## U.S. Department of Housing and Urban Development Office of Public and Indian Housing

# PHA Plans

Annual Plan for Fiscal Year 2006

Tx303v01 - Transmitted Wednesday, July 05, 2006 Certifications submitted Wednesday, July 5, 2006 Tx303v02 - Revisions and corrections submitted Thursday, August 10, 2006 To include tx303a02 – attachment for CFP 2005 & CFP 2006

### PHA Plan Agency Identification

**PHA Name:** Seguin Housing Authority PHA Number: TX303 PHA Fiscal Year Beginning: 10/2006 **Public Access to Information** Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices PHA local offices **Display Locations For PHA Plans and Supporting Documents** The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the 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)

## 5-YEAR PLAN PHA FISCAL YEARS 2006 – 2010

[24 CFR Part 903.5]

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<b>A.</b> N	Mission
State th	he PHA's mission for serving the needs of low-income, very low income, and extremely low-income in the PHA's jurisdiction. (select one of the choices below)
	The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
	The PHA's mission is: (state mission here)
	<u>Soals</u>
empha identif PHAS SUCC (Quant	cals and objectives listed below are derived from HUD's strategic Goals and Objectives and those sized in recent legislation. PHAs may select any of these goals and objectives as their own, or by other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. Stifiable measures would include targets such as: numbers of families served or PHAS scores ed.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.
HUD housi	Strategic Goal: Increase the availability of decent, safe, and affordable ing.
	PHA Goal: Expand the supply of assisted housing Objectives:  Apply for additional rental vouchers:  Reduce public housing vacancies:  Leverage private or other public funds to create additional housing opportunities:  Acquire or build units or developments  Other (list below)
	PHA Goal: Improve the quality of assisted housing Objectives:  ☐ Improve public housing management: (PHAS score) 80 (2004) ☐ Improve voucher management: (SEMAP score) 100 (2005) ☐ Increase customer satisfaction: ☐ Concentrate on efforts to improve specific management functions: ☐ (list; e.g., public housing finance; voucher unit inspections) ☐ Renovate or modernize public housing units: ☐ Demolish or dispose of obsolete public housing:

		Provide replacement public housing:
		Provide replacement vouchers:
		Other: (list below)
	PHA C	Goal: Increase assisted housing choices
	Objecti	
		Provide voucher mobility counseling:
		Conduct outreach efforts to potential voucher landlords Increase voucher payment standards
	Ħ	Implement voucher homeownership program:
		Implement public housing or other homeownership programs:
		Implement public housing site-based waiting lists:
		Convert public housing to vouchers:
		Other: (list below)
HUD S	Strategi	c Goal: Improve community quality of life and economic vitality
$\boxtimes$		Goal: Provide an improved living environment
	Objecti	
		Implement measures to deconcentrate poverty by bringing higher income
	$\bowtie$	public housing households into lower income developments:  Implement measures to promote income mixing in public housing by
		assuring access for lower income families into higher income
		developments:
		Implement public housing security improvements:
		Designate developments or buildings for particular resident groups
		(elderly, persons with disabilities) Other: (list below)
		Other. (list below)
TITID (	74 4 •	
	Strategi dividua	c Goal: Promote self-sufficiency and asset development of families
ana m	arviduo	
		Goal: Promote self-sufficiency and asset development of assisted
househ		
	Objecti	
		Increase the number and percentage of employed persons in assisted families:
	$\bowtie$	Provide or attract supportive services to improve assistance recipients'
		employability:
		Provide or attract supportive services to increase independence for the
		elderly or families with disabilities.
		Other: (list below)

# HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans □ PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives: □ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: □ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability: □ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: □ Other: (list below)

Other PHA Goals and Objectives: (list below)

#### Annual PHA Plan PHA Fiscal Year 2006

[24 CFR Part 903.7]

<u>i. A</u>	nnual Plan Type:
Select	which type of Annual Plan the PHA will submit.
$\boxtimes$	Standard Plan
Strea	mlined Plan:
	High Performing PHA

Troubled Agency Plan

#### ii. Executive Summary of the Annual PHA Plan

**Administering Section 8 Only** 

**Small Agency (<250 Public Housing Units)** 

[24 CFR Part 903.7 9 (r)]

X

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

This is the 7<sup>th</sup> year of the Annual Plan submission and there have been no major changes in the policies and procedures of the local housing authority. Updates were done of the policies during the 6<sup>th</sup> year. The Capital Fund Program for Fiscal Years 2002, 2003, 2003-A, and 2004 were completed during the prior fiscal year and approved by the local HUD office. The 2005 CFP should be completed prior to end of the current year 2006. The Performance and Evaluation Progress Report for 2005 is included as Attachment A for the referenced program. Utility allowances are reviewed on an annual basis. A Memorandum of Agreement has been executed with the Health & Human Services Commission. The Environmental Assessment Compliance for the 2005 Capital Fund Program was a multi-year assessment that encompasses proposed work items through Capital Fund Program 2010. Documentation related to the environmental review is being sent hard copy to the local HUD office.

# iii. Annual Plan Table of Contents [24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

#### **Table of Contents**

		Page #
An	nnual Plan	
i.	Executive Summary	1
ii.	Table of Contents	1
	1. Housing Needs	5
	2. Financial Resources	10
	3. Policies on Eligibility, Selection and Admissions	11
	4. Rent Determination Policies	19
	5. Operations and Management Policies	23
	6. Grievance Procedures	25
	7. Capital Improvement Needs	26
	8. Demolition and Disposition	31
	9. Designation of Housing	32
	10. Conversions of Public Housing	33
	11. Homeownership	34
	12. Community Service Programs	36
	13. Crime and Safety	38
	14. Pets (Inactive for January 1 PHAs)	40
	15. Civil Rights Certifications (included with PHA Plan Certifications)	40
	16. Audit	40
	17. Asset Management	40
	18. Other Information	41

#### Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Requ	red Attachments:
	Admissions Policy for Deconcentration
	FY 2005 Capital Fund Program Annual Statement (included within PHA Plan text)
$\boxtimes$	Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled
	ONLY) (mailed to local HUD office – San Antonio)
O	ptional Attachments:
$\geq$	PHA Management Organizational Chart (included within PHA Plan text)
$\geq$	FY 2006 Capital Fund Program 5-Year Action Plan (included within PHA Plan text)
	Public Housing Drug Elimination Program (PHDEP) Plan
	Comments of Resident Advisory Board or Boards (included within PHA Plan text)
$\geq$	Other (List below, providing each attachment name)
	Resident Survey Follow-Up Plan (included within PHA Plan text)

#### **Supporting Documents Available for Review**

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	Applicable Plan Component				
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans				
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans				
X	Fair Housing Documentation: 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	5 Year and Annual Plans				

List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Applicable Plan Component		
	local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.			
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	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), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Public Housing Deconcentration and Income Mixing Documentation:  1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and  2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Public housing rent determination policies, including the methodology for setting public housing flat rents    Check here if included in the public housing A & O Policy	Annual Plan: Rent Determination		
X	Schedule of flat rents offered at each public housing	Annual Plan: Rent		

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Applicable Plan Component			
	development    Check here if included in the public housing A & O Policy	Determination			
X	Section 8 rent determination (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	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 HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs			
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs			
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs			
NA	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			
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition			
NA	Approved or submitted applications for designation of public	Annual Plan: Designation of			

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Applicable Plan Component			
1 0	housing (Designated Housing Plans)	Public Housing			
NA	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	Annual Plan: Conversion of Public Housing			
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership			
NA	Policies governing any Section 8 Homeownership program  check here if included in the Section 8  Administrative Plan	Annual Plan: Homeownership			
PENDING	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency			
NA	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency			
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency			
NA	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention			
	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit			
X	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs			
NA	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)			

# 1. Statement of Housing Needs

#### A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction							
	by Family Type						
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	770	NA	NA	NS\A	NA	NA	NA
Income >30% but <=50% of AMI	1365	NA	NA	NS\A	NA	NA	NA
Income >50% but <80% of AMI	664	NA	NA	NS\A	NA	NA	NA
Elderly	431	NA	NA	NS\A	NA	NA	NA
Families with Disabilities	413	NA	NA	NS\A	NA	NA	NA
Race/Ethnicity White/Hispanic	1098	NA	NA	NS\A	NA	NA	NA
Race/Ethnicity White/NH	642	NA	NA	NS\A	NA	NA	NA
Race/Ethnicity Black	267	NA	NA	NS\A	NA	NA	NA
Race/Ethnicity Other	22	NA	NA	NS\A	NA	NA	NA

What sources of inspection.)	nformation did the PHA us	se to conduct this analys	is? (Check all that appl	y; all materials must be made available for public
In  U.S. Cens  American  In  Other hou	ted Plan of the Jurisdiction dicate year: us data: the Comprehensive Housing Survey data dicate year: sing market study dicate year:	e Housing Affordability	Strategy ("CHAS") da	taset
B. Housing N		e Public Housing a		at- Based Assistance Waiting Lists
	e-based or sub-jurisdictional pul  Housing Needs of Fam	olic housing waiting lists at t	neir option.	[A-wide waiting list administered by the PHA. PHAs may provide
Public Ho Combined Public Ho	enant-based assistance	isdictional waiting list (	optional)	
11 0000, 10	# of families	% of total families	Annual Turnover	
Waiting list total Extremely low income <=30% A	201 138	69	187	

I	Housing Needs of Fami	lies on the Waiting Li	st
Very low income (>30% but <=50% AMI)	61	30	
Low income (>50% but <80% AMI)	2	1	
Families with children	136	67	
Elderly families	24	12	
Families with Disabilities	22	11	
Race/ethnicity White/Hispanic	120	60	
Race/ethnicity White/NH	49	24	
Race/ethnicity Black/NH	30	15	
Race/ethnicity Black Hisp/Other	2	1	
			<del>,</del>
Characteristics by Bedroom Size (Public Housing			
Only)	10	22	
1BR	18 32	23 41	
2 BR			
3 BR	27	35	

	Housing	g Needs of Families on t	the Waiting List				
4 BR		1	1		-		
5 BR		NA					
5+ BR		NA					
Is the	waiting list closed (se	ect one)? No Y	es				
If yes:							
		closed (# of months)?	_				
		t to reopen the list in the					
		t specific categories of fa	amilies onto the wait	ing list, even if			
<u> </u>	generally closed?	No Yes					
Provide Agency'  (1) Str. Need: Strateg	s reasons for choosing thi  rategies  Shortage of afforda  gy 1. Maximize the 1	PHA's strategy for addressing	ble populations				COMING YEAR, and t
Select al	l that apply						
	Reduce turnover time Reduce time to renov Seek replacement of Seek replacement of	intenance and manageme e for vacated public house rate public housing units public housing units lost public housing units lost section 8 lease-up rates b	ing units  to the inventory thro to the inventory thro	ough mixed finar	nce development	ng resources	oughout the jurisdiction

	Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration  Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program Participate in the Consolidated Plan development process to ensure coordination with broader community strategies Other (list below)				
	gy 2: Increase the number of affordable housing units by:				
	Apply for additional section 8 units should they become available Leverage affordable housing resources in the community through the creation Pursue housing resources other than public housing or Section 8 tenant-based Other: (list below)  Other: (list below)				
Need:	Specific Family Types: Families at or below 30% of median				
Strategy 1: Target available assistance to families at or below 30 % of AMI Select all that apply					
	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work Other: (list below)				
Need: Specific Family Types: Families at or below 50% of median					
Strategy 1: Target available assistance to families at or below 50% of AMI Select all that apply					
Sciect a	iii tiiat appiy				

	Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below) Majority of families applying are at or below 50% of median			
Need:	Specific Family Types: The Elderly			
Strategy 1: Target available assistance to the elderly:				
Select a	ll that apply			
	Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available Other: (list below) Due to lack of elderly applicants do outreach to try and attract new residents			
Need:	Specific Family Types: Families with Disabilities			
	gy 1: Target available assistance to Families with Disabilities:			
Select a	ll that apply			
	Seek designation of public housing for families with disabilities  Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing  Apply for special-purpose vouchers targeted to families with disabilities, should they become available  Affirmatively market to local non-profit agencies that assist families with disabilities  Other: (list below)			
Need:	Specific Family Types: Races or ethnicities with disproportionate housing needs			

#### 2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources:				
Planned Sources and Uses Sources Planned \$ Planned Uses				
1. Federal Grants (FY 2006 grants)	(Estimated)			
a) Public Housing Operating Fund	327,266			
b) Public Housing Capital Fund	264,250			
c) HOPE VI Revitalization	0			
d) HOPE VI Demolition	0			
e) Annual Contributions for Section	1,235,004			
8 Tenant-Based Assistance				
f) Public Housing Drug Elimination	0			
Program (including any Technical				
Assistance funds)				
g) Resident Opportunity and Self-	0			
Sufficiency Grants				
h) Community Development Block	0			
Grant				
i) HOME	0			
Other Federal Grants (list below)	0			

Financial Resources: Planned Sources and Uses					
Sources Planned \$ Planned Uses					
2. Prior Year Federal Grants					
(unobligated funds only) (list					
below)					
None	0				
3. Public Housing Dwelling Rental					
Income	200.000				
Estimated TX303001, 003	390,000				
<b>4. Other income</b> (list below)					
Estimated TX393001, 003	4,500				
<b>4. Non-federal sources</b> (list below)					
None	0				
Total resources	2,221,020				

