### **PHA Plans**

# Streamlined Annual Version

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 (exp. 08/31/2009)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal Year: 2008
PHA Name:
Housing Authority of the City of Redding

**CA106** 

**Adopted:** 

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-46 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

Streamlined Annual Plan for Fiscal

PHA Name: Housing Authority of the City of Redding Year 2008 HA Code: CA106

#### **Streamlined Annual PHA Plan Agency Identification**

PHA Name: Housing Authority of the City of Redding PHA Number: CA106							
PHA Fiscal Year Beginn	ing: 07/2	2008					
PHA Programs Administ  Public Housing and Section Number of public housing units: Number of S8 units:  PHA Consortia: (check	on 8 Numbe	1,528	er of public housing uni	ts:			
Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program			
Participating PHA 1:							
Participating PHA 2:							
Participating PHA 3:							
PHA Plan Contact Inform Name: Lydia Buckley TDD: 530.225.4368	nation:	_	ne: 530.225.4427 il (if available):				
Public Access to Inform Information regarding any a contacting: (select all that a PHA's main administrations)	ctivities (	·	n can be obtaine	•			
Display Locations For P	HA Plar	ns and Supporti	ng Documents				
The PHA Plan revised policies available for public review and If yes, select all that apply:  ☐ Main administrative offi ☐ PHA development man	l inspection	on.	ing attachments) a No.	are			

Year 200 HA Code	
	Main administrative office of the local, county or State government Public library □ PHA website □ Other (list below)
PHA F	Plan Supporting Documents are available for inspection at: (select all that apply)  Main business office of the PHA   PHA development management offices  Other (list below)
	Streamlined Annual PHA Plan
	Fiscal Year 2008 [24 CFR Part 903.12(c)]
	Table of Contents [24 CFR 903.7(r)]
	e a table of contents for the Plan, including applicable additional requirements, and a list of ting documents available for public inspection.
_	
A.	PHA PLAN COMPONENTS
	1. Site-Based Waiting List Policies5
903.7(b □	2. Capital Improvement Needs
903.7(g	3. Section 8(y) Homeownership
	7 k)(1)(i) Statement of Homeownership Programs
	4. Project-Based Voucher Programs
	<ul><li> 8</li><li>5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan 9</li></ul>
₽	6. Supporting Documents Available for Review
1	7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report

PHA Name: Housing Authority of the City of Redding

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Streamlined Annual Plan for Fiscal

PHA Name: Housing Authority of the City of Redding

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

Form HUD-50076, PHA Certifications of Compliance with the PHA Plans and Related Regulations. Board Resolution to Accompany the Streamlined Annual Plan identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace:

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

Form SF-LLL &SF-LLLa, Disclosure of Lobbying Activities.

# 1. Site Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

#### A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

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

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### 2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

PHA Name: Housing Authority of the City of Redding Streamlined Annual Plan for Fiscal Year 2008 HA Code: CA106 Α. **Capital Fund Program** 1. ☐ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B. 2. ☐ Yes ☐ No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.). В. **HOPE VI and Public Housing Development and Replacement Activities** (Non-Capital Fund) Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement. 1. ☐ Yes ☐ No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary). 1. Status of HOPE VI revitalization grant(s):

HOPE VI Revitalization Grant Status
a. Development Name:
b. Development Number:
c. Status of Grant:
□Revitalization Plan under development
□Revitalization Plan submitted, pending approval
□Revitalization Plan approved
☐Activities pursuant to an approved Revitalization Plan underway
11

HA Code: CA106 3.  $\square$  Yes  $\square$  No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name(s) below: Will the PHA be engaging in any mixed-finance development activities for 4.  $\square$  Yes  $\square$  No: public housing in the Plan year? If yes, list developments or activities below: 5. \( \subseteq \text{ Yes } \subseteq \text{ No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below: 3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership **Program** (if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)] 1. □ Yes □ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(v) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.) 2. Program Description: The Housing Authority of the City of Redding administers a small homeownership program. Eligible households are either those households who are currently participating in the Family Self-Sufficiency Program or a participating household with a disabled member and homeownership is the appropriate response to a request for reasonable accommodation. a. Size of Program ☐ Yes ☐ No: Will the PHA limit the number of families participating in the Section 8 homeownership option? If the answer to the question above was yes, what is the maximum number of participants this fiscal year?25 b. PHA-established eligibility criteria ☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

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Streamlined Annual Plan for Fiscal

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If yes, list criteria: In addition to HUD's criteria, the RHA will determine the applying household's credit worthiness. For those households who have very little credit history, positive reference letters from current and previous landlords and utility companies must be provided. Reference letters must cover the 12-month period prior to the application process. The household's ration of monthly expenses to adjusted gross income shall not be more than 31 percent, except as otherwise approved by the Housing Manager. The applicant's household ratio of monthly long-term obligations to adjusted income shall not exceed 43 percent, except as otherwise approved by the Housing Manager. Additionally, the RHA will not approve any seller financing or financing that includes a balloon payment. Homes to be purchased with the Homeownership Program must be located in areas designated "residential" in the City of Redding's General Plan.

