

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: Housing Authority of the
City of Elizabeth**

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 Elizabeth **PHA Number:** NJ003

PHA Fiscal Year Beginning: July 1, 2006

PHA Programs Administered:

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

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: William D. Jones Phone: 908-965-2400
TDD: Email (if available): WJones@HACENJ.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 20
[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

- X 1. Site-Based Waiting List Policies
- 903.7(b)(2) Policies on Eligibility, Selection, and Admissions**
- X 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.
- X 6. Supporting Documents Available for Review
- X 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- X 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.

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

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

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?
Portside, Westport, Marina Village, Portside II and Heritage Village are operated by private management companies.

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)? N/A
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):
-Neighborhood has been revitalized
-471 out of the 554 proposed units are completed
-All self-sufficiency components are either ongoing or completed.

HOPE VI Revitalization Grant Status	
a. Development Name:	Pioneer Homes, Migliore Manor
b. Development Number:	NJ39URD0031197
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 checked="" 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? N/A

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:

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

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:
Not yet under administration.

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family’s resources.
- Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):
- Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

Yes No: Does the PHA plan to “project-base” any tenant-based Section 8 vouchers in the coming year? If the answer is “no,” go to the next component. If yes, answer the following questions.

1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
 - low utilization rate for vouchers due to lack of suitable rental units
 - access to neighborhoods outside of high poverty areas
 - other (describe below:)
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: (provide name here)
City of Elizabeth
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)
 - Other: (list below)

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

- Dedication of Funds to HOPE VI initiative.
- Assistance to joint neighborhood revitalization
- Coordination of City/PHA activities

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	<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
X	<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
X	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	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
X	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. <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> 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	Annual Plan: Rent

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	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 (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
X	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
X	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
X	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
X	Policies governing any Section 8 Homeownership program (Section ____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs <input type="checkbox"/> 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
X	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	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).	Annual Plan: Pet Policy

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	<input type="checkbox"/> Check here if included in the public housing A & O Policy.	
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary**

PHA Name: Housing Authority of the City of Elizabeth	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant: July, 2006
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XOriginal Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 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				
3	1408 Management Improvements	\$312,945.90			
4	1410 Administration	\$208,630.60			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$30,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,348,729.50			
11	1465.1 Dwelling Equipment—Nonexpendable	\$33,000.00			
12	1470 Nondwelling Structures	\$124,000.00			
13	1475 Nondwelling Equipment	\$29,000.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$2,086,306.00			
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	\$130,945.90			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority City of Elizabeth		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: July 1, 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	
Mravlag Manor	Consultant	1430		\$30,000				
NJ 3-1	Maint. Equipment	1475		\$10,000				
	Rep. Applicances	1465.1		\$7,000				
	Landscaping/Rep.	1470		\$6,000				
	Concrete							
	Upgrade Bathrooms And Kitchens	1460		\$1,148,729.50				
	Paint Apartments	1470		\$10,000				
	Rep. Basement And Doors	1470		\$18,000				
	Total:			\$1,229,729.50				

**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 City of Elizabeth		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Farley Towers								
NJ 3-4	Paint Apartments	1470		\$10,000				
	Maint. Equipment	1475		\$4,000				
	Replace Appliances	1465.1		\$7,000				
	Total:			\$21,000				

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 City of Elizabeth		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Kennedy Arms								
NJ 3-5	Paint. Apartments	1470		\$10,000				
	Replace Appliances	1465.1		\$6,000				
	Maint. Equipment	1475		\$5,000				
	Rep. Apt. Door Locks	1470		\$50,000				
	Upgrade Kitchens	1460		\$100,000				
	Total:			\$171,000				

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 City of Elizabeth		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Ford-Leonard Towers								
NJ 3-6	Maint. Equipment	1475		\$5,000				
	Paint Apartments	1470		\$10,000				
	Replace Appliances	1465.1		\$6,000				
	Total:			\$21,000				

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 City of Elizabeth		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
O'Donnell Dempsey								
NJ 3-8	Main. Equipment	1475		\$5,000				
	Replace Appliances	1465.1		\$7,000				
	Paint. Apts.	1470		\$10,000				
	Upgrade Kitchens	1460		\$100,000				
	Total:			\$122,000				

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 City of Elizabeth		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Management Improvements		1408						
	Resident Training			\$80,000				
	Family Site Security			\$30,945.90				
	Senior Site Security			\$100,000				
	Apprenticeship Program			\$60,000				
	Resident Social Program			\$12,000				
	Computerization			\$10,000				
	Common Area-Clean-Up-Program			\$10,000				
	Staff Training			\$10,000				
	Total			\$312,945.90				

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name:		Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:					Federal FY of Grant:
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Mravlag Manor							
NJ 3-1							
Consultant Services	4-30-06			4-30-07			
Maint. Equipment	4-30-06			4-30-07			
Replace Apps.	4-30-06			4-30-07			
Landscaping/Rep.	4-30-06			4-30-07			
Concrete							
Upgrade Bathroom And Kitchens	7-30-06			7-30-07			
Paint. Apartments	4-30-06			4-30-07			
Rep. Basement And Doors	4-30-06			4-30-07			

