

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Asheboro Housing Authority</u> PHA Code: <u>NC081</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2009</u>					
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>200</u> Number of HCV units: <u>783</u>					
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
PHA 1:						
PHA 2:						
	PHA 3:					
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update. NA					
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: NA					
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. NA					

**PHA Plan Update**

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

- **Plan Element 1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures:**
  1. The Section 8 Administrative Plan was changed in accordance with PIH 2008-13 to specify that HUD Field Office must approve all reasonable accommodation requests for exceptional payment standards above 120 percent.
  2. The Administrative Plan was amended to clarify that termination of assistance to families for drug or criminal activity that is committed by any member of the family or household or guest, or any other person under the resident's control, is specifically authorized.
- **Plan Element 2. Financial Resources.** Recent experience is that projections of funds from federal sources are unreliable and that entitlement levels will be significantly higher than levels that are actually funded. Anticipated sources and uses of funds are listed below.

<b>Financial Resources Planned Sources and Uses</b>		
<b>Federal Grants</b>	<b>Planned \$</b>	<b>Planned Uses</b>
a) Public Housing Operating Fund	703,286	
b) Public Housing Capital Fund	389,000	
c) Annual Contributions for Section 8 Tenant-Based Assistance	4,303,769	
d) HOPWA (Section 8)	35,000	Targeted Rental Assistance
e) Resident Participation Grant (LIPH)	4,383	Resident Activities
<b>Prior Year Federal Grants (unobligated funds)</b>	<b>0</b>	
a) Capital Fund FFY 2007	133,728	Capital & Management improvements and PH Operations
b) Capital Fund FFY 2008	335,992	Capital & Management improvements and PH Operations
<b>Public Housing Dwelling Rental Income</b>	<b>254,403</b>	PH Operations and Supportive Services
<b>Other Income</b>	<b>0</b>	
a) Non-dwelling Rent	26,880	PH Operations
b) Interest Income	21,960	PH Operations
c) Revenue-producing Business (Laundry, miscellaneous)	250	PH Operations
d) Maintenance & Charges	12,083	PH Operations
<b>TOTAL RESOURCES</b>	<b>6,220,734</b>	

- **Plan Element 3. Rent Determination:**
  1. Both the Admission & Continued Occupancy Plan (ACOP) and Administrative Plan were changed to exempt income from the U.S. Census Bureau for employment lasting no longer than 180 days.
  2. Both the Admission & Continued Occupancy Plan and Administrative Plan were changed in response to a HUD notice that Kinship Guardian Assistance Payments and other similar state payments received by a relative or legal guardian charged with caring for children leaving the juvenile court system are excluded from income.
- **Plan Element 4. Operations and Management:** A new procurement policy was published in response to HUD's publication of Handbook 7460.8 REV 2, Procurement Handbook for Public Housing Agencies.
- **Plan Element 5. Grievance Procedures:** No revisions.
- **Plan Element 6. Designated Housing for Elderly and Disabled Families:** The Asheboro Housing Authority (NC081) designated a 50-unit site near its main office for elderly families only. The designation was approved for a 5-year period by HUD's Special Applications Center on December 8, 2000. The designation was subsequently extended by the Greensboro HUD Field Office for 2-year periods beginning December 8, 2005 and December 8, 2007. At this time it is anticipated that a renewal application will be submitted in 2009 for an additional 2 years.
- **Plan Element 7. Community Service and Self-Sufficiency:** No revisions.
- **Plan Element 8. Safety and Crime Prevention:** No revisions.
- **Plan Element 9. Pets.** No revisions.
- **Plan Element 10. Civil Rights Certification.** No revisions.
- **Plan Element 11. Fiscal Year Audit.** The latest audit was conducted for FY 2008 and is on file in the Asheboro Housing Authority's main office. There were no findings reported in the audit.
- **Plan Element 12. Asset Management.** Not applicable.

