## **PHA Plans**

### Streamlined Annual Version

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

OMB No. 2577-0226

 $(\exp. 08/31/2009)$ 

Housing

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: Columbia County Housing** 

**Authority** 

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue. PHA Name: Columbia County, PA HA Code: PA083

## Streamlined Annual PHA Plan Agency Identification

**PHA Name:** Columbia County Housing Authority **PHA Number:** PA26083 PHA Fiscal Year Beginning: (mm/yyyy) 01/2008 **PHA Programs Administered: ∇**Public Housing and Section 8 Section 8 Only **Public Housing Only** Number of public housing units: 70 Number of S8 units: Number of public housing units: Number of S8 units: 413 PHA Consortia: (check box if submitting a joint PHA Plan and complete table) **Participating PHAs** PHA Program(s) Included in **Programs Not in** # of Units Code the Consortium the Consortium **Each Program** Participating PHA 1: Participating PHA 2: **Participating PHA 3: PHA Plan Contact Information:** Name: James Thomas Phone: 570-784-9373 Email (if available): jane@columbiacountyhousing.com TDD: 7-1-1 **Public Access to Information** Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) PHA's main administrative office  $\mathbb{X}$ PHA's development management offices **Display Locations For PHA Plans and Supporting Documents** The PHA Plan revised policies or program changes (including attachments) are available for public X Yes review and inspection. If yes, select all that apply: Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below) PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)

PHA Name: Columbia County, PA HA Code: PA083

### Streamlined Annual PHA Plan

### Fiscal Year 2008

[24 CFR Part 903.12(c)]

### **Table of Contents**

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

Α.	PHA	PI.	ΔN	CON	<b>IPON</b>	<b>IENTS</b>

$\boxtimes$	1. Site-Based Waiting List Policies 903.7(b)(2) Policies on Eligibility, Selection, and Admissions
$\boxtimes$	2. Capital Improvement Needs 903.7(g) Statement of Capital Improvements Needed
	3. Section 8(y) Homeownership 903.7(k)(1)(i) Statement of Homeownership Programs
$\boxtimes$	4. Project-Based Voucher Programs
$\boxtimes$	5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has
	changed any policies, programs, or plan components from its last Annual Plan.
$\boxtimes$	6. Supporting Documents Available for Review
$\boxtimes$	7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual
	Statement/Performance and Evaluation Report
$\boxtimes$	8. Capital Fund Program 5-Year Action Plan

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

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

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

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

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

Form SF-LLL &SF-LLLa, <u>Disclosure of Lobbying Activities</u>.

PHA Name: Columbia County, PA HA Code: PA083

### 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	Lists			
Development Information: (Name, number, ocation)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics
2. What is the none time?	umber of site b	pased waiting list develo	opments to which famil	lies may apply at
3. How many u based waiting	-	an applicant turn down	before being removed	from the site-
any court ord and describe	er or settlemen	the subject of any pend t agreement? If yes, de te-based waiting list wi	escribe the order, agree	ment or complaint

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of th

e i	following questions; if not, skip to next component.
1.	How many site-based waiting lists will the PHA operate in the coming year?
2.	Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  If yes, how many lists?
3.	Yes No: May families be on more than one list simultaneously If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the sitebased waiting lists (select all that apply)? PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below) 2. Capital Improvement Needs [24 CFR Part 903.12 (c), 903.7 (g)] Exemptions: Section 8 only PHAs are not required to complete this component. Α. **Capital Fund Program** 1. X Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B. 2.  $\square$  Yes  $\bowtie$  No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.). B. **HOPE VI and Public Housing Development and Replacement Activities (Non-Capital** Fund) Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement. 1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary). 2. Status of HOPE VI revitalization grant(s):

PHA Name:

HA Code:

Columbia County, PA

PA083

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Streamlined Annual Plan for Fiscal Year 2008