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name:		Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:					Federal FY of Grant:
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Farley Towers							
NJ 3-4							
Paint Apartments	4-30-06			4-30-07			
Maint. Equip.	4-30-06			4-30-07			
Rep. Appliances	4-30-06			4-30-07			

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority City Of Elizabeth			Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:			Federal FY of Grant:	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Kennedy Arms							
NJ 3-5							
Paint Apts.	4-30-06			4-30-07			
Rep. Appliances	4-30-06			4-30-07			
Maint. Equip.	4-30-06			4-30-07			
Rep. Apt. Door Locks.	4-30-06			4-30-07			
Upgrade Kitchens	8-01-06			8-01-07			

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority City Of Elizabeth			Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:			Federal FY of Grant:	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Ford Leonard Towers							
NJ 3-6							
Maint. Equipment	4-30-06			4-30-07			
Paint Apartments	4-30-06			4-30-07			
Rep. Appliances	4-30-06			4-30-07			

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority City Of Elizabeth			Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:			Federal FY of Grant:	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
O'Donnell Dempsey							
NJ 3-8							
Maint. Equipment	4-30-06			4-30-07			
Rep. Appliances	4-30-06			4-30-07			
Paint. Apts.	4-30-06			4-30-07			
Upgrade Kitchens	8-01-06			8-01-07			

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name: Housing Authority Of the City of Elizabeth			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:		
Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY: 2007	Work Statement for Year 3 FFY Grant: PHA FY: 2008	Work Statement for Year 4 FFY Grant: PHA FY: 2009	Work Statement for Year 5 FFY Grant: PHA FY: 2010
	Annual Statement				
NJ3-1 Mravlag Manor		\$821,729.50	\$1,127,799.25	\$868,000	\$667,930.25
NJ3-4 Farley Towers		\$354,729.50	\$399,930.25	\$291,729.50	\$ 10,000
NJ3-5 Kennedy Arms		\$342,270.50	\$11,000	\$115,000	\$ 10,000
NJ3-6 Ford Leonard		\$21,000	\$11,000	\$65,000	\$866,799.25
NJ3-8 O'Donnell Dempsey		\$25,000	\$15,000	\$225,000	\$10,000
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds		\$1,049,566.00	\$1,049,566.00		

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : __2 FFY Grant: PHA FY: 2007			Activities for Year: 3__ FFY Grant: PHA FY: 2008		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>NJ3-1</i>			<i>NJ 3-1</i>		
Annual Statement	Mravlag Manor			Mravlag Manor		
		Consultant	\$30,000		Consultant	\$30,000
		Maint. Equip.	\$8,000		Maint. Equip.	\$8,000
		Rep. Appliances	\$7,000		Replace App.	\$7,000
		Landscaping/Rep. Concrete	\$6,000		Landscaping/Rep Concrete	\$6,000
		Remove Compactors	\$117,000		Upgrade Kitchensn	\$1,005,799.25
		Paint. Apartments	\$20,000		And Bathrooms	\$20,000
		Upgrade Kitchens & Baths	\$750,729.50		Paint Apartments	\$20,000
					Extend Hall –way	
					Handrails	\$50,000
Total CFP Estimated Cost			\$821,729.50			\$1,127,799.25

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

Activities for Year 1	Activities for Year :__4 FFY Grant: PHA FY: 2009			Activities for Year: 5__ FFY Grant: PHA FY: 2010		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>NJ3-1</i>			<i>NJ 3-1</i>		
Annual	Mravlag Manor			Mravlag Manor		
Statement						
	Consultant		\$30,000		Consultant	\$30,000
	Maint. Equip.		\$8,000		Separate Ent.	\$106,323.25
	Rep. Appliances		\$5,000		1 st Floor Apts.	
	Basement Lights & vestibule doors		\$60,000		Heat & Plumbing Upgrade	\$125,000
	Paint Apartments		\$10,000		Main Equipment	\$8,000
	Upgrade Kitchens & Bathrooms		\$755,000		Rep. appliances	\$5,000
					Rep. Concrete/Landscaping	\$6,000
					Remove compactors	\$117,000
					Upgrade Kitchens & Bathrooms	\$268,607
	Total CFP Estimated Cost		\$868,000			\$667,930.25

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : __2 FFY Grant: PHA FY: 2007			Activities for Year: 3__ FFY Grant: PHA FY: 2008		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>NJ 3-4</i>			<i>NJ 3-4</i>		
Annual Statement	Farley Towers			Farley Towers		
		Upgrade Sprinklers	\$50,000		Paint Apts.	\$10,000
		Maint. Equip.	\$4,000		Maint. Equip.	\$4,000
		Rep. Appliances	\$7,000		Replace Apts.	\$7,000
		Install AC/Boxes	\$200,000		Upgrade Comm. Room	\$176,401.30
		Electrical Upgrade	\$93,729.50		Upgrade Kitchens	\$202,528.75
Total CFP Estimated Cost			\$354,729.50			\$399,930.75