6.0

	<ul style="list-style-type: none"> <li> <p><b>Plan Element 13. Violence Against Women Act (VAWA):</b> A goal of the Asheboro Housing Authority (AHA) is to fully comply with the Violence against Women Act (VAWA). It is our objective to work with others to prevent offenses covered by VAWA to the extent feasible.</p> <p>The AHA refers child or adult victims of domestic violence, dating violence, sexual assault, or stalking to appropriate service providers. AHA lacks the staff capacity to independently provide formal services or programs targeting victims of domestic violence.</p> <p>The AHA cooperates with organizations and entities, both private and governmental, which provide shelter and/or services to victims of domestic violence. If AHA staff becomes aware that an assisted individual is a victim of domestic violence, dating violence or stalking, the victim will be referred to such providers of shelter. Some such agencies are: Family Crisis Center, Christians United Outreach Center, Department of Social Services' Adult and Child Protective Services.</p> <p>The AHA provides or offers the following activities, services, or programs that help child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing:  If appropriate, in both Section 8 and Public Housing programs victims are allowed to apply for transfer, to remove the offending member from the household, and/or have the perpetrator barred from all housing authority property, regardless of whether the perpetrator was ever a member of the household. City of Asheboro police cooperate with AHA to enforce North Carolina trespassing statutes.</p> <p>The AHA provides or offers the following activities, services, or programs to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families:  Public housing victims of domestic violence may request the perpetrator be removed from the household and/or be placed on the off-limits list. A transfer will be granted when suitable alternative vacant units are available and if there is reason to believe this action would eliminate the recurrence of violence.</p> <p>Section 8 assisted tenants will not be denied portability to a unit located in another jurisdiction (notwithstanding the term of the existing lease, or if the family has not occupied the unit for 12 months) so long as the family has complied with all other requirements of the program and desires to move from the unit in order to protect the health or safety of a family member who is a victim of domestic or dating violence or stalking.</p> <p>The AHA has the following procedures in place to assure applicants and residents are aware of their rights under the Violence against Women Act:  In accordance with board-approved policy, AHA provides written notification to applicants, tenants, and Section 8 owners and managers, concerning the rights and obligations created under VAWA relating to confidentiality, denial of assistance, and termination of tenancy or assistance.</p> </li> </ul> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <ul style="list-style-type: none"> <li>Main business office of the AHA, 338 W. Wainman Avenue, Asheboro, NC 27204</li> </ul>
7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>  NA</p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.  <b>Annual statements for CFP NC19P08150106, CFP NC19P08150107, CFP NC19P08150108, and CFP NC19P08150109 are attached (nc081f01).</b></p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.  <b>Attachment nc081g01.</b></p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.  NA</p>
9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.  NA</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b>  NA</p>

<b>10.0</b>	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>NA</p>
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<b>11.0</b>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights): Attachment nc081a01</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only): Attachment nc081b01</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only): Attachment nc081c01</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only): Attachment nc081d01</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only): NA</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. Attachment nc081e01</p> <p>(g) Challenged Elements: NA</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only): Attachment nc081f01</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only): Attachment nc081g01</p>
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<b>PHA Certifications of Compliance with PHA Plans and Related Regulations</b>	<b>U.S. Department of Housing and Urban Development</b> Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
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**PHA Certifications of Compliance with the PHA Plans and Related Regulations:  
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the \_\_\_ 5-Year and/or  Annual PHA Plan for the PHA fiscal year beginning 2009, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. ~~The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.~~
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

ASHEBORO HOUSING AUTHORITY


NC 081

PHA Name

PHA Number/HA Code

\_\_\_\_ 5-Year PHA Plan for Fiscal Years 20\_\_\_\_ - 20\_\_\_\_  
 X \_\_\_\_\_ Annual PHA Plan for Fiscal Years 20<sup>09</sup> - 20<sup>10</sup>\_\_\_\_\_

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
ADDISON PENFIELD	CHARIMAN
Signature 	Date
	JANUARY 5, 2009