PHA Name: Columbia County, PA HA Code: PA083

	HOPE VI Revitalization Grant Status
a. Development Name	
b. Development Num	ber:
Revitalizat	ion Plan under development ion Plan submitted, pending approval ion Plan approved oursuant to an approved Revitalization Plan underway
3. Yes No:	Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?  If yes, list development name(s) below:
4. ☐ Yes ⊠ No:	Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5. ☐ Yes ⊠ No: Y	Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:
	ant Based AssistanceSection 8(y) Homeownership Program
(if applicable) [24 CF	FR Part 903.12(c), 903.7(k)(1)(i)]
1. ☐ Yes ⊠ No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)
2. Program Descripti	ion:
a. Size of Program  Yes No:	Will the PHA limit the number of families participating in the Section 8 homeownership option?
	If the answer to the question above was yes, what is the maximum number of participants this fiscal year?
b. PHA-established e	eligibility criteria Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:
c. What actions will	the PHA undertake to implement the program this year (list)?

PHA Name: Columbia County, PA HA Code: PA083

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:
The PHA has demonstrated its capacity to administer the program by (select all that apply):  Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):  Demonstrating that it has other relevant experience (list experience below):
Demonstrating that it has other relevant experience (list experience below).
4. Use of the Project-Based Voucher Program
Intent to Use Project-Based Assistance
Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.
1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
low utilization rate for vouchers due to lack of suitable rental units access to neighborhoods outside of high poverty areas other (describe below:)
Vouchers will support housing for a special needs population, with a priority on victims of domestic violence.
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts): Scott Township: Census Tract 508 Block 1030
5. PHA Statement of Consistency with the Consolidated Plan [24 CFR Part 903.15]
For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.
1. Consolidated Plan jurisdiction: Commonwealth of Pennsylvania

	PHA has taken the following steps to ensure consistency of this PHA Plan with the
Con	solidated Plan for the jurisdiction: (select all that apply)
	The PHA has based its statement of needs of families on its waiting lists on the needs
	expressed in the Consolidated Plan/s.
	The PHA has participated in any consultation process organized and offered by the
	Consolidated Plan agency in the development of the Consolidated Plan.
$\boxtimes$	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)
	Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and tments: (describe below)

A state priority in the Consolidated Plan is to target housing assistance to families below 50% of median income.

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

PHA Name: Columbia County, PA HA Code: PA083

## <u>6. Supporting Documents Available for Review for Streamlined Annual PHA Plans</u>

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

	List of Supporting Documents Available for Review	
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;	5 Year and Annual Plans
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan	Streamlined Annual Plans
X	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing.   Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents.  Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development.  Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies.  Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

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Columbia County, PA PA083 PHA Name:

HA Code:

A 20	List of Supporting Documents Available for Review	D14 159 C
Applicable & On Display	Supporting Document	Related Plan Component
•		Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any policies governing any Section 8 special housing types  Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
71	Public housing grievance procedures	Annual Plan: Grievance
X	Check here if included in the public housing A & O Policy	Procedures
X	Section 8 informal review and hearing procedures.  Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
v	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance	Annual Plan: Capital Needs
X	and Evaluation Report for any active grant year.  Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP	Annual Plan: Capital Needs
N/A	grants.	-
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
N/A	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs  ☐ Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
X	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G).  ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
N/A	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