- c. What actions will the PHA undertake to implement the program this year (list)?
- 3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

The PHA has demonstrated its capacity to administer the program by (select all that apply): П Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources. Requiring that financing for purchase of a home under its Section 8 П homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards. Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below): Demonstrating that it has other relevant experience (list experience below): The RHA has developed a strong working relationship with the local chapter of Habitat for Humanity. RHA and Habitat for Humanity have in place three homeownership contracts. Staff that manages the Family Self-Sufficiency Program also manages the City of Redding's First Time Homebuyer Program.

#### 4. Use of the Project-Based Voucher Program

#### **Intent to Use Project-Based Assistance**

PHA Name: Housing Authority of the City of Redding Year 2008 HA Code: CA106	Streamlined Annual Plan for Fiscal
☐ Yes ☐ No: Does the PHA plan to "project-base" any tena vouchers in the coming year? If the answer is "no," go to the answer the following questions.	
<ol> <li>Yes □ No: Are there circumstances indicating that the prather than tenant-basing of the same amount of assistance it yes, check which circumstances apply:</li> </ol>	_
<ul> <li>□ low utilization rate for vouchers due to lack of suital access to neighborhoods outside of high poverty area other (describe below:)</li> </ul>	
2. Indicate the number of units and general location of units (e smaller areas within eligible census tracts):	.g. eligible census tracts or
5. PHA Statement of Consistency with the Conso	olidated Plan
For each applicable Consolidated Plan, make the following s as many times as necessary) only if the PHA has provided a or policy changes from its last Annual Plan submission.	
Consolidated Plan jurisdiction: <u>City of Redding</u>	
2. The PHA has taken the following steps to ensure consiste the Consolidated Plan for the jurisdiction: (select all that approximately steps).	•
☐ The PHA has based its statement of needs of families needs expressed in the Consolidated Plan/s.	on its waiting lists on the
<ul> <li>☐ The PHA has participated in any consultation process the Consolidated Plan agency in the development of the PHA has consulted with the Consolidated Plan agency development of this PHA Plan.</li> </ul>	he Consolidated Plan.
<ul> <li>□ Activities to be undertaken by the PHA in the coming y initiatives contained in the Consolidated Plan. (list below)</li> <li>□ Other: (list below)</li> </ul>	
3. The Consolidated Plan of the jurisdiction supports the PH actions and commitments: (describe below) Under the Homeless Needs section of the Consolidated Plan fleeing from domestic violence situations were identified as a permanent, affordable housing. In response, the RHA amen	n, those individuals/families population needing

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by adopting a local ranking for those victims of domestic violence who are also experiencing a housing need. Housing staff met with representatives from Shasta Women's Refuge, Legal Services of Northern California and the Resident Advisory Board to gain consensus prior to the adoption of the revision.

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

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

	List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Related Plan Component			
. ,	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans,	5 Year and Annual Plans			
<b>√</b>	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan	Streamlined Annual Plans			
<b>√</b>	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard Annual Plans			
	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
<b>√</b>	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs			
	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources			
	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies			
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and			

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Applicable	Supporting Document	Related Plan Componen
& On Display	Supporting Document	Related Flatt Componen
		Admissions Policies
	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. □ Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public housing rent determination policies, including the method for setting public housing flat rents.  □ Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
	Schedule of flat rents offered at each public housing development.  □ Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
<b>√</b>	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies.   Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
	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
	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
<b>√</b>	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
<b>√</b>	Any policies governing any Section 8 special housing types k here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Public housing grievance procedures  ☐ Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
<b>√</b>	Section 8 informal review and hearing procedures.  □ Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
•	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs

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	List of Supporting Documents Available for Review	
Applicable & On Display	Supporting Document	Related Plan Component
	CIAP grants.	Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
<b>√</b>	Policies governing any Section 8 Homeownership program (Section Appendix II of the Section 8 Administrative Plan)	Annual Plan: Homeownership
•	Public Housing Community Service Policy/Programs  □ Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
./	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
<u>√</u>	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G).  □ Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit

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	List of Supporting Documents Available for Review			
Applicable & On Display	Supporting Document	Related Plan Component		
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)		
	Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations		

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

PHA Name:	nent/Performance and Evaluation Report Grant Type and Number				Federal FY
□Original Annua	I Statement □Reserve for Disasters/ Emergencies □	Revised Annua	Statement (revision	on no:	-
□Porformanco ar	Summary by Development Account		and Evaluation Por mated Cost	Total Actu	ial Cost
LINE NO.	Summary by Development Account	Original	Revised	Obligated	Expended
4	Tatal and OFD Founds	Original	Reviseu	Obligated	Lxpended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)				
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				

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

Annual Statem	ent/Performance and Evaluation Report					
PHA Name:	Grant Type and Number				Federal FY	
_	Statement  Reserve for Disasters/ Emergencies	☐Revised Annual				
Line No.	Summary by Development Account				Actual Cost	
		Original	Revised	Obligated	Expended	
24	Amount of line 21 Related to Security – Soft Costs					

25	Amount of Line 21 Related to Security – Hard Costs		
26	Amount of line 21 Related to Energy Conservation Measures		

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

PHA Name:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Gra	ant:		
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity		nated Cost	Total Actu	ual Cost	Status of Work
				Original	Revised	Funds	Funds	

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

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

	Capita	I Fund	Program Grant I		Federal FY of Gra	ant:		
General Description of Major Work Categories	i i		Quantity			Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds	
	of Major Work	General Description of Major Work  Grant  Capita  Replac  Replac  Acct	Grant Type ar Capital Fund Replacement General Description of Major Work  Grant Type ar Capital Fund Replacement Acct No.	Grant Type and Number Capital Fund Program Grant I Replacement Housing Factor General Description of Major Work  Capital Fund Program Grant I Replacement Housing Factor Dev. Quantity Acct No.	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:  General Description of Major Work Categories  Grant Type and Number Capital Fund Program Grant No:  Replacement Housing Factor Grant No:  Quantity Total Estir	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:  General Description of Major Work Categories  Grant Type and Number Capital Fund Program Grant No:  Quantity Total Estimated Cost Acct No.	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:  General Description of Major Work Categories  Categories  Grant Type and Number Capital Fund Program Grant No:  Pederal FY of Grant No:  Total Estimated Cost Acct No.  Original Revised Funds	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:  General Description of Major Work Categories  Original Revised Funds  Federal FY of Grant:  Federal FY of Grant:  Federal FY of Grant:  Federal FY of Grant:  Original Revised Funds

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages										
PHA Name:  Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:						Federal FY of Gra	ant:			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work		
				Original	Revised	Funds	Funds			

Annual Stateme Capital Fund Pr Part III: Implem	ogram an	d Ca	apital Fu		•	nent Hous	sing Factor (CFP/CFPRHF)
PHA Name:		Cap	t Type and Note ital Fund Problems				Federal FY of Grant:
Development Number Name/HA-Wide Activities			Obligated All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	R ev is ed	Actual	Original	Revised	Actual	

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

Part III: Implem PHA Name:		<b>Gran</b> Cap	t Type and N ital Fund Pro lacement Ho	Federal FY of Grant:			
Development Number Name/HA-Wide Activities	All Fun (Quarter		_	All Funds Expended (Quarter Ending Date)			Reasons for Revised Target  Dates
	Original	R ev is ed	Actual	Original	Revised	Actual	

Capital Fund F Part I: Summa		ive-Year Action Pla	n		
PHA Name				□Original 5-Year Plan □Revision No:	
Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
na-wide		FFY Grant: PHA FY:	FFY Grant: PHA FY:	FFY Grant: PHA FY:	FFY Grant: PHA FY:
CFP Funds Listed for 5-year planning					
Replacement					

8.	Capital	<b>Fund</b>	<b>Program</b>	Five-Year	<b>Action</b>	Plan
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Housing Factor Funds										
Conital Frond I	D	va Vaan Aatian	Diam							
Capital Fund Program Five-Year Action Plan										
Part II: Suppo	rting Pages	-Work Activiti	es							

Activities for	Acti	vities for Year : FFY Grant:	_	Activities for Year: FFY Grant:				
Year 1		PHA FY:		PHA FY:				
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost		
See								
Annual								
Statemen								
	Total CFP Estimated	Cost	\$			\$		

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Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities									
A	ctivities for Year : FFY Grant: PHA FY:	_	Ac	tivities for Year: _ FFY Grant: PHA FY:	_				
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost				

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Total CFP Esti	mated Cost	\$	\$