PHA Plans

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

Office of Public and Indian Housing

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

Streamlined Annual Version

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: Greenburgh 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.

form **HUD-50075-SA** (4/30/2003)

Streamlined Annual PHA Plan Agency Identification

PHA Name: Greenburgh Housing Authority PHA Number: NY - 057								
PHA Fiscal Year Beginning: (mm/yyyy	y) 04/2006						
PHA Programs Administered Public Housing and Section 8 Number of public housing units:115 Number of S8 units:303	Sec			ete table) ms Not in the sortium # of Units Each Program Grbhsg99@aol.com by contacting: (select all management offices available for public (list below) apply)				
PHA Consortia: (check box it	Administered: and Section 8							
Participating PHAs	ag: (mm/yyyy) 04/2006 red: 18							
Participating PHA 1:								
Participating PHA 2:								
Participating PHA 3:								
TDD: Public Access to Information Information regarding any activit that apply) ☑ PHA's main administrative		ed in this plan can be ob	tained by contactin	g: (select all				
Display Locations For PHA P	lans and	Supporting Docume	nts					
review and inspection. Yes If yes, select all that apply: Main administrative office of PHA development managen	No. of the PHA ment office of the local	s, county or State govern	ment	r public				
PHA Plan Supporting Documents ar Main business office of the Other (list below)				fices				

PHA Name: Greenburgh Housing Authority

PHA PLAN COMPONENTS

HA Code: NY 057

A.

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.

	1. Site-Based Waiting List Policies
903.7(b)(2) Policies on Eligibility, Selection, and Admissions
	2. Capital Improvement Needs
903.7(g)	Statement of Capital Improvements Needed
	3. Section 8(y) Homeownership
903.7(k)(1)(i) Statement of Homeownership Programs
	4. Project-Based Voucher Programs
$\overline{\boxtimes}$	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
\bowtie	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>.

PHA Name: Greenburgh Housing Authority

HA Code: NY 057

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 Intiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics			

						 11
2.	What is the time?	number of site	based waiting list do	evelopments to which	h families may ap	ply at one
3.	How many usual waiting list?	•	an applicant turn do	own before being ren	noved from the sit	te-based
4.	court order of describe how	or settlement a	greement? If yes, de based waiting list wi	pending fair housing escribe the order, agre all not violate or be in	eement or compla	int and
В.	Site-Based	Waiting Lists	– Coming Year			
	_	_	r more site-based wa o next component.	iting lists in the com	ing year, answer	each of the
1. I	How many site	e-based waitin	g lists will the PHA	operate in the comin	g year?	
2.	☐ Yes ⊠ M	(that is, the plan)?		e-based waiting lists breviously-HUD-appi		
3.	Yes N	No: May famili	•	one list simultaneous	ly	

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)

	<u>mprovement Needs</u> 903.12 (c), 903.7 (g)]
	Section 8 only PHAs are not required to complete this component.
	IE ID
A. Capit	al Fund Program
1. X 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. HOPI Fund	E VI and Public Housing Development and Replacement Activities (Non-Capital
	All PHAs administering public housing. Identify any approved HOPE VI and/or public opment or replacement activities not described in the Capital Fund Program Annual
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. Statu	s of HOPE VI revitalization grant(s):
	HOPE VI Revitalization Grant Status
a. Developmen	
b. Development	
	vitalization Plan under development
	vitalization Plan submitted, pending approval
Rev	vitalization Plan approved
Act	tivities 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:

of experience below):

	Based AssistanceSection 8(y) Homeownership Program
(11 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	n:
a. Size of Program Yes No:	Will the PHA limit the number of families participating in the Section 8 homeownership option?
	If the answer to the question above was yes, what is the maximum number of participants this fiscal year?
b. PHA established eli ☐ Yes ☐ No:	gibility criteria Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:
c. What actions will the	e PHA undertake to implement the program this year (list)?
3. Capacity of the PHA	to Administer a Section 8 Homeownership Program:
Establishing a 1	ated its capacity to administer the program by (select all that apply): minimum homeowner downpayment requirement of at least 3 percent of purchase ring that at least 1 percent of the purchase price comes from the family's
Requiring that provided, insur	financing for purchase of a home under its Section 8 homeownership will be ed or guaranteed by the state or Federal government; comply with secondary et underwriting requirements; or comply with generally accepted private sector andards.
	a qualified agency or agencies to administer the program (list name(s) and years

Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

areas within eligible census tracts):

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

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.