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

ASHEBORO HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

CAPITAL FUND

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

NC081-1

SITE I - INDEPENDENCE AVENUE AND STARR COURT (ELDERLY)

SITE II - MORGAN AVENUE

SITE III - DUNLAP STREET AND MARTIN LUTHER KING, JR. DRIVE

SITE IV - FARR STREET, TIPTON DRIVE, TABOR COURT, E. PRESNELL STREET, AND VANCE STREET

Check here  if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

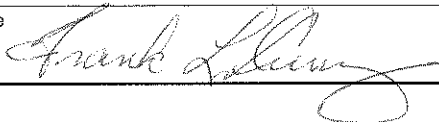
**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official  
FRANK L. CURRY

Title  
EXECUTIVE DIRECTOR

Signature

X



Date

01/05/2009

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

ASHEBORO HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

CAPITAL FUND

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

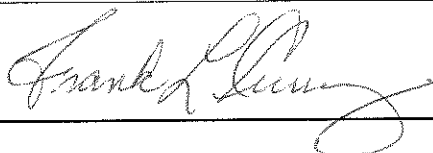
Name of Authorized Official

FRANK L. CURRY

Title

EXECUTIVE DIRECTOR

Signature



Date (mm/dd/yyyy)

01/05/2009



## DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> <b>B</b> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> <b>B</b> b. initial award c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input checked="" type="checkbox"/> <b>A</b> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  <b>Congressional District, if known:</b>	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>  NA  <b>Congressional District, if known:</b>	
<b>6. Federal Department/Agency:</b> Department of Housing and Urban Development	<b>7. Federal Program Name/Description:</b> Capital Fund  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> <i>(if individual, last name, first name, MI):</i> NA	<b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: <u>FRANK L. CURRY</u> Title: <u>EXECUTIVE DIRECTOR</u> Telephone No.: <u>(336) 629-4146</u> Date: <u>01/05/2009</u>	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**Attachment nc081e01**

**Asheboro Housing Authority  
Public Housing Agency Plan for FY 2009  
Minutes of the Resident Advisory Board Meeting  
November 20, 2008**

**Public Housing Members**

Hilda Hill  
Glenn Hill  
Elizabeth Robbins  
Peggy Bullins  
Margaret Ingram

**Section 8 Members**

Linda McDonald  
Angela McDonald  
Carla Vick  
Terri Glover  
Satoya Siler  
Angie Crump

**Other Attendees**

Frank Curry, Executive Director  
Kendria Eckard, Social Worker

Frank Curry, Executive Director, Asheboro Housing Authority, convened the Resident Advisory Board (RAB) meeting at 4:00 p.m., November 21, 2008 at the Asheboro Housing Authority Main Office, 338 W. Wainman Avenue, Asheboro, NC.

Mr. Curry provided each member present a copy of the draft Annual Plan for the Asheboro Housing Authority. He gave an explanation of the necessity for the meeting and the importance of resident input to the plan process. Mr. Curry also pointed out that the authority was responsible for 200 families in public housing as well as managing 783 Housing Choice Vouchers.

Mr. Curry described each of the 13 Plan Elements and explained the changes that had been made since the last Annual Plan submission. Mr. Curry then proceeded to explain the sources and uses of funds available to the authority in some detail. He then asked for comments or questions from the RAB.

Ms. Carla Vick, a Section 8 board member, stated that she had previously been a public housing resident and loved the upgrades she had seen, particularly the new water-saving commodes. She was also appreciative of the quick response whenever she had a maintenance problem.

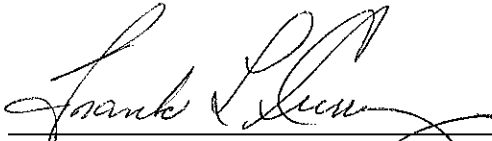
Ms. Angela McDonald, a Section 8 board member and Family Self Sufficiency participant, asked why a child support payment increased the amount of rent she had to pay, but did not increase her escrow account. Ms. Eckard, the Social Worker and FSS Coordinator explained that only an increase in "earned income" would be applied to the escrow account. Child support is not considered to be earned income. This was not a

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discretionary policy that could be decided by the authority, but a HUD rule common to all FSS programs nationwide, and over which Asheboro Housing Authority has no control.