# 8. Capital Fund Program Five-Year Action Plan

County Housing Authority   County Hery Grant: 2010   County H	Capital Fund Program Five-Year Acti Part I: Summary	rogram Fiv 'y	e-Year Action Plan			
Nork Statement   Year 1   Work Statement   Year 2   For Year 3   For Year 4   For Year 5   For Year 5   For Year 5   For Year 5   For Year 6   For Year 7   For Year 7   For Year 7   For Year 7   For Year 9   For	PHA Name: Colun	nbia County F	Iousing Authority		Original 5-Year Plan	
FFY Grant: 2019   FFY Grant: 2010   FFY Grant: 2011   FFY Grant:	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
Statement   Statement   Statement   Statement   Statement   Statement   10,000   80,000   20,000       A-wide				FFY Grant: 2010 PHA FY:	FFY Grant: 2011 PHA FY:	FFY Grant: 2012 PHA FY:
83-1       10,000       20,000         83-4       70,000       80,000       50,000         A-wide       100,000       100,000       100,000       100,000       100,000         ear       100,000       100,000       100,000       100,000       100,000       100,000         ig       ement       ig       ig <t< td=""><td></td><td>Annual Statement</td><td></td><td></td><td></td><td></td></t<>		Annual Statement				
83.4       mode       80,000       80,000       50,000         A-wide       mode       100,000<	83-1		10,000		20,000	46,000
83-4       70,000       80,000       50,000         A-wide       10,000       10,000         ands Listed       100,000       100,000       100,000         ig       ement         ement       ement         ig Factor       100,000						
A-wide       10,000       100,000	83-4		70,000	80,000	50,000	34,000
ands Listed	HA-wide				10 000	
ands Listed ear 100,000 100,000 100,000 100,000 ement ement egg Factor						
ands Listed         100,000         100,000         100,000         100,000           ig         ement         ement         ement         ement           ig Factor         ement         ement         ement         ement						
ands Listed ear 100,000 100,000 100,000 100,000 100,000 ear light ear and light ear and light ear and light earliest ement agreement agreement agreement earliest ear						
ands Listed         100,000         100,000         100,000         100,000           ig         ement         ement         ement         ement						
Replacement Housing Factor Funds	CFP Funds Listed for 5-year planning	100,000	100,000	100,000	100,000	100,000
ReplacementHousing FactorFunds						
	Replacement Housing Factor Funds					

# 8. Capital Fund Program Five-Year Action Plan

Capital Ful Part II: Sup	Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities	ear Action Plan Vork Activities				
Activities for Year 1	Acti	Activities for Year: 2 FFY Grant: 2009 PHA FY:		Activ F	Activities for Year: 3FFY Grant: 2010PHA FY:	
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See		D			D	
Annual						
Statement						
	83-1	Screen doors	10,000	83-4	Roof	50,000
	83-4	Sprinkler System	5,000	83-4	Masonry repair	10,000
	83-4	Entry System	9000'9	83-4	Electrical upgrade	10,000
	83-4	Flooring	29,000	83.4	Plumbing fixtures	10,000
	83-4	Handicap accommodations in tenant units	5,000			
	83-4	Heat pumps	15,000			
	83-4	Office air conditioner	10,000			
	Total CFP Estimated Cost	Cost	80,000			80,000

# 8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Pla  Part II: Supporting Pages—Work Activities  Activities for Year: 4
FFY Grant: 2011 PHA FY:
Major Work Categories
Landscaping
Doors
Refrigerators
Landscaping
Paving
Sidewalks
Elevator upgrades
Computer
Total CFP Estimated Cost

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

Annual Statement/Per	Annual Statement/Performance and Evaluation Report				
Capital Fund Progran	Capital Fund Program and Capital Fund Program Replaceme	gram Replacement Housing Factor (CFP/CFPRHF) Part I:	CFP/CFPRHF) I	Part I: Summary	
PHA Name: Columbia Co	PHA Name: Columbia County Housing Authority	Grant Type and Number			Federal FY
		Capital Fund Program Grant No: PA26 P0 83 50108 Replacement Housing Factor Grant No:	nt No: PA26 P0 83 tor Grant No:	50108	of Grant: 2008
Original Annual Staten	ergencies [	Revised Annual Statement (revision no:	(revision no:		_
Performance and Evalu	Performance and Evaluation Report for Period Ending:Final P	Final Performance and Evaluation Report	ition Report		
Line No.	Summary by Development Account	Total Estimated Cost	nated Cost	Total Actual Cost	Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	10,000			
3	1408 Management Improvements				
4	1410 Administration	10,000			
5	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs	00009			
8	1440 Site Acquisition				
6	1450 Site Improvement	14,000			
10	1460 Dwelling Structures	53,000			
11	1465.1 Dwelling Equipment—Nonexpendable	4,000			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	3,000			
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)	100,000			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504				
	compliance				
24	Amount of line 21 Related to Security – Soft Costs	S			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation	u			
	Measures				