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : __2 FFY Grant: PHA FY: 2007			Activities for Year: 3__ FFY Grant: PHA FY: 2008		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>NJ 3-5</i>			<i>NJ 3-5</i>		
Annual	Kennedy Arms			Kennedy Arms		
Statement		Paint Apartments	\$10,000		Replace Appliances	\$6,000
		Replace Appliances	\$6,000		Maint. Equipment	\$5,000
		Maint. Equipment	\$5,000			
		Upgrade Sprinkler heads	\$40,000			
		Upgrade Kitchens	\$281,270.50			
Total CFP Estimated Cost			\$342,270.50			\$11,000

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : __4 FFY Grant: PHA FY: 2009			Activities for Year: 5__ FFY Grant: PHA FY: 2010		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>NJ 3-5</i>			<i>NJ 3-5</i>		
Annual Statement	Kennedy Arms			Kennedy Arms		
		Master Ant./Rep.	\$75,000		Paint Apartment	\$5,000
		Expand Parking	\$30,000		Rep. Appliances	\$5,000
		Paint Apartments	\$5,000			
		Rep. Appliances	\$5,000			
Total CFP Estimated Cost			\$115,000			\$10,000

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : __2 FFY Grant: PHA FY: 2007			Activities for Year: 3_ FFY Grant: PHA FY: 2008		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>NJ 3-6</i>			<i>NJ 3-6</i>		
Annual Statement	Ford Leonard	Maint. Equipment	\$5,000	Ford Leonard	Maint. Equipment	\$5,000
		Paint Apartments	\$10,000		Rep. Appliances	\$6,000
		Replace Appliances	\$6,000			
Total CFP Estimated Cost			\$21,000.00			\$11,000

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year :__2 FFY Grant: PHA FY: 2007			Activities for Year: 3_ FFY Grant: PHA FY: 2008		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>NJ 3-8</i>			<i>NJ 3-8</i>		
Annual Statement	O' Donnell Dempsey			O'Donnell Dempsey		
		Maint Equipment	\$5,000		Maint. Equipment	\$5,000
		Paint Apartments	\$10,000		Paint Apartments	\$10,000
		Replace Rails in Stairways	\$10,000			
	Total CFP Estimated Cost		\$25,000			\$15,000

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year :__4 FFY Grant: PHA FY: 2009			Activities for Year: 5_ FFY Grant: PHA FY: 2010		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>NJ 3-8</i>			<i>NJ 3-8</i>		
Annual Statement	O' Donnell Dempsey			O'Donnell Dempsey		
		Upgrade Heat/Hot Water System	\$100,000		Maint. Equipment	\$5,000
		Expand Parking	\$65,000		Rep. Appliances	\$5,000
		Replace Fence	\$50,000			
		Maint. Equipment	\$5,000			
		Replace Appliances	\$5,000			
Total CFP Estimated Cost			\$225,000			\$10,000

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350105 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 checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <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				
3	1408 Management Improvements Soft Costs	0.00	319,424.25	319,424.25	147,129.00
	Management Improvements Hard Costs				
4	1410 Administration	0.00	212,949.50	212,949.50	4,900.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	0.00	30,000.00	30,000.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	0.00	0.00	0.00	0.00
10	1460 Dwelling Structures	0.00	521,528.75	40,000.00	20,514.00
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	33,000.00	33,000.00	27,225.00
12	1470 Nondwelling Structures	0.00	983,592.50	0.00	0.00
13	1475 Nondwelling Equipment	0.00	29,000.00	29,000.00	29,000.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	0.00	2,129,495.00	664,373.75	228,768.00
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft	0.00	137,424.25	137,424.25	137,424.25

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350105 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 checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
	Costs			
	Amount of Line XX related to Security-- Hard Costs			
	Amount of line XX Related to Energy Conservation Measures			
	Collateralization Expenses or Debt Service			

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 ELIZABETH			Grant Type and Number Capital Fund Program Grant No: NJ39P00350104 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
NJ3-1	Consultant		1430		0.00	30,000.00	30,000.00	30,000.00	Obligated
NJ3-1	Upgrade Kitchens		1460		0.00	400,000.00	0.00	0.00	
NJ3-1	Paint apartments & common areas		1460		0.00	10,000.00	10,000.00	10,000.00	Obligated
NJ3-1	Replace Appliances		1465.1		0.00	7,000.00	7,000.00	7,000.00	Obligated
NJ3-1	Replace Hallway Stairs		1470		0.00	600,000.00	0.00	0.00	
NJ3-1	Replace Basement Doors		1470		0.00	30,000.00	0.00	0.00	
NJ3-1	Maintenance Equipment		1475		0.00	10,000.00	10,000.00	10,000.00	Obligated
NJ3-4	Paint Hallways & Common Areas		1460		0.00	10,000.00	10,000.00	10,000.00	Obligated
NJ3-4	Replace Appliances		1465.1		0.00	7,000.00	7,000.00	7,000.00	Obligated
NJ3-4	Maintenance Equipment		1475		0.00	4,000.00	4,000.00	4,000.00	Obligated
NJ3-5	Upgrade Kitchens		1460		0.00	121,528.75	0.00	0.00	
NJ3-5	Replace Appliances		1465.1		0.00	6,000.00	6,000.00	3,971.00	Obligated
NJ3-5	Replace Roof		1470		0.00	232,391.75	0.00	0.00	
NJ3-5	Maintenance Equipment		1475		0.00	5,000.00	5,000.00	5,000.00	Obligated
NJ3-6	Paint Hallways & Common Areas		1460		0.00	10,000.00	10,000.00	514.00	Obligated
NJ3-6	Replace Appliances		1465.1		0.00	6,000.00	6,000.00	2,254.00	Obligated
NJ3-6	Replace Elevator Lift		1470		0.00	81,200.75	0.00	0.00	
NJ3-6	Maintenance Equipment		1475		0.00	5,000.00	5,000.00	5,000.00	Obligated
NJ3-8	Paint Apartments & Common Areas		1460		0.00	10,000.00	10,000.00	0.00	Obligated
NJ3-8	Replace Appliances		1465.1		0.00	7,000.00	7,000.00	7,000.00	Obligated
NJ3-8	Maintenance Equipment		1475		0.00	5,000.00	5,000.00	5,000.00	Obligated