# 3. PHA Policies Governing Eligibility, Selection, and Admissions [24 CFR Part 903.7 9 (c)]

## **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.
(1) Eligibility
<ul> <li>a. When does the PHA verify eligibility for admission to public housing? (select all that apply)</li> <li>When families are within a certain number of being offered a unit: (state number)</li> <li>When families are within a certain time of being offered a unit: (state time)</li> <li>Other: (describe)</li> <li>At time of application</li> </ul>
<ul> <li>b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?</li> <li>Criminal or Drug-related activity</li> <li>Rental history</li> <li>Housekeeping</li> <li>Other (describe)</li> </ul>
c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes? d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authoriz source)
(2)Waiting List Organization
<ul> <li>a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)</li> <li>Community-wide list</li> <li>Sub-jurisdictional lists</li> <li>Site-based waiting lists</li> <li>Other (describe)</li> <li>Waiting lists based on program requested</li> </ul>

	form <b>HUD 50075</b> (03/2003)
(3) Assignment  a. How many vacant unit choices are applicants ordinarily given before they f	fall to the bottom of or are removed from the waiting list? (select one)
<ul><li>Management offices at developments with site-based waiting</li><li>At the development to which they would like to apply</li><li>Other (list below)</li></ul>	lists
PHA main administrative office All PHA development management offices	
<ul> <li>3. Yes No: May families be on more than one list simultaneously If yes, how many lists? 4</li> <li>4. Where can interested persons obtain more information about and sign up</li> </ul>	n to be on the cite-based waiting lists (select all that annly)?
2. Yes No: Are any or all of the PHA's site-based waiting lists new approved site based waiting list plan)? If yes, how many lists?	w for the upcoming year (that is, they are not part of a previously-HUD-
1. How many site-based waiting lists will the PHA operate in the coming y	year? 4
c. If the PHA plans to operate one or more site-based waiting lists in the comsubsection (3) Assignment	ning year, answer each of the following questions; if not, skip to
PHA main administrative office PHA development site management office Other (list below)	
b. Where may interested persons apply for admission to public housing?	

☐ One ☐ Two ☐ Three or More
b. Xes No: Is this policy consistent across all waiting list types?
c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:
(4) Admissions Preferences
<ul> <li>a. Income targeting:</li> <li>Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?</li> </ul>
b. Transfer policies: In what circumstances will transfers take precedence over new admissions? (list below)  Emergencies Overhoused Underhoused Medical justification Administrative reasons determined by the PHA (e.g., to permit modernization work) Resident choice: (state circumstances below) Other: (list below)
c. Preferences  1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)

form **HUD 50075** (03/2003)

2.	Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federa preferences or other preferences)
For	Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden (rent is > 50 percent of income)
	working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
rep	If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box presenting your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or ough a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.
	Date and Time
Foi	rmer Federal preferences:

Owner, In Victims o	
Working Veterans Residents Those em Househol Househol Those pre Victims o	s (select all that apply) families and those unable to work because of age or disability and veterans' families who live and/or work in the jurisdiction colled currently in educational, training, or upward mobility programs ds that contribute to meeting income goals (broad range of incomes) ds that contribute to meeting income requirements (targeting) viously enrolled in educational, training, or upward mobility programs f reprisals or hate crimes ference(s) (list below)
The PHA	of preferences to income targeting requirements: applies preferences within income tiers cable: the pool of applicant families ensures that the PHA will meet income targeting requirements
(5) Occupancy	
apply) ☑ The PHA	e materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that resident lease s Admissions and (Continued) Occupancy policy

	PHA briefing seminars or written materials Other source (list)
b. Hov	w often must residents notify the PHA of changes in family composition? (select all that apply) At an annual reexamination and lease renewal Any time family composition changes At family request for revision Other (list)
(6) De	concentration and Income Mixing (submitted in a prior PHA Plan)
a. 🗌	Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?
b. 🗌	Yes No: Did the PHA adopt any changes to its <b>admissions policies</b> based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?
c. If th	e answer to b was yes, what changes were adopted? (select all that apply) Adoption of site-based waiting lists If selected, list targeted developments below:
	Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments If selected, list targeted developments below:
	Employing new admission preferences at targeted developments If selected, list targeted developments below:
	Other (list policies and developments targeted below)

d. Yes No: Did the PHA adopt any changes to <b>other</b> policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
e. If the answer to d was yes, how would you describe these changes? (select all that apply)
Additional affirmative marketing Actions to improve the marketability of certain developments Adoption or adjustment of ceiling rents for certain developments Adoption of rent incentives to encourage deconcentration of poverty and income-mixing Other (list below)
f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families (select all that apply)  Not applicable: results of analysis did not indicate a need for such efforts  List (any applicable) developments below:
g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)  Not applicable: results of analysis did not indicate a need for such efforts  List (any applicable) developments below:
B. Section 8  Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.  Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).
(1) Eligibility  a. What is the extent of screening conducted by the PHA? (select all that apply)

	Criminal or drug-related activity only to the extent required by law or regulation Criminal and drug-related activity, more extensively than required by law or regulation More general screening than criminal and drug-related activity (list factors below) Other (list below) Income and citizenship eligibility
b. 🗌	Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
c. 🗌	Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
d. 🗌	Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
e. Ind	icate what kinds of information you share with prospective landlords? (select all that apply)  Criminal or drug-related activity  Other (describe below)  Landlords are advised to screen their applicants for suitability as they would any other applicant on the open market
(2) W	aiting List Organization
	th which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)  None Federal public housing Federal moderate rehabilitation Federal project-based certificate program Other federal or local program (list below)  nere may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply) PHA main administrative office

Other (list below)
(3) Search Time
a. Xes No: Does the PHA give extensions on standard 60-day period to search for a unit?
If yes, state circumstances below:  Due to financial constraints and unit turnovers search period may need to be extended
(4) Admissions Preferences
a. Income targeting
Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
<ul> <li>b. Preferences</li> <li>1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)</li> </ul>
2. Which of the following admission preferences does the PHA plan to employ in the Federal preferences or other preferences) coming year? (select all that apply from either former
Former Federal preferences  Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  Victims of domestic violence  Substandard housing  Homelessness  High rent burden (rent is > 50 percent of income)
Other preferences (select all that apply)

Working families and those unable to work because of age or disability  Veterans and veterans' families  Residents who live and/or work in your jurisdiction  Those enrolled currently in educational, training, or upward mobility programs  Households that contribute to meeting income goals (broad range of incomes)  Households that contribute to meeting income requirements (targeting)  Those previously enrolled in educational, training, or upward mobility programs  Victims of reprisals or hate crimes  Other preference(s) (list below)	
3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hiera or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.	
Date and Time	
Former Federal preferences Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden	
Other preferences (select all that apply)  Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes)	

	Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility Victims of reprisals or hate crimes Other preference(s) (list below)	programs
	Date and time of application Drawing (lottery) or other random choice technique ne PHA plans to employ preferences for "residents who live and/or work in This preference has previously been reviewed and approved by HUD The PHA requests approval for this preference through this PHA Plan	applicants selected? (select one)  the jurisdiction" (select one)
	ationship of preferences to income targeting requirements: (select one)  The PHA applies preferences within income tiers  Not applicable: the pool of applicant families ensures that the PHA will receive the pecial Purpose Section 8 Assistance Programs	neet income targeting requirements
	which documents or other reference materials are the policies governing eliginal administered by the PHA contained? (select all that apply)  The Section 8 Administrative Plan  Briefing sessions and written materials  Other (list below)  No special programs for Section 8 Vouchers	gibility, selection, and admissions to any special-purpose section 8
b. Ho	ow does the PHA announce the availability of any special-purpose section 8 Through published notices Other (list below) The HA has no special purpose Section 8 programs	programs to the public?

4. PHA Rent Determination Policies [24 CFR Part 903.7 9 (d)]
A. Public Housing
Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.
(1) Income Based Rent Policies
Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.
a. Use of discretionary policies: (select one)
The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))
or
The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)
b. Minimum Rent
1. What amount best reflects the PHA's minimum rent? (select one)  \$0\$ \$1-\$25\$ \$26-\$50
2. Tes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:	
c. Rents set at less than 30% than adjusted income	
1. ☐ Yes ☒ No: Does the PHA plan to charge rents at a fixed amount or adjusted income?	percentage less than 30% of
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be use	ed below:
d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (sel  For the earned income of a previously unemployed household member  For increases in earned income  Fixed amount (other than general rent-setting policy)  If yes, state amount/s and circumstances below:  Fixed percentage (other than general rent-setting policy)  If yes, state percentage/s and circumstances below:  For household heads  For other family members  For transportation expenses  For the non-reimbursed medical expenses of non-disabled or non-elderly families  Other (describe below)	ect all that apply)
e. Ceiling rents	
1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)	
<ul> <li>Yes for all developments</li> <li>Yes but only for some developments</li> <li>No</li> </ul>	

2.	For which kinds of developments are ceiling rents in place? (select all that apply)
	For all developments For all general occupancy developments (not elderly or disabled or elderly only) For specified general occupancy developments For certain parts of developments; e.g., the high-rise portion For certain size units; e.g., larger bedroom sizes Other (list below) Not applicable
3. ·	Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)  Market comparability study Fair market rents (FMR)  95 <sup>th</sup> percentile rents 75 percent of operating costs 100 percent of operating costs for general occupancy (family) developments Operating costs plus debt service The "rental value" of the unit Other (list below) Not applicable
f. R	ent re-determinations:
	etween income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes in an adjustment to rent? (select all that apply)  Never  At family option  Any time the family experiences an income increase  Any time a family experiences an income increase above a threshold amount or Other (list below)  or family composition to the PHA such that the changes or family composition to the PHA such

Any change in income or family composition
g.   Yes   No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?
(2) Flat Rents
<ol> <li>In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)</li> <li>The section 8 rent reasonableness study of comparable housing</li> <li>Survey of rents listed in local newspaper</li> <li>Survey of similar unassisted units in the neighborhood</li> <li>Other (list/describe below)</li> </ol>
B. Section 8 Tenant-Based Assistance
Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).
(1) Payment Standards
Describe the voucher payment standards and policies.
<ul> <li>a. What is the PHA's payment standard? (select the category that best describes your standard)</li> <li>At or above 90% but below100% of FMR</li> <li>100% of FMR</li> <li>Above 100% but at or below 110% of FMR</li> <li>Above 110% of FMR (if HUD approved; describe circumstances below)</li> </ul>
b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)  FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
TWIKS are adequate to ensure success among assisted families in the FITA's segment of the FWK area

form **HUD 50075** (03/2003)

	The PHA has chosen to serve additional families by lowering the payment standard Reflects market or submarket Other (list below) Not applicable
c. If the	he payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)  FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area  Reflects market or submarket  To increase housing options for families  Other (list below)  Not applicable
d. Ho	ow often are payment standards reevaluated for adequacy? (select one) Annually Other (list below)
e. Wh	nat factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)  Success rates of assisted families  Rent burdens of assisted families  Other (list below)
(2) Mi	inimum Rent
a. Wh	at amount best reflects the PHA's minimum rent? (select one)  \$0 \$1-\$25 \$26-\$50
b. 🗌	Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

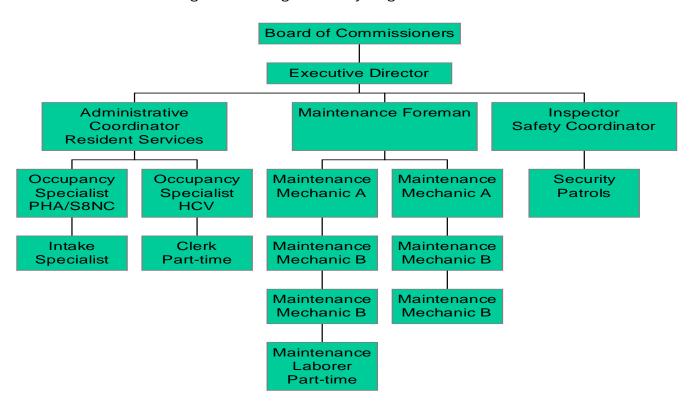
[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

## A. PHA Management Structure

Describe the PHA's management structure and organization. (select one)

An organization chart showing the PHA's management structure and organization is attached. Seguin Housing Authority Organizational Chart



A brief descriptio	n of the management struct	ture and organization of the	PHA follows:
B. HUD Programs Unde	er PHA Management		
		of families served at the beginning	g of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate
	erate any of the programs listed b		
Program Name	Units or Families	Expected	
	Served at Year	Turnover	

**Beginning** 

188

286

NA

NA

NA

Public Housing

Section 8 Vouchers

Section 8 Certificates

Section 8 Mod Rehab

Special Purpose Section

8 Certificates/Vouchers

55

106

(list individually)		
Public Housing Drug	NA	
Elimination Program		
(PHDEP)		
Other Federal		
Programs(list		
individually)		
Sec. 8 New	54	16
Construction – Family		
Section 8 New	40	10
Construction – Elderly		

## C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

- (1) Public Housing Maintenance and Management: (list below) No changes from previous year
- (2) Section 8 Management: (list below)
  No changes from previous year