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

Annual State Capital Fund Part II: Sunr	Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages	d Evaluati Fund Pro	on Report gram Repla	acement Ho	ousing Fact	or (CFP/CFP)	RHF)	
PHA Name: Col	PHA Name: Columbia County Housing	Grant Type and Number	d Number	2 59 DG 2C AG	20108	Federal FY of Grant: 2008	nt: 2008	
Authority		Capital Fund P Replacement H	Capital Fund Program Grant No: FAZO Replacement Housing Factor Grant No:	Capital Fund Program Orant No: FAZO FU 63 20106 Replacement Housing Factor Grant No:	20100			
Development Number Name/HA-	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	nated Cost	Total Actual Cost	ual Cost	Status of Work
Activities								
				Original	Revised	Funds Obligated	Funds Expended	
HA-wide	Operations	1406		10,000				
HA-wide	Admin: Salaries, Ads, Benefits	1410		10,000				
HA-wide	A/E Fees	1430		6,000				
83-1	Replace shed doors	1460	20	5,000				
83-1	Replace door hardware	1460	09	12,000				
83-1	Landscaping improvements	1450		2,000				
83-4	Landscaping improvements	1450		2,000				
83-4	Elevator safety upgrade	1460	1	3,000				
83-4	Fire alarm system & fire extinguisher upgrade	1460	1	10,000				
83-4	Replace heat pumps	1460	15	20,000				
83-4	Replace refrigerators	1465.1	10	4,000				
83-1	Paving	1450		5,000				
83-1	Sidewalks	1450		5,000				
83-1	Electrical updates	1460	20	3,000				
HA-wide	Computer upgrade	1475	1	3,000				

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

	(CFP/CFPRHF)	Federal FY of Grant: 2008	Reasons for Revised Target Dates								
	ng Factor		te)	Actual							
	ement Housi	83 50108	All Funds Expended (Quarter Ending Date)	Revised							
Evaluation Report Fund Program Replacement Housing Factor (CFP/CFPRHF)	n Report ram Replac	Grant Type and Number Capital Fund Program No: PA 26 PO 83 50108 Replacement Housing Factor No:		Original							
	Evaluatio und Prog	Grant Type and Number Capital Fund Program No: PA 20 Replacement Housing Factor No:	gated Date)	Actual							
		Grant   Capitz	All Fund Obliga (Quarter Ending I	Revised							
Annual Statement/Performance and Evaluation Capital Fund Program and Capital Fund Progra Part III: Implementation Schedule	a County	All F (Quart	Original	Unknown	Unknown	Unknown					
	Annual Statement Capital Fund Prog Part III: Impleme	PHA Name: Columbia County Housing Authority	Development Number Name/HA-Wide Activities		HA-wide	83-1	83-4				

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

Annual Statement/Fe  Capital Fund Prograr	Annual Statement/Ferformance and Evaluation Keport Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary	nt Housing Factor ((	CEP/CEPRHF) P	art I: Summary	
PHA Name: Columbia Co	PHA Name: Columbia County Housing Authority	Grant Type and Number			Federal FY
		Capital Fund Program Grant No: PA26 P0 83 50107	t No: PA26 P0 83 5	0107	of Grant:
		Replacement Housing Factor Grant No:	or Grant No:		7007
Original Annual Statement     Performance and Evaluation	Reserve for Disasters/ Emergencies $oxtimes$ Report for Period Ending: $8/30/07$	Emergencies   Revised Annual Statement (revision no: 1) ng: 8/30/07   Final Performance and Evaluation Report	(revision no: 1) valuation Report		
Line No.		Total Estimated Cost	ated Cost	Total Actual Cost	Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	11,500	1,000		
3	1408 Management Improvements				
4	1410 Administration	10,000	9,323		
5	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs	5,000	2,000		
8	1440 Site Acquisition				
6	1450 Site Improvement				
10	1460 Dwelling Structures	63,000	706,97		
11	1465.1 Dwelling Equipment—Nonexpendable	10,500	4,000		
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)	100,000	93,230		
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504				
2.3	compliance				
24	Amount of line 21 Related to Security – Soft Costs	S			
25	Amount of Line 21 Related to Security – Hard Costs	10,000	10,000		
26	Amount of line 21 Related to Energy Conservation Measures	n 63,500	66,907		

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 Rep Part II: Supporting Pages PHA Name: Columbia County Housing Grant Type and Number Authority Replacement Housing Factor G
General Description of Dev. Acct Major Work Categories No.
1406
1410
1430
1460
1460
1465.1
1460
1460

