### **PHA Plans**

### **Streamlined Annual Version**

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

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: 2009

**PHA Name:** 

North Fork Housing Alliance, Inc.

116 South Street

Greenport, NY 11944

(631) 477-1070

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

# **Streamlined Annual PHA Plan Agency Identification**

<b>PHA Name:</b> North Fork Ho	ousing A	Alliance, Inc.	PHA Number	r: NY152
PHA Fiscal Year Beginnin	g: (mm/	<b>'yyyy</b> ) 01/2009		
PHA Programs Administer	red:			
Public Housing and Section		ction 8 Only Pu	ablic Housing Onl	V
Number of public housing units: Number of S8 units:			er of public housing units	
□PHA Consortia: (check be	ox if subr	nitting a joint PHA P	lan and complete	table)
Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				
PHA Plan Contact Information Name: Tanya Palmore TDD:		Phone: 631-477-107 Email (if available):		e.net
Public Access to Informati Information regarding any acti (select all that apply)		llined in this plan can	be obtained by co	ontacting:
X PHA's main administrative off	fice	PHA's development	t management offic	ees
Display Locations For PH	A Plans	and Supporting D	ocuments	
The PHA Plan revised policies of public review and inspection.  If yes, select all that apply:  X Main administrative offic  PHA development manag  Main administrative offic  Public library	X Yes e of the Pagement offee of the lo	☐ No.  HA fices		
PHA Plan Supporting Document X Main business office of the			(select all that app pment managemen	

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PHA Name: Streamlined Annual Plan for Fiscal Year 20_ HA Code:
Other (list below)
Streamlined Annual PHA Plan Fiscal Year 2009  [24 CFR Part 903.12(c)]
<u>Table of Contents</u> [24 CFR 903.7(r)]
Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.
A. PHA PLAN COMPONENTS
<ol> <li>Site-Based Waiting List Policies</li> <li>903.7(b)(2) Policies on Eligibility, Selection, and Admissions</li> <li>Capital Improvement Needs</li> <li>903.7(g) Statement of Capital Improvements Needed</li> <li>Section 8(y) Homeownership</li> <li>903.7(k)(1)(i) Statement of Homeownership Programs</li> <li>4. Project-Based Voucher Programs</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.</li> <li>X 6. Supporting Documents Available for Review</li> <li>7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report</li> <li>8. Capital Fund Program 5-Year Action Plan</li> </ol>
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:</u> <u>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, <u>Certification for a Drug-Free Workplace;</u> Form HUD-50071, <u>Certification of Payments to Influence Federal Transactions;</u> and Form SF-LLL &SF-LLLa, <u>Disclosure of Lobbying Activities</u> .

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#### 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 N/A

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

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

2. What is the number of site based waiting list developments to which families may apart at one time?					
	te-				
3. How many unit offers may an applicant turn down before being removed from the stated waiting list?					
4. Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:					
B. Site-Based Waiting Lists – Coming Year					
If the PHA plans to operate one or more site-based waiting lists in the coming year, answer of the following questions; if not, skip to next component.	each				
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 upcover (that is, they are not part of a previously-HUD-approved site bas waiting list plan)?	_				

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3. Yes N	If yes, how many lists? o: May families be on more than one list simultaneously If yes, how many lists?
based waiting li PHA 1 All PH Manaş At the Other	ested persons obtain more information about and sign up to be on the site- ists (select all that apply)? main administrative office HA development management offices gement offices at developments with site-based waiting lists development to which they would like to apply (list below)  evement Needs N/A  (c), 903.7 (g)]
Exemptions: Section	8 only PHAs are not required to complete this component.
A. Capital Fund	l Program
. 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.).
3. HOPE VI an Capital Fund	d Public Housing Development and Replacement Activities (Non-
	HAs administering public housing. Identify any approved HOPE VI and/or opment or replacement activities not described in the Capital Fund Program
. 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 HO	PE VI revitalization grant(s):

HOPE VI Revitalization Grant Status N/A					
a. Development Name:					
b. Development Number: c. Status of Grant:					
Revitalization Plan under development					
	ion Plan submitted, pending approval				
	ion Plan approved				
Activities p	bursuant 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: V	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 R Part 903.12(c), 903.7(k)(1)(i)]				
1. X 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	on:				
<ul><li>a. Size of Program</li><li>Yes X No:</li></ul>	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 X Yes ☐ No:	Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria: Participation in the Family Self-Sufficiency Program.				