Mr. Curry finished his presentation by asking the RAB to review the proposed Capital Fund submission for FY 2009 and asking for any other suggestions or comments the RAB may have.

As there were no further comments or questions, Mr. Curry thanked the RAB for its concern and interest. The meeting was adjourned at 4:45 p.m.



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Frank L. Curry, Executive Director



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Kendria Eckard, Social Worker


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<b>Part I: Summary</b>					
<b>PHA Name:</b>  Asheboro Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: NC19P08150106    Replacement Housing Factor Grant No: Date of CFFP: _____		<b>FFY of Grant:</b> 2006 <b>FFY of Grant Approval:</b> 2006	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:4 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>9/30/08</u> <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	74,664.30		74,664.30	74,664.30
3	1408 Management Improvements	13,390.66		13,390.66	13,390.66
4	1410 Administration (may not exceed 10% of line 21)	0			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	33,443.74		33,443.74	33,443.74
10	1460 Dwelling Structures	57,447.17		57,447.17	57,447.17
11	1465.1 Dwelling Equipment—Nonexpendable	5,943.04		5,943.04	5,943.04
12	1470 Non-dwelling Structures	86,859.90		86,859.90	86,859.90
13	1475 Non-dwelling Equipment	32,795.19		32,795.19	32,795.19
14	1485 Demolition	0			
15	1492 Moving to Work Demonstration	0			
16	1495.1 Relocation Costs	0			
17	1499 Development Activities <sup>4</sup>	0			
18a	1501 Collateralization or Debt Service paid by the PHA	0			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0			
19	1502 Contingency (may not exceed 8% of line 20)	0			
20	Amount of Annual Grant: (sum of lines 2 – 19)	304,544.00		304,544.00	304,544.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	3,000.00			
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs	5,000.00			
25	Amount of line 20 Related to Energy Conservation Measures	2,000.00			

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
**Expires 4/30/2011**

<b>Part I: Summary</b>				
PHA Name: Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150106 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2006 FFY of Grant Approval: 2006
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated      Expended
Signature of Executive Director 		Date 01/05/2009	Signature of Public Housing Director      Date	

Part II: Supporting Pages								
PHA Name: Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P081501062 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:				Federal FFY of Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
NC081-HA Wide	Operations	1406		74,664.30		74,664.30	74,664.30	Completed
NC081-HA Wide	Management Improvements	1408		13,390.66		13,390.66	13,390.66	Completed
NC081-HA Wide	Administration	1410		0		0	0	Deferred
NC081-HA Wide	Fees & Costs	1430		0		0	0	Deferred
NC081-HA Wide	Grounds & Landscaping	1450		24,715.94		24,715.94	24,715.94	Completed
NC081-HA Wide	Walks & Parking	1450		967.61		967.61	967.61	Completed
NC081-HA Wide	Exterior Plumbing	1450		7,760.19		7,760.19	7,760.19	Completed
NC081-HA Wide	Water Heaters	1460		4,909.27		4,909.27	4,909.27	Completed
NC081-HA Wide	Bathrooms	1460		6,343.34		6,343.34	6,343.34	Completed
NC081-HA Wide	Interior Stairs & Rails	1460		0		0	0	Deferred
NC081-HA Wide	Porches & Rails	1460		0		0	0	Deferred
NC081-HA Wide	Gutters & Downspouts	1460		3,325.00		3,325.00	3,325.00	Completed
NC081-HA Wide	Exterior Painting	1460		0		0	0	Deferred
NC081-HA Wide	Roofs - Replace or Repair	1460		0		0	0	Deferred
NC081-HA Wide	Floors & Baseboards	1460		30,800.77		30,800.77	30,800.77	Completed
NC081-HA Wide	Interior Electrical	1460		1,620.88		1,620.88	1,620.88	Completed
NC081-HA Wide	Interior Plumbing	1460		0		0	0	Deferred
NC081-HA Wide	Interior Drywall	1460		1,500.00		1,500.00	1,500.00	Completed
NC081-HA Wide	Cabinets	1460		0		0	0	Deferred