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 ELIZABETH			Grant Type and Number Capital Fund Program Grant No: NJ39P00350104 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
PHA-Wide	Resident Training		1408		0.00	80,000.00	80,000.00	0.00	Obligated
PHA-Wide	Family Site Security		1408		0.00	37,424.25	37,424.25	37,424.25	Obligated
PHA-Wide	Senior Site Security		1408		0.00	100,000.00	100,000.00	100,000.00	Obligated
PHA-Wide	Apprenticeship Program		1408		0.00	60,000.00	60,000.00	0.00	Obligated
PHA-Wide	Resident Social Programs		1408		0.00	12,000.00	12,000.00	9,704.75	Obligated
PHA-Wide	Staff Training		1408		0.00	10,000.00	10,000.00	0.00	Obligated
PHA-Wide	Computer Upgrade		1408		0.00	10,000.00	10,000.00	0.00	Obligated
PHA-Wide	Common Area Cleanup		1430		0.00	10,000.00	10,000.00	0.00	Obligated
PHA-Wide	Administration		1410		0.00	212,949.50	212,949.50	4,900.00	Obligated

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH			Grant Type and Number Capital Fund Program No: NJ39P00350104 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	
NJ3-1	9/30/07	9/30/07		9/30/09	9/30/09		
NJ3-2	9/30/07	9/30/07		9/30/09	9/30/09		
NJ3-3	9/30/07	9/30/07		9/30/09	9/30/09		
NJ3-4	9/30/07	9/30/07		9/30/09	9/30/09		
NJ3-5	9/30/07	9/30/07		9/30/09	9/30/09		
NJ3-6	9/30/07	9/30/07		9/30/09	9/30/09		
NJ3-8	9/30/07	9/30/07		9/30/09	9/30/09		

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/H A-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

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

Activities for Year 1	Activities for Year : _____ FFY Grant: PHA FY:			Activities for Year: _____ FFY Grant: PHA FY:		

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <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				
3	1408 Management Improvements Soft Costs	382,306.00	382,305.75	382,305.75	380,993.20
	Management Improvements Hard Costs				
4	1410 Administration	254,870.00	254,870.50	254,870.50	254,870.50
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000.00	20,000.00	20,000.00	20,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	12,000.00	8,780.00	0.00	0.00
10	1460 Dwelling Structures	1,345,029.00	1,416,248.75	593,271.00	123,218.00
11	1465.1 Dwelling Equipment—Nonexpendable	19,000.00	21,460.00	21,460.00	21,460.00
12	1470 Nondwelling Structures	484,500.00	421,778.59	100,083.59	100,083.59
13	1475 Nondwelling Equipment	31,000.00	23,261.41	23,261.41	23,261.41
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	2,548,705.00	2,548,705.00	1,395,252.25	923,886.70
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft	159,306.00	153,084.25	153,084.25	153,084.25

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 Replacement Housing Factor Grant No:		Federal FY of Grant: 2003
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
	Costs			
	Amount of Line XX related to Security-- Hard Costs			
	Amount of line XX Related to Energy Conservation Measures			
	Collateralization Expenses or Debt Service			