Annual Plan submission. 1. Consolidated Plan jurisdiction: (provide name here) Westchester County and The Town of Greenburgh 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) \boxtimes The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s. \boxtimes The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. \boxtimes The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. \boxtimes 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)

The Housing Authority comprehensive Agency Plan is consistent with the Westchester County Consolidated Plan.

PHA Name: Greenburgh Housing Authority

HA Code: NY 057

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.

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		
	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	Annual Plan:		
	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.	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		
N/A	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		
N/A	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		
Х	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		
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		

	List of Supporting Documents Available for Review	T	
Applicable & On Display	Supporting Document	Related Plan Component	
	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	
	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	
	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 <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: Greenbur	Ca	Grant Type and Number Capital Fund Program Grant No: NY36P057-501-04 Replacement Housing Factor Grant No:			
Original Annual	Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annua				
		mance and Evaluati			
Line No.	Summary by Development Account		Estimated Cost		Actual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	16,316	16,316	16,316	9,112
3	1408 Management Improvements	10,000	10,000	8,016	0
4	1410 Administration	10,000	10000	10,000	5,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	24,000	12,000	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	112,800	124,800	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	5,000	5,000	0	0
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000	5,000	0	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	183,116	183,116	34,332	14,112
22	Amount of line 21 Related to LBP Activities			·	
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measure	es 112,800	124,800		
	•	•		•	•

Annual Statement/Performance and Evaluation Report

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

Part II: Supporting Pages

PHA Name:		Grant Type and Number				Federal FY of Grant: 2	2004	
Greenburgh Hou	•	Capital Fund Program Gran Replacement Housing Factor						
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	
HA WIDE	Operations	1406	N/A	16,316	16,316	16,316	9,112	Work In Process
HA WIDE	Management Improvements	1408	N/A	10,000	10,000	8,016	0	Work In Process
HA WIDE	Administrative Salaries	1410	N/A	10,000	10,000	10,000	5,000	Work In Process
HA WIDE	A/E Fees	1430.1	N/A	12,000	12,000	0	0	Work In Process
HA WIDE	Consultant Fees	1430.2	N/A	12,000	0	0	0	Priority Changed
HA WIDE	Appliances	1465.1	N/A	5,000	5,000	0	0	Planning Phase
HA WIDE	Office Equipment	1475.1	N/A	2,500	2,500	0	0	Planning Phase
HA WIDE	Maintenance Equipment	1475.2	N/A	2,500	2,500	0	0	Planning Phase
	Sub Total			70,316	58,316	34,332	14,112	
NY 57-1	Windows Site # 6 and site # 3 (55 Apartments)	1460	285 Windows	112,800	124,800	0	0	Planning Phase
	Sub Total			112,800	124,800	0	0	
	Total			183,116	183,116	34,332	14,112	

PHA Name:	tation Schedu	Grant T	Гуре and Numb		Federal FY of Grant: 2004		
		l Fund Program l ement Housing l	No: NY36P057-50 Factor No:	01-04			
Development Number		Fund Obligate			Funds Expended		Reasons for Revised Target Dates
Name/HA-Wide Activities	(Quarter Ending Date)			(Qua	arter Ending Date	e)	
	Original	Revised	Actual	Original	Revised	Actual	
NY 57 – 1	09/07/2006			9/07/2008			
N1 37 - 1	09/07/2000			9/01/2008			