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Asheboro Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19P08150106 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sup>2</sup>	
NC081-HA Wide	Gas Lines	1460		8,947.91		8,947.91	8,947.91	Completed
NC081-HA Wide	Interior Doors	1460		0		0	0	Deferred
NC081-HA Wide	Exterior Doors	1460		0		0	0	Deferred
NC081-HA Wide	Refrigerators & Ranges	1465.1		5,943.04		5,943.04	5,943.04	Completed
NC081-HA Wide	Nondwelling Buildings	1470		86,859.90		86,859.90	86,859.90	Completed
NC081-HA Wide	Building Systems	1470		0		0	0	Deferred
NC081-HA Wide	Maintenance Replacement & Repairs	1475		11,463.04		11,463.04	11,463.04	Completed
NC081-HA Wide	Nondwelling Equipment	1475		21,332.15		21,332.15	21,332.15	Completed
NC081-HA Wide	Contingency	1502		0		0	0	Deferred

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.



Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary						
PHA Name:  Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150107 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2007 FFY of Grant Approval: 2007	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>9/30/08</u> <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	70,000		0	0	
3	1408 Management Improvements	101,000		99,652.26	99,652.26	
4	1410 Administration (may not exceed 10% of line 21)	0		0	0	
5	1411 Audit	0		0	0	
6	1415 Liquidated Damages	0		0	0	
7	1430 Fees and Costs	0		0	0	
8	1440 Site Acquisition	0		0	0	
9	1450 Site Improvement	33,508		28,237.01	9,982.00	
10	1460 Dwelling Structures	90,000		44,326.81	19,739.81	
11	1465.1 Dwelling Equipment—Nonexpendable	8,000		6,583.80	4,502.17	
12	1470 Non-dwelling Structures	5,000		0	0	
13	1475 Non-dwelling Equipment	5,000		0	0	
14	1485 Demolition	0		0	0	
15	1492 Moving to Work Demonstration	0		0	0	
16	1495.1 Relocation Costs	0		0	0	
17	1499 Development Activities <sup>4</sup>	0		0	0	
18a	1501 Collateralization or Debt Service paid by the PHA	0		0	0	
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0		0	0	
19	1502 Contingency (may not exceed 8% of line 20)	0		0	0	
20	Amount of Annual Grant: (sum of lines 2 – 19)	312,508		178,799.88	133,876.24	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures	60,000				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 Expires 4/30/2011

<b>Part I: Summary</b>					
PHA Name: Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150107 Replacement Housing Factor Grant No: Date of CFFP: _____			
		FFY of Grant: 2007 FFY of Grant Approval: 2007			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
Signature of Executive Director <i>Frank...</i>		Date 01/05/2009	Signature of Public Housing Director		Date

Part II: Supporting Pages								
PHA Name: Asheboro Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19P08150107 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
NC081-HA Wide	Operations	1406		70,000		0	0	In Progress
NC081-HA Wide	Management Improvements	1408		101,000		99,652.26	99,652.26	In Progress
NC081-HA Wide	Administration	1410		0		0	0	Deferred
NC081-HA Wide	Fees & Costs	1430		0		0	0	Deferred
NC081-HA Wide	Grounds & Landscaping	1450		20,000		18,255.01	0	In Progress
NC081-HA Wide	Walks & Parking	1450		3,508		0	0	Pending
NC081-HA Wide	Exterior Plumbing	1450		10,000		9,982.00	9,982.00	Completed
NC081-HA Wide	Water Heaters	1460		3,000		2,261.81	2,261.81	In Progress
NC081-HA Wide	Interior Drywall	1460		3,000		2,844.80	2,844.80	In Progress
NC081-HA Wide	Interior Stairwells	1460		0		0	0	Deferred
NC081-HA Wide	Interior Plumbing	1460		2,000		258.71	258.71	In Progress
NC081-HA Wide	Bath & Kitchen Faucets	1460		5,000		4,550.76	4,550.76	In Progress
NC081-HA Wide	Roofs	1460		5,000		0	0	Pending
NC081-HA Wide	Exterior Painting	1460		4,000		0	0	Pending
NC081-HA Wide	Floors & Baseboards	1460		10,000		0	0	Pending
NC081-HA Wide	Porch Rails	1460		2,000		0	0	Pending
NC081-HA Wide	Electric Panels	1460		10,000		0	0	Pending
NC081-HA Wide	Interior Lights	1460		4,000		0	0	Pending
NC081-HA Wide	Smoke Alarms	1460		2,000		0	0	Pending