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 ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 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
NJ3-1	Consultant		1430		20,000.00	20,000.00	20,000.00	20,000.00	Obligated
NJ3-1	Upgrade Kitchens		1460		415,000.00	415,000.00	13051.00	13,051.00	Obligated
NJ3-1	Upgrade Heating		1460		0.00	3,220.00	3,220.00	0.00	Obligated
NJ3-1	Replace Stairs		1460		0.00	168,000.00	0.00	0.00	
NJ3-1	Repoint Bricks & Waterproof		1470		68,000.00	0.00	0.00	0.00	
NJ3-1	Replace Apt. Windows		1470		150,000.00	150,000.00	8,805.00	8,805.00	Obligated
NJ3-1	Paint apartments & common areas		1470		15,000.00	15,000.00	15,000.00	15,000.00	Obligated
NJ3-1	Replace Concrete/Landscaping		1470		4,000.00	4,000.00	4,000.00	4,000.00	Obligated
NJ3-1	Maintenance Equipment		1475		8,000.00	261.41	261.41	261.41	Obligated
NJ3-3	Paint apartments & common areas		1470		4,000.00	9,278.59	9,278.59	9,278.59	Obligated
NJ3-3	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	4,000.00	Obligated
NJ3-4	Upgrade Bathrooms		1460		250,000.00	334,764.00	334,764.00	104,764.00	Obligated
NJ3-4	Upgrade Fire Alarms		1460		0.00	2,000.00	0.00	0.00	
NJ3-4	Replace Elevator Lift		1470		20,000.00	20,000.00	0.00	0.00	
NJ3-4	Asbestos Floor Cleanup		1460		104,000.00	17,236.00	17,236.00	5,403.00	Obligated
NJ3-4	Paint Hallways & Common Areas		1470		13,000.00	13,000.00	13,000.00	13,000.00	Obligated
NJ3-4	Maintenance Equipment		1475		6,000.00	6,000.00	6,000.00	6,000.00	Obligated
NJ3-5	Upgrade Bathrooms		1460		225,000.00	125,000.00	125,000.00	0.00	Obligated
NJ3-5	Upgrade Elevators		1470		152,500.00	152,500.00	0.00	0.00	
NJ3-5	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	7,000.00	Obligated
NJ3-5	Paint Hallways & Common Areas		1470		15,000.00	15,000.00	15,000.00	15,000.00	Obligated

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 ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 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
NJ3-5	Install Water Softeners/Strain		1470		4,000.00	4,000.00	0.00	0.00	
NJ3-5	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	4,000.00	Obligated

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 ELIZABETH			Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 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
NJ3-6	Upgrade Bathrooms		1460		300,000.00	0.00	0.00	0.00	
NJ3-6	Replace Roofs		1460		0.00	200,000.00	0.00	0.00	
NJ3-6	Upgrade Security Access		1460		0.00	100,000.00	100,000.00	0.00	Obligated
NJ3-6	Replace Appliances		1465.1		5,000.00	5,000.00	5,000.00	5,000.00	Obligated
NJ3-6	Paint Apartments & Common Areas		1470		15,000.00	15,000.00	15,000.00	15,000.00	Obligated
NJ3-6	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	4,000.00	Obligated
NJ3-8	Build Retaining Wall		1450		12,000.00	8,780.00	0.00	0.00	
NJ3-8	Replace Door Hardware		1460		51,028.75	51,028.75	0.00	0.00	
NJ3-8	Replace Appliances		1465.1		7,000.00	9,460.00	9,460.00	9,460.00	Obligated
NJ3-8	Install Water Softeners/Strain		1470		4,000.00	4,000.00	0.00	0.00	
NJ3-8	Paint Apartments & Common Areas		1470		20,000.00	20,000.00	20,000.00	20,000.00	Obligated
NJ3-8	Maintenance Equipment		1475		5,000.00	5,000.00	5,000.00	5,000.00	Obligated
PHA-Wide	Resident Training		1408		100,000.00	100,000.00	100,000.00	100,000.00	Obligated
PHA-Wide	Family Site Security		1408		53,305.75	47,084.25	47,084.25	47,084.25	Obligated
PHA-Wide	Senior Site Security		1408		106,000.00	106,000.00	106,000.00	106,000.00	Obligated
PHA-Wide	Apprenticeship Program		1408		71,000.00	73,886.67	73,886.67	73,886.67	Obligated
PHA-Wide	Resident Social Programs		1408		15,000.00	28,672.64	28,672.64	28,672.64	Obligated
PHA-Wide	Staff Training		1408		15,000.00	13,081.37	13,081.37	12,731.01	Obligated
PHA-Wide	Computer Upgrade		1408		10,000.00	11,918.63	11,918.63	11,918.63	Obligated
PHA-Wide	Common Area Clean-up		1408		12,000.00	1,662.19	1,662.19	700.00	Obligated
PHA-Wide	Administration		1410		254,870.50	254,870.50	254,870.50	254,870.50	Obligated

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH			Grant Type and Number Capital Fund Program No: NJ39P00350103 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	
NJ3-1	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-2	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-3	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-4	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-5	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-6	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-8	9/30/05	9/30/05		9/30/07	9/30/07		

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Capital Fund Program Five-Year Action Plan
Part I: Summary

PHA Name		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/H A-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : _____ FFY Grant: PHA FY:			Activities for Year: _____ FFY Grant: PHA FY:		

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350104 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <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				
3	1408 Management Improvements Soft Costs	397,000.00	397,000.00	397,000.00	356,358.09
	Management Improvements Hard Costs				
4	1410 Administration	205,306.00	205,306.00	205,306.00	205,306.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30,000.00	30,000.00	30,000.00	9,750.08
8	1440 Site Acquisition				
9	1450 Site Improvement	0.00	0.00	0.00	0.00
10	1460 Dwelling Structures	1,337,000.00	1,337,000.00	503,000.00	37,817.00
11	1465.1 Dwelling Equipment—Nonexpendable	30,000.00	30,000.00	30,000.00	30,000.00
12	1470 Nondwelling Structures	65,000.00	65,000.00	5,000.00	5,000.00
13	1475 Nondwelling Equipment	22,000.00	22,000.00	22,000.00	22,000.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	2,086,306.00	2,086,306.00	1,192,306.00	666,231.17
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft	156,000.00	156,000.00	156,000.00	156,000.00