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:
5. Eupherty of the First to Administer a Section o Homeownership Frogram.
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):  The North Fork Housing Alliance, Inc. has provided housing services for the past twenty years. During this period, we partnered with the Town of Southold to provide homes to ten families. We developed the construction and financial packages for these new homes We currently own and manage 53 units of affordable housing. We continue to research and apply for grant opportunities to provide affordable housing.
4. Use of the Project-Based Voucher Program  Intent to Use Project Paged Assistance
Intent to Use Project-Based Assistance
Yes X 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.
Yes X 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
<ul> <li>☐ Yes X 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.</li> <li>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</li> </ul>

5. PHA Statement of Consistency with the Consolidated Plan [24 CFR Part 903.15]

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and commitments: (describe below)

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

	1.	Consolidated Plan jurisdiction: (provide name here) Suffolk County
		PHA has taken the following steps to ensure consistency of this PHA Plan with the 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.
		The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
		Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
		Other: (list below)
3. T	Γhe	Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions

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PHA Name: HA Code:

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

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

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
X	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			
	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			
N/A	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources			
N/A	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies			
N/A	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies			
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			
N/A	Public housing rent determination policies, including the method for setting public housing flat rents.  Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination			
N/A	Schedule of flat rents offered at each public housing development.  Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination			
X	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies.   Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination			
N/A	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach	Annual Plan: Operations and Maintenance			

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	List of Supporting Documents Available for Review	D 1 1 1 1 2
Applicable & On Display	Supporting Document	Related Plan Component
	infestation).	
N/A	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- Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any policies governing any Section 8 special housing types  Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
N/A	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.  X Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
N/A	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	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
N/A	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
N/A	Public Housing Community Service Policy/Programs  Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
N/A	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
N/A	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

PHA Name: HA Code:

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
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 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

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary  PHA Name:  Grant Type and Number  Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant:								
Capital Fund Program Grant No:									
	of Grant:								
Danlacament Housing Factor Creat Nov									
Replacement rousing ractor Grant No.									
Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: ☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report									
	Total Actual Cost								
Original Revised Obligated	Expended								
1 Total non-CFP Funds	<b>FF</b>								
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									
24 Amount of line 21 Related to Security – Soft Costs									
25 Amount of Line 21 Related to Security – Hard									
Costs									
Amount of line 21 Related to Energy Conservation Measures									

### 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 an Capital Fund Pr Replacement H	d Number rogram Grant No: ousing Factor Gr	ant No:	Federal FY of Grant:			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

gram and	Capital Formation Capital Capi	und Prog	ram Replac	ement Housi	ng Factor	(CFP/CFPRHF)  Federal FY of Grant:
	Fund Obliga	ted	All			Reasons for Revised Target Dates
Original	Revised	Actual	Original	Revised	Actual	
	gram and entation S All (Quar	gram and Capital Frentation Schedule Grant Capita Repla All Fund Obliga (Quarter Ending I	gram and Capital Fund Program and Schedule  Grant Type and Nun Capital Fund Program Replacement Housin  All Fund Obligated (Quarter Ending Date)	Capital Fund Program No: Replacement Housing Factor No:  All Fund Obligated (Quarter Ending Date) (Qua	Gram and Capital Fund Program Replacement Housi entation Schedule  Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:  All Fund Obligated (Quarter Ending Date)  All Funds Expended (Quarter Ending Date)	gram and Capital Fund Program Replacement Housing Factor entation Schedule  Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:  All Fund Obligated (Quarter Ending Date)  All Funds Expended (Quarter Ending Date)

### 8. Capital Fund Program Five-Year Action Plan

Capital Fund P Part I: Summar		ve-Year Action Plan			
PHA Name	· <b>J</b>			☐ 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
		FFY Grant: PHA FY:	FFY Grant: PHA FY:	FFY Grant: PHA FY:	FFY Grant: PHA FY:
	Annual Statement				
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

### 8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan							
Part II: Supporting Pages—Work Activities							
Activities	Act	ivities for Year:	_	Acti	vities for Year:		
for		FFY Grant:		FFY Grant:			
Year 1		PHA FY:		PHA FY:			
	Development	Major Work	<b>Estimated Cost</b>	Development Major Work		Estimated	
	Name/Number	Categories		Name/Number	Categories	Cost	
See							
Annual							
Statement							
Total CFP Estimated Cost			\$			\$	

### 8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan							
Part II: Supporting							
A	Activities for Year:		A	ctivities for Year: _	_		
	FFY Grant:		FFY Grant:				
	PHA FY:		PHA FY:  Development Major Work Estimated Cost				
Development	Major Work	<b>Estimated Cost</b>	Development	Estimated Cost			
Name/Number	Categories		Name/Number	Categories			
Total CFP Est	timated Cost	\$			\$		