6. PHA Grievance Procedures [24 CFR Part 903.7 9 (f)]
Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.
<ul> <li>A. Public Housing</li> <li>1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpa B, for residents of public housing?</li> </ul>
If yes, list additions to federal requirements below:
<ul> <li>Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)</li> <li>PHA main administrative office</li> <li>PHA development management offices</li> <li>Other (list below)</li> </ul>
<ul> <li>B. Section 8 Tenant-Based Assistance</li> <li>1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and information hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?</li> </ul>
If yes, list additions to federal requirements below:
form HIID FOOTE (02/2002)

<ul> <li>Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)</li> <li>PHA main administrative office</li> <li>Other (list below)</li> </ul>
7. Capital Improvement Needs [24 CFR Part 903.7 9 (g)] Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.
A. Capital Fund Activities  Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.
(1) Capital Fund Program Annual Statement
Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the en of the PHA Plan template <b>OR</b> , at the PHA's option, by completing and attaching a properly updated HUD-52837.
Select one:  The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment A -or-

	The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)
	Capital Fund Program Annual Statement Parts I, II, and II
See At	ttachment A for CFP 2005 P&E Report as of 3/31/2006 – Tab CFP 2005
Agencie	ptional 5-Year Action Plan es are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table at the end of the PHA Plan template <b>OR</b> by completing and attaching a properly updated HUD-52834.
a. 🔀	Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)
b. If y  in the second of the	res to question a, select one:  The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment A for the CFP 2006 Original Annual Statement; subsequent years 2007 – 2010 are listed below
	The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)
	Optional 5-Year Action Plan Tables
Develop	

Number	(or indicate PHA wide)	Vacant Units	in Development
	Seguin Housing Authority		
TX59P303001,003	PHA Wide		

1A39F303001,003   FHA Wide		
Description of Needed Physical Improvements or Management	Estimated	Planned Start Date
Improvements	Cost	(HA Fiscal Year)
Operations	20,000	FY 2007
Management Improvements	10,000	
Administrative Costs	4,450	
Administrative Salary & Benefits	1,550	
Audit	2,000	
Fees & Costs – A/E & Inspections	19,850	
Site Improvements – landscape, sidewalks, etc.	5,500	
Replace exterior doors/frames/windows and paint exteriors Site G 45 units	190,580	
Maintenance personal salary & benefits	3,820	
Interior painting – 10 units	8,800	
Replace 10 ranges	3,300	
Replace 10 refrigerators	4.400	
Replace Maintenance truck w/ lift-gate	20,000	
10 units off rent roll for modernization – 2 months	2,000	
Relocation costs for residents	5,000	
Total estimated cost over next 5 years		

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
TX303001,003	Seguin Housing Authority PHA Wide			

Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Operations	20,000	FY 2008
Management Improvements – training, upgrade equipment, etc.	10,000	
Administrative Costs	4,370	
Administrative employee & benefits	1,630	
Audits	2,000	
Fees & Costs – A/E & Inspections	19,190	
Site Improvements – landscape, sidewalks, etc.	11,000	
Exterior cleaning & painting Site A 8-story High Rise	55,000	
Replace water heaters 45 units Site G	21,260	
Replace water heaters 43 units Site H	20,320	
Interior painting 15 units	12,600	
Install 10'x10' patios in back yards 45 units Site G	31,050	
Install 10'x10' patios in back yards 43 units Site H	29,730	
Maintenance employee salary & benefits	4,010	
Replace 10 ranges	3,470	

Replace 10 refrigerators  Replace 1 Maintenance truck w/ lift gate	4,620 21,000	
10 units off rent roll for modernization work – 2 months Relocation costs for mod work in units	2,000 5,000	
Total estimated cost over next 5 years		

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
TX303001,003	Seguin Housing Authority PHA Wide			

	1	
Description of Needed Physical Improvements or Management	Estimated	Planned Start Date
Improvements	Cost	(HA Fiscal Year)
Operations	20,000	FY 2009
Management Improvements, training, office equipment, etc.	12,000	
Administrative Costs	8,000	
Administrative Employee salary & benefits	1,720	
Audits	2,000	
Fees & Costs – A/E, Inspectors, etc.	25,100	
Site Improvements – landscape, sidewalks, etc.	15,000	
Additional parking spaces Site A – 20 cars	44,000	
Replace kitchen cabinets Site A 90 units	215,600	
Maintenance employee salary & benefits	4,210	
Replace 45 ranges	15,530	
Replace 45 refrigerators	20,700	
Replace Administrative vehicle	25,000	
Relocation costs	5,000	
10 units off rent roll for mod work	2,000	
Total estimated cost over next 5 years		

	Optional 5-Year Action	n Plan Tables	
Development	Development Name	Number	% Vacancies
Number	(or indicate PHA wide)	Vacant	in Development
		Units	
TX303001, 003	Seguin Housing Authority		
	PHA Wide		

THA WILL		
Description of Needed Physical Improvements or Management	Estimated	Planned Start Date
Improvements	Cost	(HA Fiscal Year)
Operations	20,000	FY 2010
Management Improvements – training, office equipment, etc.	20,000	
Administrative Costs	6,600	
Administrative Salary & benefits	1,810	
Audits	2,000	
Fees & Costs – A/E, Inspectors	17,500	
Site Improvements – landscape, sidewalks, security lighting, etc.	15,000	
Continuation of work begun at Site A – cabinet replacements	90,000	
Exterior & interior painting of 10 units Patton Street	46,000	
Maintenance employee salary & benefits	4,430	

Replace 20 ranges	8,100	
Replace 20 refrigerators	10,350	
Replace 1 Maintenance truck w/ lift gate	24,000	
Renovate Administrative offices, painting, carpets, etc.	44,500	
Recoat roof Site A to maintain warranty	27,600	
Renovate Community Room/kitchen/lobby areas Site A	46,000	
Relocation costs	8,500	
10 units off rent roll for modernization – 2 months	3,000	
Total estimated cost over next 5 years	1,611,523	

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

Applicability of sub-component 7B: 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.

| Yes | No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
| b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)
| Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization Plan underway

| Yes | No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
| If yes, list development name/s below:

Yes No:	d) 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:
Yes No: 6	e) 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:
8. Demolition a [24 CFR Part 903.7 9 (h	[0,1]
Applicability of compor	nent 8: Section 8 only PHAs are not required to complete this section.
1. Yes No:	Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)
2. Activity Descript	ion
Yes No:	Has the PHA provided the activities description information in the <b>optional</b> Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)
	Demolition/Disposition Activity Description
1a. Development na	me:
1b. Development (project) number:	
2. Activity type: Demolition	
Disposition	
3. Application status (select one)	

		_
Approved [		
Submitted, pending approval		
Planned appl		
	pproved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units a		
6. Coverage of action		
Part of the devel	<u>-</u>	
Total developme		
7. Timeline for activ		
-	projected start date of activity:	
b. Projected 6	end date of activity:	
	of Public Housing for Occupancy by Elderly Families or with Disabilities	Families with Disabilities or Elderly Families
Exemptions from Compo	onent 9; Section 8 only PHAs are not required to complete this section.	
1. Yes No:	Has the PHA designated or applied for approval to designate or does occupancy only by the elderly families or only by families with disal or will apply for designation for occupancy by only elderly families families with disabilities as provided by section 7 of the U.S. Housing year? (If "No", skip to component 10. If "yes", complete one active eligible to complete a streamlined submission; PHAs completing streamlined submission;	bilities, or by elderly families and families with disabilities or only families with disabilities, or by elderly families and ng Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal ity description for each development, unless the PHA is
2. Activity Descript	Has the PHA provided all required activity description information:	-
	Management Table? If "yes", skip to component 10. If "No", comp	

Designation of Public Housing Activity Description
1a. Development name:
1b. Development (project) number:
2. Designation type:
Occupancy by only the elderly
Occupancy by families with disabilities
Occupancy by only elderly families and families with disabilities
3. Application status (select one)
Approved; included in the PHA's Designation Plan
Submitted, pending approval
Planned application
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)
5. If approved, will this designation constitute a (select one)
New Designation Plan
Revision of a previously-approved Designation Plan?
6. Number of units affected:
7. Coverage of action (select one)
Part of the development
Total development
10. Conversion of Public Housing to Tenant-Based Assistance
[24 CFR Part 903.7 9 (j)]
Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.
A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY

1. ☐ Yes ⊠ No:	Have any of the PHA's developments or portions of developmen section 202 of the HUD FY 1996 HUD Appropriations Act? (If 'description for each identified development, unless eligible to co streamlined submissions may skip to component 11.)	'No", skip to component 11; if "yes", complete one activity
2. Activity Description	n	
	Has the PHA provided all required activity description informatio	<u> </u>
	Management Table? If "yes", skip to component 11. If "No", con	aplete the Activity Description table below.
Conv	ersion of Public Housing Activity Description	
1a. Development name	<b>2</b> :	
1b. Development (proj	ect) number:	
2. What is the status of	f the required assessment?	
	at underway	
<b>=</b>	at results submitted to HUD	
	t results approved by HUD (if marked, proceed to next	
question)		
Uther (exp	lain below)	
2 Nos Nos Is	Conversion Plan required? (If was no to block A. if no no to	
3 Yes No: Is block 5.)	a Conversion Plan required? (If yes, go to block 4; if no, go to	
<u> </u>	on Plan (select the statement that best describes the current	
status)	· ·	
Conversion	n Plan in development	
Conversion	n Plan submitted to HUD on: (DD/MM/YYYY)	
Conversion	n Plan approved by HUD on: (DD/MM/YYYY)	
Activities 1	oursuant to HUD-approved Conversion Plan underway	
5 Description of how	requirements of Section 202 are being setisfied by means other	
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)		
than conversion (selec		

		form <b>HUD 50075</b> (03/2003)
1. ☐ Yes ⊠ No:	Does the PHA administer any homeownership programs administ homeownership program (42 U.S.C. 1437c(h)), or an approved Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to coneach applicable program/plan, unless eligible to complete a stream PHA status. PHAs completing streamlined submissions may ski	IOPE I program (42 U.S.C. 1437aaa) or has the PHA applied er section 5(h), the HOPE I program, or section 32 of the U.S. imponent 11B; if "yes", complete one activity description for mlined submission due to <b>small PHA</b> or <b>high performing</b>
Exemptions from Compo	ment 11A. Section 8 only 111As are not required to complete 11A.	
A. Public Housing	onent 11A: Section 8 only PHAs are not required to complete 11A.	
11. Homeowners [24 CFR Part 903.7 9 (k)	ship Programs Administered by the PHA	
C. Reserved for Co	onversions pursuant to Section 33 of the U.S. Housing Act of 19	37
B. Reserved for Co	nversions pursuant to Section 22 of the U.S. Housing Act of 19	37
	escribe below)	
	nents no longer applicable: vacancy rates are less than 10 percent nents no longer applicable: site now has less than 300 units	
	dressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: )	
	(date submitted or approved: )	
Units add	submitted or approved: lressed in a pending or approved HOPE VI demolition application	
	dressed in a pending or approved demolition application (date	

2. Activity Description  Yes No:	On  Has the PHA provided all required activity description information  Management Table? (If "yes", skip to component 12. If "No", com	
	lic Housing Homeownership Activity Description Complete one for each development affected)	
1a. Development nam 1b. Development (pro	ne:	
2. Federal Program au HOPE I 5(h) Turnkey I Section 32		
Submitted Planned a	; included in the PHA's Homeownership Plan/Program I, pending approval pplication	
4. Date Homeownersl (DD/MM/YYYY)	hip Plan/Program approved, submitted, or planned for submission:	
<ul><li>5. Number of units a</li><li>6. Coverage of actio</li><li>Part of the develor</li><li>Total development</li></ul>	n: (select one) ppment	

B. Section 8 Tena	ant Based Assistance
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 component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. <b>High performing PHAs</b> may skip to component 12.)
2. Program Description	on:
a. Size of Program  Yes No:	Will the PHA limit the number of families participating in the section 8 homeownership option?
25 or f 26 - 50 51 to 1	to the question above was yes, which statement best describes the number of participants? (select one) Ewer participants O participants han 100 participants
Н	eligibility criteria the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to UD criteria?  yes, list criteria below:
<b>12. PHA Commu</b> [24 CFR Part 903.7 9 (1)]	nity Service and Self-sufficiency Programs
Exemptions from Comporcomponent C.	nent 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-
A. PHA Coordination	on with the Welfare (TANF) Agency

<ol> <li>Cooperative agreements:</li> <li>Yes  No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?</li> </ol>	e
If yes, what was the date that agreement was signed? 05/16/2006	
<ul> <li>2. Other coordination efforts between the PHA and TANF agency (select all that apply)</li> <li>Client referrals</li> <li>Information sharing regarding mutual clients (for rent determinations and otherwise)</li> <li>Coordinate the provision of specific social and self-sufficiency services and programs to eligible families</li> <li>Jointly administer programs</li> <li>Partner to administer a HUD Welfare-to-Work voucher program</li> <li>Joint administration of other demonstration program</li> <li>Other (describe)</li> <li>B. Services and programs offered to residents and participants</li> </ul>	
a. Self-Sufficiency Policies NA Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assis families in the following areas? (select all that apply)  Public housing rent determination policies Public housing admissions policies Section 8 admissions policies Preference in admission to section 8 for certain public housing families Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinate PHA Preference/eligibility for public housing homeownership option participation	

=	e/eligibility for section 8 homeownership option participation cies (list below)
b. Economic and	Social self-sufficiency programs
☐ Yes ⊠ No:	Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs								
Program Name & Description (including location, if appropriate)	Size Method (waiting I		Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)				