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350104 Replacement Housing Factor Grant No:		Federal FY of Grant: 2004
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
	Costs			
	Amount of Line XX related to Security-- Hard Costs			
	Amount of line XX Related to Energy Conservation Measures			
	Collateralization Expenses or Debt Service			

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 ELIZABETH			Grant Type and Number Capital Fund Program Grant No: NJ39P00350104 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
NJ3-1	Consultant		1430		15,000.00	15,000.00	15,000.00	9110.54	Obligated
NJ3-1	Upgrade Kitchens		1460		350,000.00	350,000.00	0.00	0.00	
NJ3-1	Paint apartments & common areas		1460		8,000.00	8,000.00	8,000.00	8,000.00	Obligated
NJ3-1	Replace Appliances		1465		5,000.00	5,000.00	5,000.00	5,000.00	Obligated
NJ3-1	Replace Hallway Stairs		1470		60,000.00	60,000.00	0.00	0.00	
NJ3-1	Replace Concrete/Landscaping		1470		5,000.00	5,000.00	5,000.00	5,000.00	Obligated
NJ3-1	Maintenance Equipment		1475		7,000.00	7,000.00	7,000.00	7,000.00	Obligated
NJ3-4	Upgrade Bathrooms		1460		600,000.00	316,000.00	316,000.00	0.00	Obligated
NJ3-4	Paint Hallways & Common Areas		1460		10,000.00	10,000.00	10,000.00	10,000.00	Obligated
NJ3-4	Upgrade Electric		1460		0.00	180,000.00	0.00	0.00	
NJ3-4	Asbestos Floor Clean-up		1460		0.00	104,000.00	0.00	0.00	
NJ3-4	Replace Appliances		1465		12,000.00	12,000.00	12,000.00	12,000.00	Obligated
NJ3-4	Maintenance Equipment		1475		5,000.00	5,000.00	5,000.00	5,000.00	Obligated
NJ3-5	Paint Hallways & Common Areas		1460		10,000.00	10,000.00	10,000.00	10,000.00	Obligated
NJ3-5	Replace Appliances		1465.1		6,000.00	6,000.00	6,000.00	6,000.00	Obligated
NJ3-5	Maintenance Equipment		1475		3,000.00	3,000.00	3,000.00	3,000.00	Obligated
NJ3-6	Paint Hallways & Common Areas		1460		12,000.00	12,000.00	12,000.00	9817.00	Obligated
NJ3-6	Upgrade Bathrooms		1460		335,000.00	135,000.00	135,000.00	0.00	Obligated
NJ3-6	Replace Roof		1460		0.00	200,000.00	0.00	0.00	
NJ3-6	Replace Appliances		1465.1		4,000.00	4,000.00	4,000.00	4,000.00	Obligated
NJ3-6	Maintenance Equipment		1475		3,000.00	3,000.00	3,000.00	3,000.00	Obligated
NJ3-8	Paint Apartments & Common Areas		1460		12,000.00	12,000.00	12,000.00	0.00	Obligated
NJ3-8	Replace Appliances		1465.1		3,000.00	3,000.00	3,000.00	3,000.00	Obligated
NJ3-8	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	4,000.00	Obligated

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 ELIZABETH			Grant Type and Number Capital Fund Program Grant No: NJ39P00350104 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
PHA-Wide	Resident Training		1408		100,000.00	100,000.00	100,000.00	100,000.00	Obligated
PHA-Wide	Family Site Security		1408		50,000.00	50,000.00	50,000.00	50,000.00	Obligated
PHA-Wide	Senior Site Security		1408		106,000.00	106,000.00	106,000.00	106,000.00	Obligated
PHA-Wide	Apprenticeship Program		1408		71,000.00	71,000.00	71,000.00	48,294.59	Obligated
PHA-Wide	Resident Social Programs		1408		45,000.00	45,000.00	45,000.00	45,000.00	Obligated
PHA-Wide	Staff Training		1408		15,000.00	15,000.00	15,000.00	0.00	Obligated
PHA-Wide	Computer Upgrade		1408		10,000.00	10,000.00	10,000.00	7,063.50	Obligated
PHA-Wide	Administration		1410		205,306.00	205,306.00	205,306.00	205,306.00	Obligated
PHA-Wide	Fees & Costs		1430		15,000.00	15,000.00	15,000.00	639.54	Obligated

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH			Grant Type and Number Capital Fund Program No: NJ39P00350104 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	
NJ3-1	9/30/06	9/30/06		9/30/08	9/30/08		
NJ3-2	9/30/06	9/30/06		9/30/08	9/30/08		
NJ3-3	9/30/06	9/30/06		9/30/08	9/30/08		
NJ3-4	9/30/06	9/30/06		9/30/08	9/30/08		
NJ3-5	9/30/06	9/30/06		9/30/08	9/30/08		
NJ3-6	9/30/06	9/30/06		9/30/08	9/30/08		
NJ3-8	9/30/06	9/30/06		9/30/08	9/30/08		