	ent/Performance and Evaluation Report								
	rogram and Capital Fund Program Replacement H		CFPRHF) Part I:	Summary					
PHA Name: Greenbu	urgh Housing Authority	Grant Type and Number			Federal FY of				
		Capital Fund Program Grant		01-05	Grant: 2005				
		Replacement Housing Factor Grant No:							
	Statement Reserve for Disasters/ Emergencies Revised A								
		aal Performance and Evaluation Report Total Estimated Cost Total Actual							
Line No.	Summary by Development Account	Original	Revised	Obligated	Actual Cost Expended				
1	T () CED E 1	Original	Keviseu	Obligated	Expended				
1	Total non-CFP Funds								
2	1406 Operations								
3	1408 Management Improvements	5,788		0	0				
4	1410 Administration	10,000		0	0				
5	1411 Audit								
6	1415 Liquidated Damages								
7	1430 Fees and Costs	12,000		0	0				
8	1440 Site Acquisition								
9	1450 Site Improvement								
10	1460 Dwelling Structures	135,000		0	0				
11	1465.1 Dwelling Equipment—Nonexpendable	5,000		0	0				
12	1470 Nondwelling Structures								
13	1475 Nondwelling Equipment	5,000		0	0				
14	1485 Demolition								
15	1490 Replacement Reserve								
16	1492 Moving to Work Demonstration								
17	1495.1 Relocation Costs								
18	1499 Development Activities								
19	1501 Collaterization or Debt Service								
20	1502 Contingency								
21	Amount of Annual Grant: (sum of lines 2 – 20)	172,788		0	0				
22	Amount of line 21 Related to LBP Activities	Í							
23	Amount of line 21 Related to Section 504 compliance								
24	Amount of line 21 Related to Security – Soft Costs								
25	Amount of Line 21 Related to Security – Hard Costs								
26	Amount of line 21 Related to Energy Conservation Measures	105,000							

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

Part I	1: 3	Supp	ortin	ıg J	Pages

PHA Name: Greenburgh House		Grant Type and Nun Capital Fund Program Replacement Housing	n Grant No: NY36F		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	
HA WIDE	Management Improvements	1408	N/A	5,788		0	0	Planning Phase
HA WIDE	Admistrative Salaries	1410	N/A	10,000		0	0	Planning Phase
HA WIDE	A/E Fees	1430.1	N/A	12,000		0	0	Planning Phase
HA WIDE	Appliances	1465.1	N/A	5,000		0	0	Planning Phase
HA WIDE	Office Equipment	1475.1	N/A	2,500		0	0	Planning Phase
HA WIDE	Maintenance Equipment	1475.2	N/A	2,500		0	0	Planning Phase
	Sub Total			37,788		0	0	
NY 57- 1	Windows (Site #5 and site # 1) 30 Apartments	1460	226 Widows	105,000		0	0	Planning Phase
	Painting site #5 and Site #1	1460	30 Units	30,000				Planning Phase
	Sub Total			135,000		0	0	
	Total			172,788		0	0	

Annual Statement/P Capital Fund Progra Part III: Implement	am and Cap	ital Fund l	_		lousing Factor	· (CFP/CFP	PRHF)
Replacement Housing				No: NY36PO57 5	501 - 05	Federal FY of Grant: 2005	
Development Number Name/HA-Wide Activities	Fund Obliga ter Ending D			l Funds Expende larter Ending Dat		Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	
NY057 – 1	8/17/2007			8/17/2009			

	ent/Performance and Evaluation Report				
Capital Fund Pa	rogram and Capital Fund Program Replacement H	ousing Factor (CFP/C	CFPRHF) Part I: S	Summary	
	urgh Housing Authority	Grant Type and Number			Federal FY of
		Capital Fund Program Grant	No: NY36PO57 501	. 06	Grant:
		Replacement Housing Factor			2006
	Statement Reserve for Disasters/ Emergencies Revised A				
		nance and Evaluation Repo		1	
Line No.	Summary by Development Account		mated Cost	Total Ac	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	5,788			
4	1410 Administration	10,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	135,000			
11	1465.1 Dwelling Equipment—Nonexpendable	5,000			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	172,788			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	105,000			

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

Part II: Supporting Pages

PHA Name:		Grant Type and Numb		22 201 22		Federal FY of Grant:	2006	
Greenburgh Hou	sing Authority	Capital Fund Program C Replacement Housing F	Grant No: NY36P0 Factor Grant No:) 57 - 501 - 06				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA WIDE	Management Improvements	1408	N/A	5,788		0	0	Planning Phase
HA WIDE	Admistrative Salaries	1410	N/A	10,000		0	0	Planning Phase
HA WIDE	A/E Fees	1430.1	N/A	12,000		0	0	Plannin Phase
HA WIDE	Appliances	1465.1	N/A	5,000		0	0	Planning Phase
HA WIDE	Office Equipment	1475.1	N/A	2,500		0	0	Planning Phase
HA WIDE	Maintenance Equipment	1475.2	N/A	2,500		0	0	Plannin Phase
	Sub Total			37,788		0	0	
NY 57- 1	Windows (Site # 4 & Site # 2) 30 Apartments	1460	230 Windows	105,000		0	0	Planning Phase
	Painting site # 6	1460	25 Units	30,000				Planning Phase
	Sub Total			135,000		0	0	
	Total			172,788		0	0	