# (2) Family Self Sufficiency program/s

a. Participation Description			
	nily Self Sufficiency (FSS) Participa	tion	
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)	
Public Housing	NA	,	
Section 8	NA		
steps fl If no, 1  C. Welfare Benefit Reducti  1. The PHA is complying wire changes resulting from we Adopting appropriate Informing residents of Actively notifying residents of Establishing or pursuit of services	the PHA plans to take to achieve ist steps the PHA will take below ions  the the statutory requirements of lfare program requirements) by changes to the PHA's public her new policy on admission and ridents of new policy at times in	e at least the minimum program ow:  Section 12(d) of the U.S. Hou (select all that apply) ousing rent determination police reexamination (addition to admission and ree th all appropriate TANF agence	sing Act of 1937 (relating to the treatment of income eies and train staff to carry out those policies xamination. ies regarding the exchange of information and coordination
D. Reserved for Communit	ty Service Requirement pursu	ant to section 12(c) of the U.S	S. Housing Act of 1937
13. PHA Safety and Cr	ime Prevention Measures	<u>s</u>	

[24 CFR Part 903.7 9 (m)] Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.
A. Need for measures to ensure the safety of public housing residents
<ol> <li>Describe the need for measures to ensure the safety of public housing residents (select all that apply)</li> <li>High incidence of violent and/or drug-related crime in some or all of the PHA's developments</li> <li>High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments</li> <li>Residents fearful for their safety and/or the safety of their children</li> <li>Observed lower-level crime, vandalism and/or graffiti</li> <li>People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime</li> <li>Other (describe below)</li> </ol>
2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).
Safety and security survey of residents Analysis of crime statistics over time for crimes committed "in and around" public housing authority Analysis of cost trends over time for repair of vandalism and removal of graffiti Resident reports PHA employee reports Police reports Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs Other (describe below)
<ol> <li>Which developments are most affected? (list below)</li> <li>Surveys were made of all complexes but none indicated high crime levels.</li> </ol>

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year
<ol> <li>List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)</li> <li>Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities</li> <li>Crime Prevention Through Environmental Design</li> <li>Activities targeted to at-risk youth, adults, or seniors</li> <li>Volunteer Resident Patrol/Block Watchers Program</li> <li>Other (describe below)</li> </ol>
2. Which developments are most affected? (list below) All sites have a low to almost non-existing crime problems. Programs are provided to keep residents aware of situations around them and to report any and all suspicious activities to the local police department.
C. Coordination between PHA and the police
1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (selected that apply)
Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan Police provide crime data to housing authority staff for analysis and action Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence) Police regularly testify in and otherwise support eviction cases Police regularly meet with the PHA management and residents Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services Other activities (list below)
1. Which developments are most affected? (list below)

As previously stated all developments are afforded additional police protection and patrols as well as	s educational programs for resident safety.
D. Additional information as required by PHDEP/PHDEP Plan NA – NO PHDEP PLAN	DED for de
PHAs eligible for FY 2005 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PH	DEP runds.
Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Yes No: Has the PHA included the PHDEP Plan for FY 2005 in this PHA Plan?  Yes No: This PHDEP Plan is an Attachment. (Attachment Filename:)	Plan?
14. RESERVED FOR PET POLICY	
[24 CFR Part 903.7 9 (n)]	
The Seguin Housing Authority has a Pet Policy in place and a copy is on file with	the local HUD office.
15. Civil Rights Certifications	
[24 CFR Part 903.7 9 (o)]	
Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plan	s and Related Regulations.
16. Fiscal Audit [24 CFR Part 903.7 9 (p)]	
<ol> <li>Yes ☐ No: Is the PHA required to have an audit conducted under section</li> <li>(42 U S.C. 1437c(h))? (If no, skip to component 17.)</li> <li>Yes ☐ No: Was the most recent fiscal audit submitted to HUD?</li> <li>Yes ☐ No: Were there any findings as the result of that audit?</li> <li>Yes ☐ No: If there were any findings, do any remain unresolved?</li> </ol>	5(h)(2) of the U.S. Housing Act of
	HUD FOOTE (00/0000)

5. Yes No: Have	s, how many unresolved findings remain? NA responses to any unresolved findings been submitted to HUD? NA t, when are they due (state below)?
17. PHA Asset Manag [24 CFR Part 903.7 9 (q)]	
Exemptions from component 17: component.	Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this
1. Yes No: Is the Planch include other to the second of th	HA engaging in any activities that will contribute to the long-term asset management of its public housing stock, ling how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and needs that have <b>not</b> been addressed elsewhere in this PHA Plan?  hagement activities will the PHA undertake? (select all that apply)
Private management Development-based Comprehensive stoc Other: (list below)	accounting
3. Yes No: Has the	PHA included descriptions of asset management activities in the <b>optional</b> Public Housing Asset Management Table?
18. Other Information [24 CFR Part 903.7 9 (r)]  A. Resident Advisory Box	

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
<ul> <li>2. If yes, the comments are: (if comments were received, the PHA MUST select one)</li> <li>Attached at Attachment (File name)</li> <li>Provided below:</li> <li>Tenants commented the proposed 5-year Action Plan and current CFP 2006 funding request was a very good plan and took care of future needs adequately during the Resident Advisory Board Meeting.</li> </ul>
Other Comments include:
Fairview:
A new hand basin & bathtub with new tile  Items being replaced in Bathroom Repairs contract started 4/3/06
A large closet  Closet in each unit removed due to installation of A/C & Heating systems
Storage for clothes dryer and vent to outside  No storage available for dryers but maintenance will vent resident dryers to outside as routine work order
A new large toilet  Resident is being interviewed to determine exactly what is being requested
Security; and security lights to get fixed and more lights in areas  Recent change in security measures was explained to tenants and a review will be made to see where more lights could be placed, if needed
Remove mole on window panels and refrigerator  This is a housekeeping issue but maintenance will check at the unit to determine status of request and if additional measures need to be taken
Walls need painting  Interior painting of apartments is a part of the Capital Fund Program ongoing work items. Apartments in need of painting are based on tenant request and/or annual inspections. Cooperation of the tenants is needed in order to accomplish this item.

#### **High Rise:**

More trash containers in lobby, on each floor and around benches outside

There are ample trash containers located as requested locations. Additional cans will only encourage residents to leave their household trash at that location rather than taking to the dumpster as required.

Lights in parking in back

This item was taken care of the same day as the meeting 4/5/06 with the deflectors being removed from inside the light fixture and different bulbs installed.

Soap in downstairs bathroom

Soap is continually being taken from the restrooms. HA maintenance personnel will install wall-mounted liquid soap containers in the restrooms.

New screens on sliding doors

This is an ongoing maintenance project with screens being replaced as needed.

More parking signs that way the outside people can't park in tenant's parking space

Additional signs have been placed in the parking areas. Tenants need to leave notes or call the police when someone is parked in their designated space.

Left side where they wash dishes – needs to be fixed looks bad

This is a maintenance issue for that apartment. The apartment will be checked and if needed a work order will be issued.

Wants to move to 2<sup>nd</sup> floor – too much smoke and needs help indeed – finds butts on isle and it's bad for his health

Tenants were reminded that transfers are not done on a normal basis, but if the resident has a doctor's statement advising that the move to a lower floor is needed for health reasons we will transfer that individual

## **Pradera Homes:**

No comments received

## **Patton Street:**

No comments received

#### Additional comments at meeting:

Peephole in doors at high-rise is not allowing residents to see who is outside knocking on the door.

Maintenance will remove 2 – 3 slats from the screen door to test the capability of seeing outside of the apartment. If it works okay they will be removed from all doors. Test doors were done 4/5/06

Discussion held regarding the power chairs (motorized wheelchairs). There are no laws regarding the use of them on city streets, etc., but the police recommend that they be driven on the sidewalk or next to the curb for safety purposes.

Question was raised about having signs addressing proper clothing attire when in the lobby area of the high rise. It was recommended that the individuals be cautioned at that time and let them know that it is offensive to many of the elderly residents.

Family site residents advised that there seems to be more drugs/marijuana being used at the sites. A drug sweep with police K-9 drug dogs will be planned for the near future.

Replacement of the fire hoses on the 8 floors of the High Rise was included as a part of the 2006 CFP program.

Due to the age of the existing fire hoses (original from 1969) this item will be addressed as routine maintenance materials and contract work for the purchase and testing of new fire hoses.

). IN V	t manner did the PHA address those comments? (select all that apply)
$\leq$	onsidered comments, but determined that no changes to the PHA Plan were necessary.
	e PHA changed portions of the PHA Plan in response to comments
	st changes below:
$\boxtimes$	her: (list below) Add Public Hearing comments
	the Public Hearing no comments were received regarding the Annual Plan.
B. Des	iption of Election process for Residents on the PHA Board
	No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2.	Yes No:	Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to subcomponent C.)
3. De	scription of Resid	dent Election Process
a. Nor	Candidates wer Candidates coul	dates for place on the ballot: (select all that apply) e nominated by resident and assisted family organizations ld be nominated by any adult recipient of PHA assistance n: Candidates registered with the PHA and requested a place on ballot e)
b. Eli	Any head of ho Any adult recip	(select one)  f PHA assistance usehold receiving PHA assistance ient of PHA assistance ber of a resident or assisted family organization
c. Eli	Representatives Other (list)	ect all that apply) ents of PHA assistance (public housing and section 8 tenant-based assistance) s of all PHA resident and assisted family organizations oral appointment
		sistency with the Consolidated Plan idated Plan, make the following statement (copy questions as many times as necessary).
1. Co	nsolidated Plan j	urisdiction: State of Texas

	ne PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that ply)
	The PHA has based its statement of needs of families in the jurisdiction 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)
4. Tł	e Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)
D. O	ther Information Required by HUD
Use th	is section to provide any additional information requested by HUD.
Follo	ow-up Plan – required response(s)
Asses	ollowing plan is designed to respond to the stated needs of the residents of the Seguin Housing Authority as a result of the fiscal year 2005 Resident Service & sment Survey conducted by the U. S. Department of Housing and Urban Development offices, Washington, D.C. Items to be specifically addressed have highlighted.
Maint	enance and Repair Section
Open	meetings with residents so that they may express their views on the day-to-day operations of the housing authority.
	eficiencies identified in the Physical Inspection Assessment of the residential areas will be addressed in forth-coming budgets associated with the Capitol vement Grant.

Work Orders received on a daily basis are reviewed, prioritized, and completed within a 24-hour period barring any unforeseen emergency situations that would pre-empt normal routine activities. The Maintenance Plan Addendum (a part of the Admission & Occupancy Policy) addresses the procedures for efficient handling of all work orders.

Staff meetings will commend maintenance staff for their efficiency and prompt handling of resident requests. Additional training, as it is available, will enhance the knowledge and quality of work performed by all maintenance employees. Suggestions by staff to create a more-efficient operation will be taken, reviewed, and implemented in order to provide good service to the residents of the authority.

#### Communication

An open-door policy is observed at the central office and when visiting the various complexes to allow residents the opportunity to express their views, comments, and suggestions regarding the operations of the housing authority and their day-to-day living environment.

Open meetings and activity planning with residents provide a forum for comments and suggestions and shall be held on a regular basis. A suggestion box is made available at the central office for resident input and comment when making monthly rental payments and subsequent visits during the month. Residents are requested to provide suggestions for improvements to their apartments, common areas, and neighborhood to enhance the quality of life for all family members and visitors. At social functions residents are encouraged to speak-up and provide positive information, feedback, and suggestions to make their complexes a better place to live. Door-to-door visitations will take place to provide residents a one-on-one private forum to discuss their needs and desires regarding the operation of the housing authority.

All policies have been reviewed with residents and their comments and suggestions have been taken into consideration with additional updating of the policy manual to meet the needs of the residents.

The format of the monthly newsletter has been revised for ease in reading and understanding with positive response from the residents. A monthly "calendar of events" is included as a part of the bulletin with additional news flyers provided during the month to remind residents of upcoming events.

The Resident Advisory Board was formed and meetings have been held. At the request of the members newsletters will be provided to the Section 8 Housing Choice Voucher Program residents and reminder flyers will be sent prior to scheduled meetings.

Notices will be posted on each floor of the multi-story buildings for residents' convenience.

Additional staff training, as it is available, will be given to enhance the communication skills of employees to eliminate negative and misunderstood conversations between staff and residents.

All scheduled maintenance improvements and annual inspection notices are provided to residents at least three (3) days prior to the event. Modernization work notification is provided prior to the start of any project with continued updates during the construction period.

#### Safety (required response)

Open meetings with residents are held in order for them to express their concerns regarding this matter.

Off-duty police officers continue to be contracted with to provide security for residents at all sites. Officer patrols have been broken to a few hours each per week at various times in the evenings, early mornings, and weekends to avoid a pattern of routine visibility. Officers are also working undercover (plain clothes) to provide additional security services at all complexes. Not in use police vehicles are being kept off and on and the various sites to establish a police presence in the area even when no officer is on site.

Officers regularly attend resident functions to create a friendlier atmosphere between and residents and children.

Residents are encouraged to contact local law enforcement centers whenever suspicious or unusual activities are taking place and request regular officer presence. Office space and meeting areas are provided to residents to discuss potential harmful situations with law enforcement personnel.

Elderly complexes are equipped with direct communication lines to the city police dispatcher via a telephone located in the elevators.

