Conservation								

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

PHA Name: Great Bend Housing Authority		Capital	Grant Type and Number Capital Fund Program Grant No: KS16P041501-04 Replacement Housing Factor Grant No:					Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	er -Wide General Description of Major Work		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
					Original	Revised	Obligated	Expended		
PHA Wide	Operations		1406		22,666		22,666	22,666		
	Management improvements		1408		3,000		3,000	3,000		
	Administration		1410		2,000		2,000	2,000		
	Replace kitchen cabinets on 32 units; redo doors on 96 units		1460		91,643		5,433	5,433		

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part III: Impleme	_	_	una Prog	gram Kepiac	ement nousi	ing ractor	(CFF/CFFKNF)	
PHA Name: Great Bend Ho		Grant Capita	Type and Nur al Fund Progra cement Housir	mber m No: KS16P04150 ng Factor No:	01-04	Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	Fund Obligate	ed	All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates		
	Original	Revised	Actual	Original	Revised	Actual		
PHA Wide	9/6/06			9/5/08				

8. Capital Fund Program Five-Year Action Plan

_	_	e-Year Action Plan			
Part I: Summar		ı			
	PHA Name Great Bend			⊠ Original 5-Year Plan Revision No:	
Housing Authority Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2007	Work Statement for Year 3 FFY Grant: 2008	Work Statement for Year 4 FFY Grant: 2009	Work Statement for Year 5 FFY Grant: 2010
		PHA FY:	PHA FY:	PHA FY:	PHA FY:
	Annual Statement	\$110,464	\$110,464	\$110,464	\$110,464
CFP Funds Listed for 5-year planning		\$110,464	\$110,464	\$110,464	\$110,464
Replacement Housing Factor Funds					

8. Capital Fund Program Five-Year Action Plan

Capital Fu	Capital Fund Program Five-Year Action Plan								
Part II: Supporting Pages—Work Activities									
Activities	A	ctivities for Year : 2			Activities for Year: 3				
for		FFY Grant: 2007			FFY Grant: 2008				
Year 1		PHA FY:	T		PHA FY:				
	Development	Major Work	Estimated Cost	Development	Major Work	Estimated			
	Name/Number	Categories		Name/Number	Categories	Cost			
See	PHA wide	Operations	\$17,000.00	PHA wide	Operations	\$17,000.00			
Annual		Paint, carpet & vinyl floors 50	\$93,464.00		Replace kitchen cabinets in 60	\$93,464.00			
		units			units				
Statement									
	Total CFP Estimated	Cost	\$ 110,464.00			\$ 110,464.00			

8. Capital Fund Program Five-Year Action Plan

_	Capital Fund Program Five-Year Action Plan								
Part II: Supportin	ng Pages—Work A Activities for Year:		Activities for Year: 5						
	FFY Grant: 2009			FFY Grant: 2010					
	PHA FY:			PHA FY:					
Development Name/Number			Development Name/Number	Major Work Categories	Estimated Cost				
PHA wide	Operations	\$17,000.00	PHA wide	Operations	\$17,000.00				
	Replace carpet in all hallways	\$93,464.00		Upgrade fire alarm systems to current code	\$93,464.00				
T + 1 CED E	1 1 C	\$ 110,464.00			\$110,464.00				
Total CFP E	Total CFP Estimated Cost				\$110,404.00				