	Annual Statement/Performance and Evaluation Report										
Capital Fund I	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)										
Part II: Supporting Pages											
PHA Name:		Grant Type and Numbe				Federal FY of Grant:	2006				
Greenburgh Hou	sing Authority	Capital Fund Program G Replacement Housing Fa		057 - 501 - 06							
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.				Total Actu	al Cost	Status of Work			
				Original	Revised	Funds Obligated	Funds Expended				

Annual Statement/P			_			. (CED/CED	DITE)
Capital Fund Progra Part III: Implement	-		rogram K	еріасетепі н	ousing Factor	r (CFP/CFP	Knr)
PHA Name: Greenburgh Housing Authority			Type and Numb I Fund Program ement Housing	No: NY36P057 -	Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	Fund Obligate ter Ending Da			l Funds Expende arter Ending Da		Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	
NY 57 – 1	9/30/2008			9/30/2010			

Annual Statement/P Capital Fund Progra Part III: Implement	am and Cap	ital Fund P	_		ousing Factor	· (CFP/CFP	PRHF)
PHA Name: Grant Type and Num				No: NY36P057 - 501 - 06			Federal FY of Grant: 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)				Funds Expende arter Ending Da	Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	

8. Capital Fund Program Five-Year Action Plan

Capital Fund Pro	gram Five-Y	Year Action Plan			
Part I: Summary					
PHA Name				☐Original 5-Year Plan ☑Revision No: 1	
Development	Year 1	Work Statement	Work Statement	Work Statement	Work Statement for
Number/Name/ HA-Wide		for Year 2	for Year 3	for Year 4	Year 5
		FFY Grant: 2007	FFY Grant: 2008	FFY Grant: 2009	FFY Grant: 2010
		PHA FY: 2007	PHA FY: 2008	PHA FY: 2009	PHA FY: 2010
NY 57-1	Annual Statement	135,000 Sub Total 135,000	135,000 Sub Total 135,000	135,000 Sub Total 135,000	135,000 Sub Total 135,000
1406		10,000	10,000	10,000	10,000
1408		5,788	5,788	5,788	5,788
1410		10,000	10,000	10,000	10,000
1430		12,000	12,000	12,000	12,000
		Sub Total 37,788	Sub Total 37,788	Sub Total 37,788	Sub Total 37,788
CFP Funds Listed		172,788	172,788	172,788	172,788
for 5-year planning		172,700	172,700	172,700	172,700
Replacement Housing Factor Funds					

^{*} Based on CFP 2005 NY36P057-501-05

8. Capital Fund Program Five-Year Action Plan

Capital Fun	d Program Five-Yea	r Action Plan					
Part II: Sup	porting Pages—Wo	rk Activities					
Activities	Act	ivities for Year :_2007	_	Acti	vities for Year: _2008		
for		FFY Grant: 2007		FFY Grant: 2008			
Year 1		PHA FY: 2007			PHA FY: 2008		
	Development	Major Work	Estimated Cost	Development	Major Work	Estimated	
	Name/Number	Categories		Name/Number	Categories	Cost	
See							
Annual							
Statement	NY 57 - 1	Bathroom (Site #2)	67,500	NY 57-1	Bathroom (Site#4)	67,500	
		15 out of 15 units			15 out of 15 units		
	NY 57 - 1	Bathroom (Site # 1)	67,500	NY 57-1	Bathroom (Site#5)	67,500	
		15 out of 15 units			15 out of 15 units		
	Total CFP Estimate	d Cost	\$135,000			\$135,000	

8. Capital Fund Program Five-Year Action Plan

Activities for Year :_2009 FFY Grant: 2009 PHA FY: 2009			Activities for Year: 2010 FFY Grant: 2010 PHA FY: 2010		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
NY 57 - 1	Bathroom (Site#6) 25 out of 25 units	135,000	NY 57 – 1 Site #1,#2,#3,#4,#5,#6	Site Improvement	135,000
Total CFP Estimated Cost		\$135,000			\$135,000