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Capital Fund Program Five-Year Action Plan
Part I: Summary

PHA Name		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/H A-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

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

Activities for Year 1	Activities for Year : _____			Activities for Year: _____		
	FFY Grant:	PHA FY:		FFY Grant:	PHA FY:	

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <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	0.00	250,000.00	250,000.00	250,000.00
3	1408 Management Improvements Soft Costs	459,148.00	443,628.00	443,628.00	442,801.99
	Management Improvements Hard Costs				
4	1410 Administration	309,765.00	309,765.00	309,765.00	309,765.00
5	1411 Audit				
6	1415 Liquidated Damages				
07	1430 Fees and Costs	20,000.00	35,520.00	35,520.00	35,520.00
8	1440 Site Acquisition				
9	1450 Site Improvement	14,500.00	12,040.00	12,040.00	12,040.00
10	1460 Dwelling Structures	2,156,242.00	1,906,242.00	1,906,242.00	904,626.00
11	1465.1 Dwelling Equipment—Nonexpendable	34,000.00	36,460.00	36,460.00	36,460.00
12	1470 Nondwelling Structures	79,000.00	83,772.82	83,772.82	83,772.82
13	1475 Nondwelling Equipment	25,000.00	20,227.18	20,227.18	20,227.18
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	3,097,655.00	3,097,655.00	3,097,655.00	2,095,212.99
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft	199,000.00	206,246.40	206,246.40	206,246.40

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350102 Replacement Housing Factor Grant No:		Federal FY of Grant: 2002	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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 ELIZABETH			Grant Type and Number Capital Fund Program Grant No: NJ39P00350102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002		
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
NJ3-1	Consultant		1430		20,000.00	35,520.00	35,520.00	35,520.00	Obligated
NJ3-1	Site improvements		1450		3,000.00	3,000.00	3,000.00	3,000.00	Obligated
NJ3-1	Replace Concrete		1450		11,500.00	9,040.00	9,040.00	9,040.00	Obligated
NJ3-1	Upgrade Kitchens		1460		545,000.00	0.00	0.00	0.00	
NJ3-1	Replace Stairs		1460		68,233.00	68,233.00	68,233.00	37,489.00	Obligated
NJ3-1	Paint Hallways & Common Areas		1470		20,000.00	20,000.00	20,000.00	20,000.00	Obligated
NJ3-1	Maintenance Equipment		1475		8,000.00	8,000.00	8,000.00	8,000.00	Obligated
NJ3-3	Paint apartments & common areas		1470		4,000.00	4,000.00	4,000.00	4,000.00	Obligated
NJ3-4	Upgrade Electrical		1460		0.00	0.00	0.00	0.00	
NJ3-4	Replace Gate & Riser Valves		1460		11,000.00	0.00	0.00	0.00	
NJ3-4	Upgrade Bathrooms		1460		544,242.00	544,242.00	544,242.00	544,242.00	Obligated
NJ3-4	Upgrade Kitchens		1460		0.00	0.00	0.00	0.00	
NJ3-4	Upgrade Security Access		1460		0.00	100,000.00	100,000.00	5,228.00	Obligated
NJ3-4	Upgrade Lobby		1460		0.00	50,000.00	50,000.00	0.00	
NJ3-4	Replace Appliances		1465.1		12,000.00	12,000.00	12,000.00	12,000.00	Obligated
NJ3-4	Paint Hallways & Common Areas		1470		13,000.00	13,000.00	13,000.00	13,000.00	Obligated
NJ3-4	Maintenance Equipment		1475		6,000.00	6,000.00	6,000.00	6,000.00	Obligated
NJ3-5	Upgrade Bathrooms		1460		400,000.00	89,295.00	89,295.00	0.00	Obligated
NJ3-5	Upgrade Roof		1460		0.00	200,000.00	200,000.00	4,900.00	Obligated
NJ3-5	Upgrade Lobby		1460		0.00	50,000.00	50,000.00	0.00	
NJ3-5	Caulk Exterior Windows & Lintels		1460		25,000.00	25,000.00	25,000.00	0.00	Obligated
NJ3-5	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	7,000.00	Obligated
NJ3-5	Paint Hallways & Common Areas		1470		20,000.00	20,000.00	20,000.00	20,000.00	Obligated
NJ3-5	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	4,000.00	Obligated
NJ3-5	Upgrade Heating Systems		1460		0.00	11,000.00	11,000.00	0.00	Obligated
NJ3-5	Upgrade Security		1460		0.00	310,705.00	310,705.00	0.00	Obligated