<sup>\*</sup> Added through Public Review Process

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

Reasons for Revised Target Dates Federal FY of Grant: 2007 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Actual (Quarter Ending Date) All Funds Expended Revised Capital Fund Program No: PA 26 PO 83 50107 Replacement Housing Factor No: Original 8/22/11 Annual Statement/Performance and Evaluation Report 8/22/11 Grant Type and Number Actual (Quarter Ending Date) All Fund Obligated Revised Part III: Implementation Schedule Original 8/22/09 8/22/09 PHA Name: Columbia County Name/HA-Wide Housing Authority Development Activities Number HA-wide 83-4

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

Annual Statement/Per	Annual Statement/Performance and Evaluation Report				
Capital Fund Program	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary	nt Housing Factor (	CFP/CFPRHF) P.	art I: Summary	
PHA Name: Columbia C	PHA Name: Columbia County Housing Authority	Grant Type and Number	3 CO OU 2 C V U	2010	Federal FY
		Capital Fund Program Grant No: FAZ6 FU 85 50106 Replacement Housing Factor Grant No:	at No: <b>FA26 FU 85 5</b> or Grant No:	0106	2006
☐Original Annual Statement 区Performance and Evaluation	$\square$ Reserve for Disasters/ Emergencies $\square$ R n Report for Period Ending: $8/30/07$	Revised Annual Statement (revision no: Trinal Performance and Evaluation Report	(revision no: )		
Line No.	Summary by Development Account	Total Estimated Cost	lated Cost	Total Actual Cost	l Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	13,086	24,808	17,022	0
3	1408 Management Improvements				
4	1410 Administration	9,200	826'6	8/6′6	131
5	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs	5,000	5,000	3,000	2,000
8	1440 Site Acquisition				
6	1450 Site Improvement				
10	1460 Dwelling Structures	72,500	000,09	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines $2-20$ )	98,786	98,786	30,000	2,131
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504	10.000			
	compliance		Ο		
24	Amount of line 21 Related to Security – Soft Costs	3			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	1 55,000	30,000	0	0

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

Annual State	Annual Statement/Performance and Evaluation Report	d Evaluation	on Report					
Capital Fund	Capital Fund Program and Capital Fu	Fund Pro	gram Repl	acement Ho	ousing Facto	ind Program Replacement Housing Factor (CFP/CFPRHF)	RHF)	
DHA Name: Col	DHA Name: Columbia County Housing	Grant Type and Number	d Number			Todonol DV of Cuen	÷. 2006	
Authority	umora County mousing	Capital Fund P Replacement E	Capital Fund Program Grant No: PA20 Replacement Housing Factor Grant No:	Capital Fund Program Grant No: PA26 PO 83 50106 Replacement Housing Factor Grant No:	50106	rederal F 1 of Grant: 2000	7000	
Development Number Name/HA-	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	Total Estimated Cost	Total Actual Cost	ıal Cost	Status of Work
Wide Activities								
				Original	Revised	Funds Obligated	Funds Expended	
HA-wide	Operations	1406		13,086	24,808	17,022	0	Open
HA-wide	Admin: Salaries, Ads, Benefits	1410		9,200	9,978	9,978	131	Open
83-4	A/E Fees	1430		5,000	5,000	3,000	2,000	Open
83-1	Plumbing fixture upgrade	1460	10	2,500	0	0	0	* To 2005
83-4	Plumbing fixture upgrade	1460	30	7,500	0	0	0	* To 2005
83-4	Replace rooftop ventilators	1460		40,000	0	0	0	* To 2005
83-4	Auto door opener	1460	1	10,000	0	0	0	**Operations
83-4	Floor covering replacement	1460	7,500 sq.ft.	7,500	30,000	0	0	Open
83-4	Lighting replacement	1460	150	5,000	30,000	0	0	Open