Crime watch meetings are held on a monthly basis at all sites. Maintenance personnel visit all sites after dark to ensure adequate security lighting for residents and lights are operational. Police officers report on a routine basis their observations while at the various sites and make a list of any items that may need correcting.

Criminal trespass notices are being given to undesirable non-residents to eliminate the bad element at each complex.

#### Services

Open meetings with residents requesting input and assistance in planning programs for the mutual benefit of all residents.

Partnerships have been created to bring a variety of life skills, self-improvement, parenting, medical, and educational programs to residents at all locations. Media flyers are distributed to all residents to remind residents of upcoming events within the complex and the community regarding career days, health and employment opportunities.

A reward program has been established for students attaining honor roll status at all levels of education.

First time homebuyer courses are provided for interested residents at no cost. Applications for grants and loan programs on behalf of eligible residents are applied for with counseling available to secure mortgage financing for homeownership. Consumer counseling is made available to all residents at no charge to help with their budgeting and financial issues.

Public telephone booths accessible to general public outside of enclosed areas.

Transportation schedules and fees posted in common areas for resident information.

#### **Neighborhood Appearance (required response)**

Open meetings with residents for their comments are conducted on ways to enhance the appearance of their complexes and neighboring areas. During prior meetings with residents their thoughts on the neighborhood appearance segment of the survey includes all the surrounding subdivision privately owned homes in the area. Although it was explained that the survey relates directly to their housing complex they are still looking at all the areas in their neighborhood when giving their responses.

Disabled/abandoned vehicles are tagged with a warning for removal and if not done within three (3) days are removed from housing authority property at the tenant's expense.

Residents are warned that old furniture and other personal belongings left outside the unit need to be removed and given the opportunity to have them removed in a timely manner or will be charged a fee for the removal of said items.

Pest control is provided free of charge to each apartment on a semi-monthly basis.

Resident suggestions regarding smoking areas have been heard and action taken. Failure to residents to cooperate with rules may change current smoking areas to non-smoking areas at the request of the Resident Advisory Board.

Landscape work and site improvements will be ongoing projects within the Capital Fund Program as funding permits.

Resident suggestions are addressed with follow-up reminders in the monthly newsletters regarding proper placement of disposable items in provided containers and for balcony areas to be maintained in a visually accepted manner.

City brush and trash pickup services are provided through a Community Service Agreement for the disposal of large items in addition to privately contracted services.

Graffiti and other visual hazards are addressed in the Maintenance Plan Addendum.

A Yard-of-the-Month program has been initiated to encourage residents to maintain their areas and foster a better curb appeal within the community.

Residents are notified of community-wide cleanup days and encouragement to participate in these activities.

_				form <b>HUD 5007</b>	<b>5</b> (03/2003)		
	o.s. Department of Ho	using					
FY 2006 OPERATING BUDGET	U.S. Department of Ho	uging					
The 2006 Capital Fund Program is addressing surfaces will be painted to reflect the current tree	g the exterior of the nd in multiple colors w	family units with twithin a complex.	he replacement c	of windows, doors	s, frames, and exte	erior painting.	Exterior

## **Operating Budget**

and Urban Development

Office of Public and Indian Housing

OMB Approved No.2577-0026 (exp. 10/31/97)

Public reporting burden for this collection of information is estimated to average 116 hours per response, including the time for reviewing instruction, searching existing data sources gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0026), Washington, D.C. 20503. Do not send this completed form to either of the above addresses.

a. Type of Submission			b. Fiscal Year Ending		c. No. of months (check one)		d. Type of HUD Assisted projects				
X Original Revision No, 09-30-06			12 Mos.	Other	01 X	PHA/IHA-Owne	ed Rental F	Housing			
e. Name of Public Housing Agency /Indian Housing Authority (PHA/IHA)				•		02 IHA Owned Mutual Help Homeownershi			Homeownership		
		<b>Housing Autho</b>	ority of the City	of Seguin,	Texas		03	PHA/IHA Lease	ed Rental I	Housing	
f. Address (cit	y, State	, zip code)					04	PHA/IHA Owne	d Turnkey	III Homeownership	
		516 Jefferson A	ve., Seguin, Tex	as 78155			05	PHA/IHA Lease	d Homeow	vnership	
g. ACC Numb	er			h. PAS/Loccs	Project No.		I. HUD Fi	eld Office			
		FW-1038		ΤX	E3030	0106S		San Antonio, Texas			
j. No. of Dwell	ling Unit	S	k. No o f Unit Month	hs Available	m. No of Pr	ojects					
		188		2256		1					
					Actuals	Estimated		Reques	ted Budge	t Estimates	
					Last Fiscal	or Actual	PHA/	IHA Estimates	HUD I	Modifications	
Line	Acc't				Year	Current Budget		Amount		Amount	
No.	No.		Description		2004	Yr. 2005	PUM	to nearest \$10)	PUM	(to nearest \$10)	
			(1)		(2) PUM	(3) PUM	(4)	(5)	(6)	(7)	
Homebuyers		y Payments for:									
010		Operating Expense									
020	7712	Earned Home Pay	ments								
030	7714	Nonroutine Mainter									
040	Total		unt (sum of lines 010	, 020,and 030							
050		Excess (or deficit)									
060		Homebuyers Mont	hly Payments - contra	a							
Operating Re											
070	3110	Dwelling Rental			168.39			,			
080	080 3120 Excess Utilities				14.51	17.03	14.18	32,000			
090	090 3190 Nondwelling Rental										
100	Total	Rental Income (sur	m of lines 070, 080 a	ind 090	182.90	189.89	187.05	422,000	·		

110	3610	Interest on General fund Investments		0.73	1.77	4,000	
120	3690	Other Income	11.30	12.19	11.75	26,500	
130	Total	Operating Income (sum lines of 100, 110 and 120)	194.20	202.81	200.58	452,500	
Operating E	xpendit	ures - Administration:					
140	4110	Administrative Salaries	49.93	49.45	51.75	116,740	
150	4130	Legal Expense	0.30	0.11	0.44	1,000	
160	4140 Staff Training		2.94	2.32	3.10	7,000	
170	4150	Travel	3.00	3.00	2.22	5,000	
180	4170	Accounting Fees	3.23	3.32	3.32	7,500	
190	190 4171 Auditing Fees		3.18	3.03	3.10	7,000	
200	200 4190 Other Administrative Expenses		7.65	8.72	9.31	21,000	
210	Total	Administrative Expenses (sum lines 140 thru line 200)	70.23	69.95	73.24	165,240	
	Tenant	Services					
220	4210	Salaries	9.23	9.62	9.58	21,620	
230	4220	Recreation, Publications and Other Services					
240	4230	Contract Costs, Training and Other	2.39	2.70	2.70	6,100	
250	Total	Tenant Services Expense (sum lines 220 thru 240)	11.62	12.32	12.29	27,720	
Utilities:							
260	4310	Water	12.63	15.67	14.41	32,500	
270	4320	Electricity	38.08	45.66	31.03	70,000	
280	4320	Gas	21.01	20.74	23.36	52,700	
290	4340	Fuel					
300	4350	Labor					
310	4390	Other Utilities expense Sewer	15.17	17.81	16.40	37,000	
320	Total	Utilities Expense (sum of lines 260 thru 310)	86.89	99.88	85.20	192,200	

Page 1 of 3

form HUD-52564 (3/95)

168.74

182.15 170.73

385,160

Total Operating Income - Page 1	194.20	202.81	200.57	452,500
Total Operating Expenditures - Page 1	168.74	182.15	170.73	385,160

Nam	Name of PHA/IHA				scal Year Ending				
		Housing Authority of the city of Seguin, Texas	6		09-30-06				
			Actual	Estimated					
			Last Fiscal	or Actual	PHA/IHA Estimates	HUD Modifications			
Line	Acc't		Year	Current Budget	Amount	Amount			

No.	No.	Description	2004	Yr. 2005	PUM	to nearest \$10)	PUM	(to nearest \$10)
		(1)	(2) PUM	(3) PUM	(4)	(5)	(6)	(7)
	-	intenance and Operation:						
	4410	Labor	70.30	70.81	74.45	167,970		
340	4420	Materials	13.85	14.96	13.30	30,000		
350	4430	Contract Costs	17.28	17.64	18.88	42,600		
351	4431	Garbage and Trash Removal						
360	Total	Ordinary Maintenance & Operation Exp.(330 to350)	101.43	103.41	106.64	240,570		
Prote	ctive S	ervices:						
370	4460	Labor						
380	4470	Materials						
390	4480	Contract Costs	11.68	11.84	13.30	30,000		
400	Total	Protective Services Expense (Sum lines 370 to 390)	11.68	11.84	13.30	30,000		
Gene	ral Exp	ense:						
410	4510	Insurance	11.28	10.65	11.97	27,000		
420	4520	Payments in Lieu of Taxes						
430	4530	Terminal Leave Payments						
440	4540	Employee Benefit Contributions	49.23	51.01	57.95	130,740		
450	4570	Collection Losses	3.55	1.80	2.22	5,000		
460	4590	Other General Expenses						
470		General Expense sum of lines 410 to 460)	64.06	63.46	72.14	162,740		
480	Total	Routine Expense (sum line 210, 250,320,360,400, 470)	345.91	360.86	362.80	818,470		
Rent	or Lea	sed Dwellings:						
490	4710	Rents to Owners of Leased Dwellings						
500	Total	Operating Expense (sum of lines 480 and 490)	345.91	360.86	362.80	818,470		
Nonro	outine E	Expenditures:						
510	4610	Extraordinary Maintenance						
520	7520	Replacement of Nonexpendable Equipment						
530	7540	Property Betterments and Additions						
540	Total	Nonroutine Expenditures (lines 510, 520, and 530)						
550	Total	Operating Expenditures (sum of line 500 and 540)	345.91	360.86	362.80	818,470		
Prior	Year A	djustments:						
560	6010	Prior Years Adjustments Affecting Residual Rec.						

Other	Expen	ditures:					
570	Defici	ency in Residual Receipts at End of Preceding F. Y.					
	Total	Operating Expenditures, including prior year					
580		Adjustments and other expenditures					
		(line 550 plus or minus line 560 plus line 570)	345.91	360.86	362.80	818,470	
590		Residual Receipts (or deficit before HUD Contrib. and					
		provision for operating reserve (130 minus line 580)	-151.71	-158.05	-162.22	-365,970	
HUD (	Contrib	utions:					
600	8010	Basic Annual Contributions - Leased Projects					
610	8011	Prior Year Adjustments (Debit) Credit					
620	Total	Basic Annual Contribution (Line 600 + or - line 610)					
630	8020	Contributions Earned - Op. Sub. Cur. Yr. before adj.	122.72	137.41	180.67	407,586	
640		Mandatory PFS Adjustments (Net) Utility 1999 & 2000					
650		Other (specify) Subsidy @ 99.5%					
660		Other (specify)					
670		Total Year-end Adjustments/Other (+ or - 640 to 660)					
680	8020	Total Operating Subsidy-current year (630 + or - 670)	122.72	137.41	180.67	407,586	
690	Total	HUD Contributions (sum of line 620 and 680)	122.72	137.41	180.67	407,586	
		Residual Receipts (or Deficit) (line 590 plus 690)					
700		Enter here and on line 810	-29.07	-20.64	18.45	41,616	

Page 2 of 3

form HUD-52564 (3/95)

Nam	e of Pl	HA/IHA	Fisca	l Year Ending	
		Housing Authority of the City of Seguin, Texas		9/30/2006	
		Operating Reserve	I	PHA/IHA Estimates	HUD Modifications
		Part 1 - Maximum Operating Reserve - End of Current Budget Year			
740	2821	PHA/IHA-Leased Housing - Section 23 or 10(c)			
		50% of Line 480, Column 5, from HUD-52564		409,235	

	Part II - Provision for and Estimated or Actual Operating Reserve at Fiscal year End		
780	Operating Reserve at End of Previous Fiscal Year-Actual for FYE (date)	251,921	
790	Provision for Operating Reserve - Current Budget Year (check one)		
	X Estimated for FYE 9-30 2005	-68,750	**
	Actual for FYE		
800	Operating Reserve at End of Current Budget Year (check one)		
	X Estimated for FYE 9-30 2005	183,171	
	Actual for FYE		
810	Provision for Operating Reserve - Requested Budget Year Estimated for FYE 9-30 Enter Amount from line 700	41,616	
820	Operating Reserve at End of Requested Budget Year Estimated for FYE (Sum of lines 800 and 810	224,787	
830	Cash Reserve Requirement - % 0f Line 480	112%	

Comments

<sup>\*\*</sup> Surplus funds used to complete Capital Fund Program 2004's modernization work at 88 family units by installing central heating and air conditioning in each apartment.

PHA / IHA Approval	Name	Mary C. Jackson	
	Title	Executive Director	
	Signature	Original on file @ HA Office	Date 04/27/06
Field Office Approval	Name		
	Title		D.U.
	Signature		Date
Previous editions are obsolete		Page 3 of 3	form HUD-52564 (3/95)

#### **Attachments**

Use this section to provide any additional attachments referenced in the Plans.