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 ELIZABETH			Grant Type and Number Capital Fund Program Grant No: NJ39P00350102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002		
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
NJ3-6	Upgrade Plumbing		1460		0.00	0.00	.00	0.00	
NJ3-6	Upgrade Kitchens		1460		0.00	0.00	0.00	0.00	
NJ3-6	Upgrade Bathrooms		1460		336,000.00	86,000.00	86,000.00	86,000.00	Obligated
NJ3-6	Upgrade Lobby		1460		0.00	50,000.00	50,000.00	0.00	
NJ3-6	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	7,000.00	Obligated
NJ3-6	Paint Apartments & Common Areas		1470		15,000.00	15,000.00	15,000.00	15,000.00	Obligated
NJ3-6	Maintenance Equipment		1475		4,000.00	1,947.18	1,947.18	1,947.18	Obligated
NJ3-8	Upgrade Security Access		1460		0.00	45,000.00	45,000.00	0.00	Obligated
NJ3-8	Upgrade Lobby		1460		0.00	50,000.00	50,000.00	0.00	
NJ3-8	Replace Roof		1460		226,767.00	226,767.00	226,767.00	226,767.00	Obligated
NJ3-8	Replace Appliances		1465.1		8,000.00	10,460.00	10,460.00	10,460.00	Obligated
NJ3-8	Paint Apartments & Common Areas		1470		7,000.00	11,772.82	11,772.82	11,772.82	Obligated
NJ3-8	Maintenance Equipment		1475		3,000.00	280.00	280.00	280.00	Obligated
PHA-Wide	Operations		1406		0.00	250,000.00	250,000.00	250,000.00	Obligated
PHA-Wide	Resident Training		1408		114,000.00	114,000.00	114,000.00	114,000.00	Obligated
PHA-Wide	Family Site Security		1408		73,000.00	80,246.40	80,246.40	80,246.40	Obligated
PHA-Wide	Senior Site Security		1408		126,000.00	126,000.00	126,000.00	126,000.00	Obligated
PHA-Wide	Apprenticeship Program		1408		67,645.00	67,645.10	67,645.10	67,645.10	Obligated
PHA-Wide	Resident Social Programs		1408		29,320.70	23,763.19	23,763.19	23,763.19	Obligated
PHA-Wide	Staff Training		1408		18,000.25	15,919.26	15,919.26	15,093.25	Obligated

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

PHA-Wide	Computer Upgrade		1408		15,034.05	16,054.05	16,054.05	16,054.05	Obligated
PHA-Wide	Common Area Clean-up		1408		11,148.00	0.00	0.00	0.00	
PHA-Wide	Safety Compliance		1408		5,000.00	0.00	0.00	0.00	
PHA-Wide	Administration		1410		309,765.00	309,765.00	309,765.00	309,765.00	Obligated

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH			Grant Type and Number Capital Fund Program No: NJ39P00350102 Replacement Housing Factor No:			Federal FY of Grant: 2002	
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	
NJ3-1	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-2	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-3	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-4	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-5	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-6	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-8	9/30/04	9/30/04		9/30/06	9/30/06		

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Capital Fund Program Five-Year Action Plan
Part I: Summary

PHA Name		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/H A-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : _____ FFY Grant: PHA FY:			Activities for Year: _____ FFY Grant: PHA FY:		

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350203 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2005 <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				
3	1408 Management Improvements Soft Costs	76,192.05	76,192.05	76,192.05	76,192.05
	Management Improvements Hard Costs				
4	1410 Administration	50,794.70	50,794.70	50,794.70	50,794.70
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	70,000.00	50,000.00	30,000.00	9,990.50
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	40,000.00	40,000.00	14,865.00
12	1470 Nondwelling Structures	310,960.25	290,960.25	0.00	0.00
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	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	507,947.00	507,947.00	196,986.75	151,842.25
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft	0.00	0.00	0.00	0.00

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH	Grant Type and Number Capital Fund Program Grant No: NJ39P00350203 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2005 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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 ELIZABETH			Grant Type and Number Capital Fund Program Grant No: NJ39P00350203 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
NJ3-1	Admin. Building Renovations		1460		50,000.00	30,000.00	30,000.00	6,490.50	Obligated
NJ3-1	Repoint Bricks & Waterproof		1470		220,960.25	220,960.25	0.00	0.00	
NJ3-1	Replace Apt. Windows		1470		50,000.00	30,000.00	0.00	0.00	
NJ3-1	Community Center – Mravlag		1470		0.00	40,000.00	40,000.00	14,865.00	Obligated
NJ3-4	Replace Elevator Lift		1470		20,000.00	20,000.00	0.00	0.00	
NJ3-5	Upgrade Elevators		1470		20,000.00	20,000.00	0.00	0.00	
NJ3-8	Replace Door Hardware		1460		20,000.00	20,000.00	20,000.00	3,500.00	Obligated
PHA-Wide	Management Improvements		1406		76,192.05	76,192.05	76,192.05	76,192.05	Obligated
PHA-Wide	Administration		1410		50,794.70	50,794.70	50,794.70	50,794.70	Obligated

PHA Name:
HA Code:

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 ELIZABETH	Grant Type and Number Capital Fund Program Grant No: NJ39P00350203 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH			Grant Type and Number Capital Fund Program No: NJ39P00350203 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	
NJ3-1	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-2	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-3	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-4	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-5	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-6	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-8	9/30/05	9/30/05		9/30/07	9/30/07		

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

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name				<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/H A-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					

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

**Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities**

Activities for Year 1	Activities for Year : _____ FFY Grant: PHA FY:			Activities for Year: _____ FFY Grant: PHA FY:		