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150107 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:				Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sub>2</sub>	
NC081-HA Wide	Furnace Room Renovations	1460		3,000		0	0	Pending
NC081-HA Wide	Interior Repairs	1460		37,000		34,410.73	9,823.73	In Progress
NC081-HA Wide	Refrigerators & Ranges	1465.1		8,000		6,583.80	4,502.17	In Progress
NC081-HA Wide	Nondwelling Buildings	1470		2,500		0	0	Pending
NC081-HA Wide	Energy Saving Devices	1470		2,500		0	0	Pending
NC081-HA Wide	Maintenance Replacements	1475		3,000		0	0	Pending
NC081-HA Wide	Heating & Cooling Equipment	1475		2,000		0	0	Pending

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Asheboro Housing Authority					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:				Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary					
PHA Name:  Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150108 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>9/30/08</u> <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0		0	0
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	76,000		0	0
3	1408 Management Improvements	12,000		0	0
4	1410 Administration (may not exceed 10% of line 21)	3,000		0	0
5	1411 Audit	0		0	0
6	1415 Liquidated Damages	0		0	0
7	1430 Fees and Costs	0		0	0
8	1440 Site Acquisition	0		0	0
9	1450 Site Improvement	24,000		0	0
10	1460 Dwelling Structures	165,992		0	0
11	1465.1 Dwelling Equipment—Nonexpendable	13,000		0	0
12	1470 Non-dwelling Structures	10,000		0	0
13	1475 Non-dwelling Equipment	32,000		0	0
14	1485 Demolition	0		0	0
15	1492 Moving to Work Demonstration	0		0	0
16	1495.1 Relocation Costs	0		0	0
17	1499 Development Activities <sup>4</sup>	0		0	0
18a	1501 Collateralization or Debt Service paid by the PHA	0		0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0		0	0
19	1502 Contingency (may not exceed 8% of line 20)	0		0	0
20	Amount of Annual Grant: (sum of lines 2 – 19)	335,992		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	1,000			

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 Expires 4/30/2011

<b>Part I: Summary</b>				
PHA Name:  Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150108 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated      Expended
Signature of Executive Director <i>Frank Henry</i>		Date 01/05/2009	Signature of Public Housing Director  Date	

Part II: Supporting Pages								
PHA Name: Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150108 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
NC081-HA Wide	Operations	1406		76,000		0	0	Pending
NC081-HA Wide	Management Improvements	1408		12,000		0	0	Pending
NC081-HA Wide	Administration	1410		3,000		0	0	Pending
NC081-HA Wide	Grounds & Landscaping	1450		18,000		0	0	Pending
NC081-HA Wide	Walks & Parking	1450		6,000		0	0	Pending
NC081-HA Wide	Roofs & Gutters	1460		150,000		0	0	Pending
NC081-HA Wide	Cabinets	1460		92		0	0	Pending
NC081-HA Wide	Interior Drywall	1460		1,000		0	0	Pending
NC081-HA Wide	Interior Doors	1460		6,000		0	0	Pending
NC081-HA Wide	Energy Conservation	1460		1,000		0	0	Pending
NC081-HA Wide	Bath & Kitchen Fixtures	1460		1,000		0	0	Pending
NC081-HA Wide	Exterior Painting	1460		4,000		0	0	Pending
NC081-HA Wide	Floors & Baseboards	1460		1,000		0	0	Pending
NC081-HA Wide	Porch Rails	1460		1,000		0	0	Pending
NC081-HA Wide	Electric Service	1460		900		0	0	Pending
NC081-HA Wide	Refrigerators & Ranges	1465 .1		12,000		0	0	Pending
NC081-HA Wide	Furnaces	1465.1		1,000		0	0	Pending
NC081-HA Wide	Non-Dwelling Structure	1470		10,000		0	0	Pending
NC081-HA Wide	Maintenance Replacements	1475		7,000		0	0	Pending