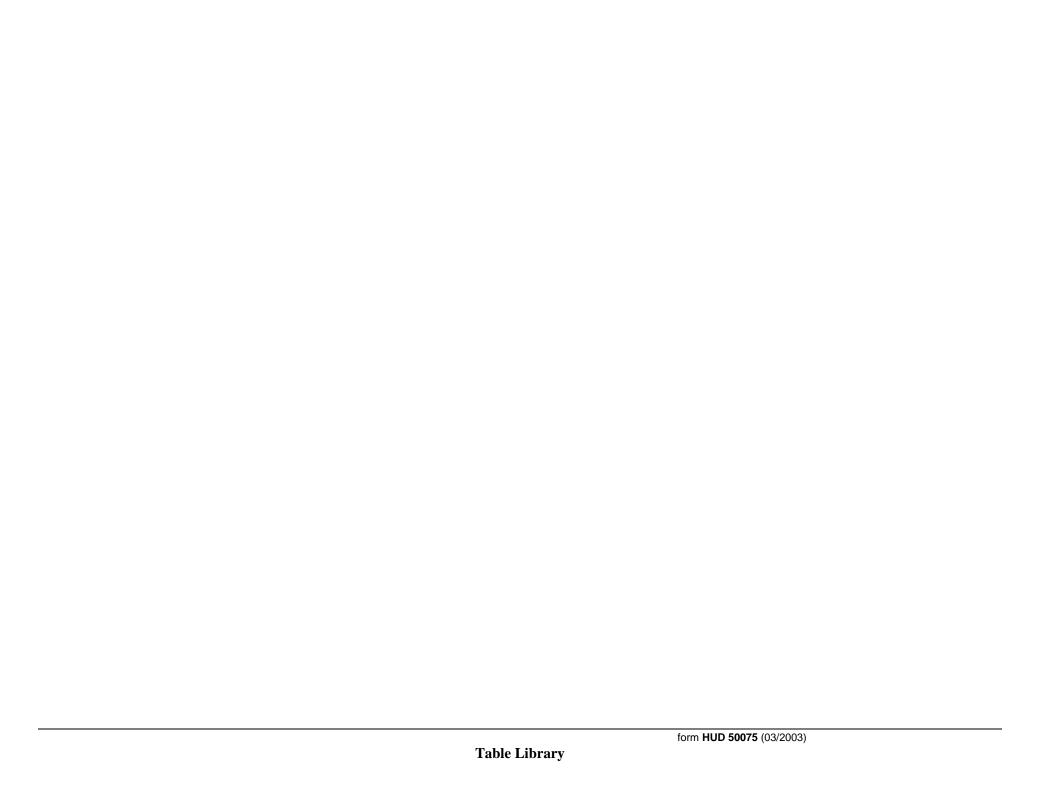
See Attachment A for the CFP 2005 and 2006 Parts I, II, and III. Certifications were sent by U. S. Mail to San Antonio HUD Office on July 5, 2006.

Multi-Year Environmental Assessment Status Review is on file at local HUD Field Office.

#### **Optional Public Housing Asset Management Table**

See Technical Guidance for instructions on the use of this table, including information to be provided.

	Public Housing Asset Management									
Development			Activ	ity Description						
Identi	fication									
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III Component 7a	Development Activities Component 7b	Demolition / disposition Component 8	Designated housing Component 9	Conversion  Component 10	Home- ownership Component 11a	Other (describe)  Component 17		
TX303001	90 Elderly	Included in CFP Program						AMP 001		
TX303001	88 Family	Included in CFP Program						AMP 001		
TX303003	10 Family	Included in CFP Program						AMP 001		



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

r actor (C	TI/CII KIII/I aiti		.1 <u>y</u>		
PHA Name:	Grant Type a	and Number			Federal FY
	Capital Fund	Program Gran	nt No:		of Grant:
	Replacement	Housing Fact	or Grant No:		
Original Ar	nnual Statement Reserve	for Disaste	rs/ Emerger	icies Revised	l Annual Statement
revision no	<b>):</b> )				
Performano	ce and Evaluation Repor	t for Period	Ending:	Final Pe	rformance and
Evaluation	•		8		
	Summary by	Total Estir	nated Cost	To	tal Actual Cost
	Development Account				
	20,010 111010 111010 11101	Original	Revised	Obligated	Expended
1	Total non-CFP Funds			o wangawa	P
	1406 Operations				
	1408 Management				
	Improvements				
	1410 Administration				
	1411 Audit				
	1415 Liquidated				
Ü	Damages				
7	1430 Fees and Costs				
	1440 Site Acquisition				
	1450 Site Improvement				
	1460 Dwelling				
	Structures				
11	1465.1 Dwelling				
	Equipment—Nonexpen				
	dable				
12	1470 Nondwelling				
	Structures				
13	1475 Nondwelling				
	Equipment				
14	1485 Demolition				
	1490 Replacement				
	Reserve				
16	1492 Moving to Work				
	Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development				
	Activities				
19	1501 Collaterization or				
	Debt Service				
	1502 Contingency				
21	Amount of Annual				
	Grant: (sum of lines 2 –				
	20)				
22	Amount of line 21				
	Related to LBP				
	Activities				

I	23	Amount of line 21		
		Related to Section 504 compliance		
ŀ	24	Amount of line 21		
		Related to Security –		
L		Soft Costs		
	25	Amount of Line 21		
		Related to Security – Hard		
L		Costs		
		Amount of line 21 Related		
I		to Energy Conservation		
ı		Measures		

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

I UI V II.	Duppor	ing rages					
PHA Name:		<b>Grant Type and Number</b>				Federal FY o	of Grant:
		Capital Fund Program Gra					
		Replacement Housing Fac					
Developme General		Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Actual Cost	
nt Number	Description						
	of Major						
Name/HA-							
Wide	Categories						
Activities							
				Original	Revised	Funds	Funds
						Obligated	Expended

# 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:
Developme nt Number		All Fund Obligated				All Funds Expended		
Name/HA- Wide Activities		(Quarter E	uarter Ending Date)		(Quarter Ending Date)			Target Dates
	Original	Rev	vised	Actual	Original	Revised	Actual	

Capital	Fund Pr	ogram F	ive-Year	<b>Action</b>	Plan
Part I: S	Summary	y			
PHA Name				Original 5-	
				Revision No	0:
Developme	Year 1	Work	Work	Work	Work
nt		Statement	Statement	Statement	Statement
Number/Na		for Year 2	for Year 3	for Year 4	for Year 5
me/HA-		FFY Grant:	FFY Grant:	FFY Grant:	FFY Grant:
Wide		PHA FY:	PHA FY:	PHA FY:	PHA FY:
	Annual Statement				

CFP Funds Listed for 5-			
year			
planning			
Replaceme			
nt Housing			
Factor			
Funds			

Capital	Capital Fund Program Five-Year Action Plan									
Part II:	Part II: Supporting Pages—Work Activities									
Activities	Activities for Year :			Activities for Year:						
for										
Year 1		FFY Grant:			FFY Grant:					
		PHA FY:			PHA FY:					
	Developme	Major	Estimat	Developme	Major	Estimated				
	nt	Work		nt	Work	Cost				
	Name/Nu	Categories	ed Cost	Name/Nu	Categories					
	mber			mber						
See										
Annual										
Statement										

Total C	FP Estima	ted Cost	\$	\$

Capital	Capital Fund Program Five-Year Action Plan							
Part II:	Support	ing Page	es—Worl	k Activiti	ies			
Activi	ties for Year	:	Activ	ities for Year	r:			
	FFY Grant:			FFY Grant:				
	PHA FY:			PHA FY:				
Developme	-	Estimated	Developme	Major	Estimated			
nt	Work	Cost	nt	Work	Cost			
Name/Nu	Categories			Categories				
mber			mber					
Total	CFP	\$			\$			
	_	Ψ			Ψ			
Estimat	ted Cost							

actor

Status of Work

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: Seguin Housing Authority Grant Type and Number TX59P30350105 Capital Fund Program Grant No: TX59P30350105 Replacement Housing Factor Grant No: Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: X Performance and Evaluation Report for Period Ending: 03/31/2006 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	15,000			
3	1408 Management Improvements	5,000			
4	1410 Administration	6,600			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	16,850			
8	1440 Site Acquisition				
9	1450 Site Improvement	7,500			
10	1460 Dwelling Structures	161,300			
11	1465.1 Dwelling Equipment—Nonexpendable	7,000			
12	1470 Nondwelling Structures	25,000			
13	1475 Nondwelling Equipment	20,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	264,250			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504				
24	Amount of line 21 Related to Security – Soft				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

#### Annual Statement/Performance and Evaluation Report

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

PHA Name: Seguin Hou		Grant Type and Number T	X59P30350105			Federal FY	of Grant:	2005
J	Ç	Capital Fund Program Grant Replacement Housing Facto	t No: TX59P30 or Grant No:	0350105				
Name/HA-Wide Activities TX303001, 003 HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estim	ated Cost	Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Operations	1406		15,000.00		15,000.00	15,000.00	
	Management Improvements - purchase of copiers, upgrade operating systems for computers	1408		5,000.00		5,000.00	11,599.04	In progress
	Administrative Costs - advertising, bid documents, admin employee salary & benefits	1410		6,600.00		523.00	861.05	In progress
	Audits	1411		0.00		0.00	0.00	Under Contract
	A/E Fees & Inspections	1430		16,850.00		16,850.00	14,960.00	In progress
	Site Improvements - landscaping, sidewalk repairs, etc.	1450		7,500.00		0.00	0.00	In progress
	Dwelling Structures - replace kitchen cabinets, recoat roof, repalce interior doors, bathroom repairs, maintenance employee salary & benefits			161,300.00		222,987.00	0.00	Under Contract
	Replace ranges & refrigerators	1465.1		7,000.00		3,890.00	3,890.00	In progress
	Renovate Community Room/Lobby Site A	1470		25,000.00		0.00	0.00	moved to later year
	Replace maintenance truck w/ lift gate	1475.1		20,000.00		0.00	0.00	In progress

Totals		264,250.00	0.00	264,250.00	46,310.09	
•						

**Annual Statement/Performance and Evaluation Report** 

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

Part III: Implementation Schedule

PHA Name: Seguin Housing	Authority	Grant Type	and Number TX5	9P30350105			Federal FY
		Capital Fund	l Program No: T	X59P30350105	;		of Grant:
		Replacemen	t Housing Factor N				2005
Development Number	All Fund Obligated			All Funds			Reasons for
				Expended			Revised
							Target
							Dates
Name/HA-Wide Activities	(Quarter Ending Date)			(Quarter Ending			
1 (41116) 1111	(Quarter Zhang Zute)			Date)			
	Original	Revised	Actual	Original	Revised	Actual	
TX303001,003	8/18/2007		3/31/2006	8/17/2009			
							†
							<del> </del>
							+
							+
							†

#### Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: Seguin Housing Authority Grant Type and Number TX59P30350106 Federal FY of TX59P30350106 Grant: 09/2006 Capital Fund Program Grant No: Replacement Housing Factor Grant No: X Original 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 Total Actual Cost** Original Revised **Obligated** Expended Total non-CFP Funds 1406 Operations 15,000 1408 Management Improvements 9,500 1410 Administration 9,493 1411 Audit 2,000 1415 Liquidated Damages 1430 Fees and Costs 17,000 1440 Site Acquisition 1450 Site Improvement 8,000 1460 Dwelling Structures 167,780 1465.1 Dwelling Equipment—Nonexpendable 1.000 1470 Nondwelling Structures 1475 Nondwelling Equipment 17,000 1485 Demolition 1490 Replacement Reserve 1492 Moving to Work Demonstration 16 1495.1 Relocation Costs 1,000 1499 Development Activities 18 1501 Collaterization or Debt Service 1502 Contingency Amount of Annual Grant: (sum of lines 2 - 20) 247,773 Amount of line 21 Related to LBP Activities Amount of line 21 Related to Section 504 compliance Amount of line 21 Related to Security – Soft Costs

167,780

Amount of Line 21 Related to Security – Hard Costs 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)

PHA Name: Seguin	n Housing Authority	Grant Type and N	umber TX5	9P30350106	Federal FY of Grant: 2006			
	,	Capital Fund Progr Replacement Hous			350106			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Actual Cost		Status of Work
TX303001, 003								
HA-Wide Activities				Original	Revised	Funds Obligated	Funds Expended	
	Operations	1406		15,000.00				
	Management Improvements - computer upgrades, staff training, etc.	1408		9,500.00				
	Administrative Costs - printing - bid documents, advertising	1410		8,023.00				
	Employee Salary & benefits	1410		1,470.00				
	Audit	1411		2,000.00				
	Fees & Costs - A/E Services & Inspections	1430		17,000.00				
	Site Improvements - landscape, sidewalks, etc.	1450		8,000.00				
	Dwelling Structures - Replace exterior doors/frames/windows and paint exterior of units @ Site H - 43 units	1460		162,140.00				
	Interior painting of 15 units	1460		1,000.00				
	Replace damaged interior doors	1460		1,000.00				
	Employee Salary & benefits	1460		3,640.00				
	Dwelling Equipment - non-expendable stoves & refrigerator replacements	1465.1		1,000.00				
	Non-dwellinig equipment - replace maintnenance truck w/ lift gate	1475		17,000.00				
	Relocation costs for residents during mod work	1495.1		750.00				
	Units off rent roll for mod work 10 units for 2 mo.	1495.1		250.00				
	Total expenses for CFP 2006			247,773.00				