\* Reprogrammed to CFP2005 \*\* Reduced in scope and completed from operations

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

Reasons for Revised Target Dates Federal FY of Grant: 2006 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Actual (Quarter Ending Date) All Funds Expended Revised Capital Fund Program No: PA 26 PO 83 50106 Replacement Housing Factor No: N/A Original 7-17-10 7-17-10 7-17-10 Annual Statement/Performance and Evaluation Report Grant Type and Number Actual (Quarter Ending Date) All Fund Obligated Revised Part III: Implementation Schedule N/AOriginal 7-18-08 7-18-08 7-18-08 PHA Name: Columbia County Name/HA-Wide Housing Authority Development Activities Number HA-wide 83-4 83-1

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

Annual Ctatement/De	Annual Ctatomont/Dowformana and Evaluation Donort				
Capital Fund Program	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary	nt Housing Factor (	CFP/CFPRHF) P.	art I: Summary	
PHA Name: Columbia C	PHA Name: Columbia County Housing Authority	Grant Type and Number			Federal FY
		Capital Fund Program Grant No: PA26 PO 83 50105	nt No: PA26 P0 83 5	0105	of Grant:
		Replacement Housing Factor Grant Inc.	or Grant Ino:		C007
☐Original Annual Statement ☐  ☐Performance and Evaluation	Reserve for Disasters/ Emergencies $\square$ Revange Revanges (1) Revanges (2) Revanges 8/30/07	Revised Annual Statement (revision no: ) Trinal Performance and Evaluation Report	(revision no: ) d Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost	ated Cost	Total Actual Cost	al Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	289,68	16,687	16,687	1
3	1408 Management Improvements				
4	1410 Administration	596'6	596'6	6,965	6,965
5	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs	0	3,000	3,000	0
8	1440 Site Acquisition				
6	1450 Site Improvement				
10	1460 Dwelling Structures	0	70,000	70,000	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines $2-20$ )	99,652	99,652	99,652	996'6
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504				
	compliance				
24	Amount of line 21 Related to Security – Soft Costs	S			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	0 0	20,000	20,000	0

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

		Status of Work		Open	Open	Open	* From 2006	* From 2006	* From 2006	
RHF)	t: 2005	al Cost	Funds Expended	1	9,965	0	0	0	0	
valuation Report ind Program Replacement Housing Factor (CFP/CFPRHF)	Federal FY of Grant: 2005	Total Actual Cost	Funds Obligated	16,687	9,965	3,000	50,000	15,000	5,000	
ousing Facto	50105	Total Estimated Cost	Revised	16,687	9,965	3,000	50,000	15,000	5,000	
acement Ho	Grant Type and Number Capital Fund Program Grant No: PA26 PO 83 50105 Replacement Housing Factor Grant No:	Total Estin	Original	89,687	9,965	0	0	0	0	
on Report gram Repl	Grant Type and Number Capital Fund Program Grant No: PA20 Replacement Housing Factor Grant No:	Quantity					2	50	20	
ld Evaluati I Fund Pro	Grant Type and Number Capital Fund Program Gra Replacement Housing Fac	Dev. Acct No.		1406	1410	1430	1460	1460	1460	
Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Rep Part II: Supporting Pages	PHA Name: Columbia County Housing Authority	General Description of Major Work Categories		Operations	Admin: Salaries, Ads, Benefits	A/E Fees	Replace rooftop ventilators	Plumbing fixture upgrade	Plumbing fixture upgrade	
Annual Statement/Perforn Capital Fund Program and Part II: Supporting Pages	PHA Name: Cold Authority	Development Number Name/HA- Wide Activities		HA-wide	HA-wide	HA-wide	83-4	83-4	83-1	

\* Reprogrammed from CFP2006

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

Reasons for Revised Target Dates Federal FY of Grant: 2005 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Actual (Quarter Ending Date) All Funds Expended Revised Capital Fund Program No: PA 26 PO 83 50105 Replacement Housing Factor No: Original 8-16-09 8-16-09 8-16-09 Annual Statement/Performance and Evaluation Report Grant Type and Number 8-17-07 8-17-07 8-17-07 Actual (Quarter Ending Date) All Fund Obligated Revised Part III: Implementation Schedule Original 8-17-07 8-17-07 8-17-07 PHA Name: Columbia County Name/HA-Wide Housing Authority Development Activities Number HA-wide 83-4 83-1