<b>Annual Statem</b>	ent/Performance and Evaluation R	eport					
Capital Fund I	Program and Capital Fund Program	n Replacem	ent Hou	sing Factor	· (CFP/CFPI	RHF)	
Part III: Impl	ementation Schedule						
PHA Name: Seguin F	Housing Authority	Grant T	ype and Nun	nber TX59P3035	0106		Federal FY of Grant: 2006
		Capital Replace	Capital Fund Program No: TX59P30350106 Replacement Housing Factor No:				
Development All Fund Obligated All Funds Expende Number				ed	Reasons for Revised		
Name/HA-Wide Activities	(Quarter Ending Date)	(Quarter Ending Date) (Quarter Ending Date)			Target Dates		
	Original	Revised	Actual	Original	Revised	Actual	
TX303001, 003							
HA-wide Activities	9/1/2008			9/1/2010			

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

PHA Name:	Grant Type	and Number			Federal FY
		d Program Grai	nt No:		of Grant:
	Replacemen	t Housing Fact	or Grant No:		
Original Aı	nnual Statement Reserv	e for Disaste	rs/ Emerger	icies Revised	l Annual Statement
(revision no	<b>)</b> : )				
Performano	ce and Evaluation Repo	rt for Period	Ending:	Final Pe	rformance and
Evaluation					
Line No.	Summary by	Total Estir	nated Cost	Tot	tal Actual Cost
	<b>Development Account</b>				
		Original	Revised	Obligated	Expended
	Total non-CFP Funds				
	1406 Operations	1			
	1408 Management				
	Improvements				
	1410 Administration				
	1411 Audit 1415 Liquidated				
	<u> </u>				
	Damages 1430 Fees and Costs				
	1440 Site Acquisition				
	1450 Site Improvement				
	1460 Dwelling	1			
10	Structures				
11	1465.1 Dwelling				
- 1	Equipment—Nonexpen				
	dable				
12	1470 Nondwelling				
	Structures				
13	1475 Nondwelling				
	Equipment				
	1485 Demolition				
15	1490 Replacement				
	Reserve				
16	1492 Moving to Work				
	Demonstration				
17	1495.1 Relocation Costs	5			
10	1400 70 1	1			
18	1499 Development				
10	Activities 1501 Collaterization or				
19					
20	Debt Service				
	1502 Contingency Amount of Annual	1			
21	Grant: (sum of lines 2 –				
	20)				
22	Amount of line 21				
22	Related to LBP				
	Activities				

I	23	Amount of line 21		
		Related to Section 504 compliance		
ŀ	24	Amount of line 21		
		Related to Security –		
L		Soft Costs		
	25	Amount of Line 21		
		Related to Security – Hard		
L		Costs		
		Amount of line 21 Related		
I		to Energy Conservation		
ı		Measures		

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

I UI V II.	Duppor	ing rages					
PHA Name:		<b>Grant Type and Number</b>				Federal FY o	of Grant:
		Capital Fund Program Gra					
		Replacement Housing Fac	tor Grant No:				
Developme	General	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Ac	tual Cost
nt Number	Description						
	of Major						
Name/HA-							
Wide	Categories						
Activities							
				Original	Revised	Funds	Funds
						Obligated	Expended

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

**Part III: Implementation Schedule** 

PHA Name:		Capit	al Fund	and Number d Program No				Federal FY of Grant:	
Developme nt Number		All Fund Obliga		t Housing Fac		Funds Exper	nded	Reasons for Revised Target	
Name/HA- Wide Activities	Wide			nding Date) (Q			Quarter Ending Date)		
	Original	Revised		Actual	Original	Revised	Actual		
1									

Capital	Fund Pr	ogram F	ive-Year	Action 1	Plan	
Part I: S	Summary	y				
PHA Name	PHA Name			Original 5-Year Plan		
				Revision No	0:	
Developme	Year 1	Work	Work	Work	Work	
nt		Statement	Statement	Statement	Statement	
Number/Na		for Year 2	for Year 3	for Year 4	for Year 5	
me/HA-		FFY Grant:	FFY Grant:	FFY Grant:	FFY Grant:	
Wide		PHA FY:	PHA FY:	PHA FY:	PHA FY:	
	Annual					
	Statement					

CFP Funds Listed for 5-			
year			
planning			
Replaceme			
nt Housing			
Factor			
Funds			

Capital	Fund Pr	ogram F	ive-Year	Action 1	Plan			
Part II:	Support	ing Page	s—Worl	k Activiti	ies			
Activities	Activit	ties for Year	:	Activ	ities for Year	r:		
for								
Year 1		FFY Grant:			FFY Grant:			
		PHA FY:		PHA FY:				
	Developme	Major	Estimat	Developme	Major	Estimated		
	nt	Work		nt	Work	Cost		
	Name/Nu	Categories	ed Cost	Name/Nu	Categories			
	mber			mber				
See								
Annual								
Statement								

Total CFP Estimated Cost			\$	\$

Capital Fund Program Five-Year Action Plan						
Part II:	Support	ing Page	es—Worl	k Activiti	ies	
Activities for Year :			Activities for Year:			
FFY Grant:				FFY Grant:		
	PHA FY:			PHA FY:		
Developme	-	Estimated	Developme	Major	Estimated	
nt	Work	Cost	nt	Work	Cost	
Name/Nu	Categories			Categories		
mber			mber			
Total	CFP	\$			\$	
	_	Ψ			Ψ	
Estimat	ted Cost					

actor

Status of Work

r actor (C	TI/CII KIII/I aiti		.1 <u>y</u>		
PHA Name:	Grant Type a	and Number			Federal FY
	Capital Fund	Program Gran	nt No:		of Grant:
	Replacement	Housing Fact	or Grant No:		
Original Ar	nnual Statement Reserve	for Disaste	rs/ Emerger	icies Revised	l Annual Statement
revision no	<b>):</b> )				
Performano	ce and Evaluation Repor	t for Period	Ending:	Final Pe	rformance and
Evaluation	•		8		
	Summary by	Total Estir	nated Cost	To	tal Actual Cost
	Development Account				
	20,010 111010 111010 11101	Original	Revised	Obligated	Expended
1	Total non-CFP Funds			o wangawa	P
	1406 Operations				
	1408 Management				
	Improvements				
	1410 Administration				
	1411 Audit				
	1415 Liquidated				
Ü	Damages				
7	1430 Fees and Costs				
	1440 Site Acquisition				
	1450 Site Improvement				
	1460 Dwelling				
	Structures				
11	1465.1 Dwelling				
	Equipment—Nonexpen				
	dable				
12	1470 Nondwelling				
	Structures				
13	1475 Nondwelling				
	Equipment				
14	1485 Demolition				
	1490 Replacement				
	Reserve				
16	1492 Moving to Work				
	Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development				
	Activities				
19	1501 Collaterization or				
	Debt Service				
	1502 Contingency				
21	Amount of Annual				
	Grant: (sum of lines 2 –				
	20)				
22	Amount of line 21				
	Related to LBP				
	Activities				

I	23	Amount of line 21		
		Related to Section 504 compliance		
ŀ	24	Amount of line 21		
		Related to Security –		
L		Soft Costs		
	25	Amount of Line 21		
		Related to Security – Hard		
L		Costs		
		Amount of line 21 Related		
I		to Energy Conservation		
ı		Measures		

I UI V II.	Duppor	ing rages					
PHA Name:		<b>Grant Type and Number</b>				Federal FY o	of Grant:
		Capital Fund Program Gra					
		Replacement Housing Fac	tor Grant No:				
Developme	General	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	
nt Number	Description						
	of Major						
Name/HA-							
Wide	Categories						
Activities							
				Original	Revised	Funds	Funds
						Obligated	Expended

PHA Name:		Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:				Federal FY of Grant:		
Developme nt Number		All Fund Obligated				All Funds Expended		
Name/HA- Wide Activities	(Quarter Ending Date)			(Quarter Ending Date)			Target Dates	
	Original	Rev	vised	Actual	Original	Revised	Actual	

Capital	Capital Fund Program Five-Year Action Plan						
Part I: S	Part I: Summary						
PHA Name				Original 5-			
				Revision No	No:		
Developme	Year 1	Work	Work	Work	Work		
nt		Statement	Statement	Statement	Statement		
Number/Na		for Year 2	for Year 3	for Year 4	for Year 5		
me/HA-		FFY Grant:	FFY Grant:	FFY Grant:	FFY Grant:		
Wide		PHA FY:	PHA FY:	PHA FY:	PHA FY:		
	Annual Statement						

CFP Funds			
Listed for 5-			
year			
planning			
Replaceme			
nt Housing			
Factor			
Funds			

Capital	Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities							
Activities	Activit	ties for Year	:	Activ	ities for Year	r:	
for							
Year 1		FFY Grant:			FFY Grant:		
		PHA FY:			PHA FY:		
	Developme	Major	Estimat	Developme	Major	Estimated	
	nt	Work		nt	Work	Cost	
	Name/Nu	Categories	ed Cost	Name/Nu	Categories		
	mber			mber			
See							
Annual							
Statement							

Total C	FP Estima	ted Cost	\$	\$

Capital	Capital Fund Program Five-Year Action Plan					
Part II:	Support	ing Page	es—Worl	k Activiti	ies	
Activi	ties for Year	:	Activities for Year:			
FFY Grant:				FFY Grant:		
	PHA FY:			PHA FY:		
Developme	-	Estimated	Developme	Major	Estimated	
nt	Work	Cost	nt	Work	Cost	
Name/Nu	Categories			Categories		
mber			mber			
Total	CFP	\$			\$	
	_	Ψ			Ψ	
Estimat	ted Cost					

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Status of Work

r actor (C	TI/CII KIII/I aiti		.1 <u>y</u>		
PHA Name:	Grant Type a	and Number			Federal FY
	Capital Fund	Program Grai	nt No:		of Grant:
	Replacement	Housing Fact	or Grant No:		
Original Ar	nnual Statement Reserve	for Disaste	rs/ Emerger	icies Revised	l Annual Statement
revision no	<b>):</b> )				
Performano	ce and Evaluation Repor	t for Period	Ending:	Final Pe	rformance and
Evaluation	•		8		
	Summary by	Total Estir	nated Cost	To	tal Actual Cost
	Development Account				
	20,010 111010 111010 11101	Original	Revised	Obligated	Expended
1	Total non-CFP Funds			o see garee	P
	1406 Operations				
	1408 Management				
	Improvements				
	1410 Administration				
	1411 Audit				
	1415 Liquidated				
Ü	Damages				
7	1430 Fees and Costs				
	1440 Site Acquisition				
	1450 Site Improvement				
	1460 Dwelling				
	Structures				
11	1465.1 Dwelling				
	Equipment—Nonexpen				
	dable				
12	1470 Nondwelling				
	Structures				
13	1475 Nondwelling				
	Equipment				
14	1485 Demolition				
	1490 Replacement				
	Reserve				
16	1492 Moving to Work				
	Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development				
	Activities				
19	1501 Collaterization or				
	Debt Service				
	1502 Contingency				
21	Amount of Annual				
	Grant: (sum of lines 2 –				
	20)				
22	Amount of line 21				
	Related to LBP				
	Activities				

I	23	Amount of line 21		
		Related to Section 504 compliance		
ŀ	24	Amount of line 21		
		Related to Security –		
L		Soft Costs		
	25	Amount of Line 21		
		Related to Security – Hard		
L		Costs		
		Amount of line 21 Related		
I		to Energy Conservation		
ı		Measures		

I UI V II.	Duppor	ing rages					
PHA Name:		<b>Grant Type and Number</b>				Federal FY o	of Grant:
		Capital Fund Program Gra					
		Replacement Housing Fac	tor Grant No:				
Developme	General	Dev. Acct No.	Quantity	ntity Total Estimated Cost		Total Actual Cost	
nt Number	Description						
	of Major						
Name/HA-							
Wide	Categories						
Activities							
				Original	Revised	Funds	Funds
						Obligated	Expended

PHA Name:	me: Grant Type and Number Capital Fund Program No Replacement Housing Fa							Federal FY of Grant:
Developme nt Number		All Fund Obligated			All Funds Expended (Quarter Ending Date)			Reasons for Revised
Name/HA- Wide Activities	Wide			Target Dates				
	Original	Revised		Actual	Original	Revised	Actual	
1								

Capital	Capital Fund Program Five-Year Action Plan						
Part I: Summary							
PHA Name				Original 5-			
				Revision No	0:		
Developme	Year 1	Work	Work	Work	Work		
nt		Statement	Statement	Statement	Statement		
Number/Na		for Year 2	for Year 3	for Year 4	for Year 5		
me/HA-		FFY Grant:	FFY Grant:	FFY Grant:	FFY Grant:		
Wide		PHA FY:	PHA FY:	PHA FY:	PHA FY:		
	Annual						
	Statement						

CFP Funds Listed for 5-			
year			
planning			
Replaceme			
nt Housing			
Factor			
Funds			

Capital Fund Program Five-Year Action Plan							
Part II: Supporting Pages—Work Activities							
Activities	Activities for Year :			Activ	Activities for Year:		
for							
Year 1		FFY Grant:			FFY Grant:		
		PHA FY:			PHA FY:		
	Developme	Major	Estimat	Developme	Major	Estimated	
	nt	Work		nt	Work	Cost	
	Name/Nu	Categories	ed Cost	Name/Nu	Categories		
	mber			mber			
See							
Annual							
Statement							

Total C	FP Estima	ted Cost	\$	\$

Capital Fund Program Five-Year Action Plan					
Part II:	Support	ing Page	es—Worl	k Activiti	ies
Activi	ties for Year	:	Activ	ities for Year	r:
	FFY Grant:			FFY Grant:	
	PHA FY:			PHA FY:	
Developme	-	Estimated	Developme	Major	Estimated
nt	Work	Cost	nt	Work	Cost
Name/Nu	Categories			Categories	
mber			mber		
Total	CFP	\$			\$
	_	Ψ			Ψ
Estimat	ted Cost				

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Status of Work

PHA Name:	Grant Type	and Number			Federal FY
		d Program Grai	nt No:		of Grant:
	Replacemen	t Housing Fact	or Grant No:		
Original Aı	nnual Statement Reserv	e for Disaste	rs/ Emerger	icies Revised	l Annual Statement
(revision no	<b>)</b> : )				
Performano	ce and Evaluation Repo	rt for Period	Ending:	Final Pe	rformance and
Evaluation					
Line No.	Summary by	Total Estir	nated Cost	Tot	tal Actual Cost
	<b>Development Account</b>				
		Original	Revised	Obligated	Expended
	Total non-CFP Funds				
	1406 Operations	1			
	1408 Management				
	Improvements				
	1410 Administration				
	1411 Audit 1415 Liquidated				
	<u> </u>				
	Damages 1430 Fees and Costs				
	1440 Site Acquisition				
	1450 Site Improvement				
	1460 Dwelling	1			
10	Structures				
11	1465.1 Dwelling				
- 1	Equipment—Nonexpen				
	dable				
12	1470 Nondwelling				
	Structures				
13	1475 Nondwelling				
	Equipment				
	1485 Demolition				
15	1490 Replacement				
	Reserve				
16	1492 Moving to Work				
	Demonstration				
17	1495.1 Relocation Costs	5			
10	1400 70 1	1			
18	1499 Development				
10	Activities 1501 Collaterization or				
19					
20	Debt Service				
	1502 Contingency Amount of Annual	1			
21	Grant: (sum of lines 2 –				
	20)				
22	Amount of line 21				
22	Related to LBP				
	Activities				

I	23	Amount of line 21		
		Related to Section 504 compliance		
ŀ	24	Amount of line 21		
		Related to Security –		
L		Soft Costs		
	25	Amount of Line 21		
		Related to Security – Hard		
L		Costs		
		Amount of line 21 Related		
I		to Energy Conservation		
ı		Measures		

I UI V II.	Duppor	ing rages					
PHA Name:		<b>Grant Type and Number</b>				Federal FY o	of Grant:
		Capital Fund Program Gra					
		Replacement Housing Fac	tor Grant No:				
Developme	General	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	
nt Number	Description						
	of Major						
Name/HA-							
Wide	Categories						
Activities							
				Original	Revised	Funds	Funds
						Obligated	Expended

PHA Name:	Grant Type and Number Capital Fund Program No: Replacement Housing Factor							Federal FY of Grant:
Developme nt Number	All Fund Obligated				All Funds Expended			Reasons for Revised
Name/HA- Wide Activities		(Quarter Ending Date)			(Quarter Ending Date)			Target Dates
	Original	Revised		Actual	Original	Revised	Actual	
1								

Capital	Capital Fund Program Five-Year Action Plan						
Part I: Summary							
PHA Name				Original 5-			
				Revision No	0:		
Developme	Year 1	Work	Work	Work	Work		
nt		Statement	Statement	Statement	Statement		
Number/Na		for Year 2	for Year 3	for Year 4	for Year 5		
me/HA-		FFY Grant:	FFY Grant:	FFY Grant:	FFY Grant:		
Wide		PHA FY:	PHA FY:	PHA FY:	PHA FY:		
	Annual						
	Statement						

CFP Funds Listed for 5-			
year			
planning			
Replaceme			
nt Housing			
Factor			
Funds			

Capital Fund Program Five-Year Action Plan							
Part II: Supporting Pages—Work Activities							
Activities	Activities for Year :			Activities for Year:			
for							
Year 1		FFY Grant:			FFY Grant:		
		PHA FY:			PHA FY:		
	Developme	Major	Estimat	Developme	Major	Estimated	
	nt	Work		nt	Work	Cost	
	Name/Nu	Categories	ed Cost	Name/Nu	Categories		
	mber			mber			
See							
Annual							
Statement							

Total C	FP Estima	ted Cost	\$	\$

Capital Fund Program Five-Year Action Plan						
Part II:	Support	ing Page	es—Worl	k Activiti	ies	
Activi	ties for Year	:	Activities for Year:			
	FFY Grant:			FFY Grant:		
	PHA FY:			PHA FY:		
Developme	-	Estimated	Developme	Major	Estimated	
nt	Work	Cost	nt	Work	Cost	
Name/Nu	Categories			Categories		
mber			mber			
Total	CFP	\$			\$	
	_	Ψ			Ψ	
Estimat	ted Cost					

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Status of Work

PHA Name:	Grant Type	and Number			Federal FY
		d Program Grai	nt No:		of Grant:
	Replacemen	t Housing Fact	or Grant No:		
Original Aı	nnual Statement Reserv	e for Disaste	rs/ Emerger	icies Revised	l Annual Statement
(revision no	<b>)</b> : )				
Performano	ce and Evaluation Repo	rt for Period	l Ending:	Final Pe	rformance and
Evaluation					
Line No.	Summary by	Total Estir	mated Cost	Tot	tal Actual Cost
	<b>Development Account</b>				
		Original	Revised	Obligated	Expended
	Total non-CFP Funds				
	1406 Operations	1			
	1408 Management				
	Improvements				
	1410 Administration				
	1411 Audit 1415 Liquidated				
	<u> </u>				
	Damages 1430 Fees and Costs				
	1440 Site Acquisition				
	1450 Site Improvement				
	1460 Dwelling	1			
10	Structures				
11	1465.1 Dwelling				
- 1	Equipment—Nonexpen				
	dable				
12	1470 Nondwelling				
	Structures				
13	1475 Nondwelling				
	Equipment				
	1485 Demolition				
15	1490 Replacement				
	Reserve				
16	1492 Moving to Work				
	Demonstration				
17	1495.1 Relocation Costs	5			
10	1400 70 1	1			
18	1499 Development				
10	Activities 1501 Collaterization or				
19					
20	Debt Service				
	1502 Contingency Amount of Annual	1			
21	Grant: (sum of lines 2 –				
	20)				
22	Amount of line 21				
22	Related to LBP				
	Activities				

I	23	Amount of line 21		
		Related to Section 504 compliance		
ŀ	24	Amount of line 21		
		Related to Security –		
L		Soft Costs		
	25	Amount of Line 21		
		Related to Security – Hard		
L		Costs		
		Amount of line 21 Related		
I		to Energy Conservation		
ı		Measures		

I UI V II.	Duppor	ing rages					
PHA Name:		<b>Grant Type and Number</b>				Federal FY o	of Grant:
Capital Fund Program Grant No:							
		Replacement Housing Fac	tor Grant No:				
Developme	General	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Actual Cost	
nt Number	Description						
	of Major						
Name/HA-							
Wide	Categories						
Activities							
				Original	Revised	Funds	Funds
						Obligated	Expended

PHA Name:	Capital Fund Program No: Replacement Housing Factor No:						Federal FY of Grant:	
Developme nt Number		All Fund Obligated				Funds Exper	nded	Reasons for Revised Target
Name/HA- Wide Activities		(Quarter Ending Date)			(Quarter Ending Date)			Dates
	Original	Revised		Actual	Original	Revised	Actual	
1								

Capital	Capital Fund Program Five-Year Action Plan								
Part I: Summary									
PHA Name				Original 5-					
				Revision No	0:				
Developme	Year 1	Work	Work	Work	Work				
nt		Statement	Statement	Statement	Statement				
Number/Na		for Year 2	for Year 3	for Year 4	for Year 5				
me/HA-		FFY Grant:	FFY Grant:	FFY Grant:	FFY Grant:				
Wide		PHA FY:	PHA FY:	PHA FY:	PHA FY:				
	Annual								
	Statement								

CFP Funds Listed for 5-			
year			
planning			
Replaceme			
nt Housing			
Factor			
Funds			

Capital Fund Program Five-Year Action Plan								
Part II: Supporting Pages—Work Activities								
Activities	Activit	ties for Year	:	Activities for Year:				
for								
Year 1		FFY Grant:			FFY Grant:			
		PHA FY:			PHA FY:			
	Developme	Major	Estimat	Developme	Major	Estimated		
	nt	Work		nt	Work	Cost		
	Name/Nu	Categories	ed Cost	Name/Nu	Categories			
	mber			mber				
See								
Annual								
Statement								

Total C	FP Estima	ted Cost	\$	\$

Capital	Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities							
Activi	ties for Year	:	Activ	ities for Year	r:		
	FFY Grant:			FFY Grant:			
	PHA FY:			PHA FY:			
Developme	-	Estimated	Developme	Major	Estimated		
nt	Work	Cost	nt	Work	Cost		
Name/Nu	Categories			Categories			
mber			mber				
Total	CFP	\$			\$		
	_	Ψ			Ψ		
Estimat	ted Cost						

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Status of Work

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

r actor (C	TI/CII KIII/I aiti		.1 <u>y</u>		
PHA Name:	Grant Type a	and Number			Federal FY
	Capital Fund	Program Grai	nt No:		of Grant:
	Replacement	Housing Fact	or Grant No:		
Original Ar	nnual Statement Reserve	for Disaste	rs/ Emerger	icies Revised	l Annual Statement
revision no	<b>):</b> )				
Performano	ce and Evaluation Repor	t for Period	Ending:	Final Pe	rformance and
Evaluation	•		8		
	Summary by	Total Estir	nated Cost	To	tal Actual Cost
	Development Account				
	20,010 111010 111010 11101	Original	Revised	Obligated	Expended
1	Total non-CFP Funds			o wangawa	P
	1406 Operations				
	1408 Management				
	Improvements				
	1410 Administration				
	1411 Audit				
	1415 Liquidated				
Ü	Damages				
7	1430 Fees and Costs				
	1440 Site Acquisition				
	1450 Site Improvement				
	1460 Dwelling				
	Structures				
11	1465.1 Dwelling				
	Equipment—Nonexpen				
	dable				
12	1470 Nondwelling				
	Structures				
13	1475 Nondwelling				
	Equipment				
14	1485 Demolition				
	1490 Replacement				
	Reserve				
16	1492 Moving to Work				
	Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development				
	Activities				
19	1501 Collaterization or				
	Debt Service				
	1502 Contingency				
21	Amount of Annual				
	Grant: (sum of lines 2 –				
	20)				
22	Amount of line 21				
	Related to LBP				
	Activities				

I	23	Amount of line 21		
		Related to Section 504 compliance		
ŀ	24	Amount of line 21		
		Related to Security –		
L		Soft Costs		
	25	Amount of Line 21		
		Related to Security – Hard		
L		Costs		
		Amount of line 21 Related		
I		to Energy Conservation		
ı		Measures		

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

Part II: Supporting Pages

I UI V II.	Duppor	ing rages					
PHA Name:		<b>Grant Type and Number</b>				Federal FY o	of Grant:
		Capital Fund Program Gra					
		Replacement Housing Fac	tor Grant No:				
Developme	General	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Actual Cost	
nt Number	Description						
	of Major						
Name/HA-							
Wide	Categories						
Activities							
				Original	Revised	Funds	Funds
						Obligated	Expended

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

**Part III: Implementation Schedule** 

PHA Name:			~	d Program No				Federal FY of Grant:
Developme nt Number		Replacement Housing Fac All Fund Obligated				All Funds Expended		
Name/HA- Wide Activities		(Quarter Ending Date)			(Quarter Ending Date)			Target Dates
	Original	Rev	vised	Actual	Original	Revised	Actual	

Capital	Capital Fund Program Five-Year Action Plan								
Part I: Summary									
PHA Name				Original 5-					
				Revision No	0:				
Developme	Year 1	Work	Work	Work	Work				
nt		Statement	Statement	Statement	Statement				
Number/Na		for Year 2	for Year 3	for Year 4	for Year 5				
me/HA-		FFY Grant:	FFY Grant:	FFY Grant:	FFY Grant:				
Wide		PHA FY:	PHA FY:	PHA FY:	PHA FY:				
	Annual Statement								

CFP Funds			
Listed for 5-			
year			
planning			
Replaceme			
nt Housing			
Factor			
Funds			

Capital Fund Program Five-Year Action Plan								
Part II: Supporting Pages—Work Activities								
Activities	Activities for Year :			Activities for Year:				
for								
Year 1		FFY Grant:			FFY Grant:			
		PHA FY:			PHA FY:			
	Developme	Major	Estimat	Developme	Major	Estimated		
	nt	Work		nt	Work	Cost		
	Name/Nu	Categories	ed Cost	Name/Nu	Categories			
	mber			mber				
See								
Annual								
Statement								

Total C	FP Estima	ted Cost	\$	\$

Capital	Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities							
Activi	ties for Year	:	Activ	ities for Year	r:		
	FFY Grant:			FFY Grant:			
	PHA FY:			PHA FY:			
Developme	-	Estimated	Developme	Major	Estimated		
nt	Work	Cost	nt	Work	Cost		
Name/Nu	Categories			Categories			
mber			mber				
Total	CFP	\$			\$		
	_	Ψ			Ψ		
Estimat	ted Cost						

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Status of Work