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
<b>PHA Name:</b> Asheboro Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: NC19P08150108 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:				<b>Federal FFY of Grant:</b> 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sup>2</sup>	
NC081-HA Wide	Vehicle Replacement	1475		25,000		0	0	Pending

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: DO NOT NEED TO SUBMIT THIS FORM				Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary					
PHA Name:  Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150109 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	70,000			
3	1408 Management Improvements	14,000			
4	1410 Administration (may not exceed 10% of line 21)	2,500			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	1,000			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	55,000			
10	1460 Dwelling Structures	222,500			
11	1465.1 Dwelling Equipment—Nonexpendable	10,000			
12	1470 Non-dwelling Structures	4,000			
13	1475 Non-dwelling Equipment	10,000			
14	1485 Demolition	0			
15	1492 Moving to Work Demonstration	0			
16	1495.1 Relocation Costs	0			
17	1499 Development Activities <sup>4</sup>	0			
18a	1501 Collateralization or Debt Service paid by the PHA	0			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0			
19	1502 Contingency (may not exceed 8% of line 20)	0			
20	Amount of Annual Grant: (sum of lines 2 – 19)	389,000			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
**Expires 4/30/2011**

<b>Part I: Summary</b>				
PHA Name: Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150109 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated      Expended
Signature of Executive Director <i>Frank A. Smith</i>		Date 01/05/2009	Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: Asheboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P08150109 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
NC081-HA Wide	Operations	1406		70,000				
NC081-HA Wide	Management Improvements	1408		14,000				
NC081-HA Wide	Administration	1410		2,000				
NC081-HA Wide	Fees & Costs	1430		1,500				
NC081-HA Wide	Grounds & Landscaping	1450		22,000				
NC081-HA Wide	Walks & Parking	1450		30,000				
NC081-HA Wide	Exterior Plumbing	1450		3,000				
NC081-HA Wide	Water Heaters	1460		3,000				
NC081-HA Wide	Exterior Steps, Stairs & Rails	1460		4,000				
NC081-HA Wide	Building Exterior	1460		6,000				
NC081-HA Wide	Roofs, Trim & Gutters	1460		115,000				
NC081-HA Wide	Furnace Rooms	1460		5,000				
NC081-HA Wide	Exterior Painting	1460		15,000				
NC081-HA Wide	Unit AC	1460		60,000				
NC081-HA Wide	Interior Plumbing	1460		3,000				
NC081-HA Wide	Interior Doors	1460		1,000				
NC081-HA Wide	Cabinets/Countertops	1460		1,000				
NC081-HA Wide	Interior Repairs	1460		1,000				
NC081-HA Wide	Range Hoods	1460		5000				

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



Part II: Supporting Pages								
PHA Name: Asheboro Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19P08150109 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sup>2</sup>	
NC081-HA Wide	Floors	1460		5,000				
NC081-HA Wide	Interior Drywall	1460		2,500				
NC081-HA Wide	Refrigerators & Ranges	1465.1		10,000				
NC081-HA Wide	Non-dwelling Buildings	1470		3,000				
NC081-HA Wide	Energy Saving Devices	1470		1,000				
NC081-HA Wide	Non-dwelling Equip/Replacements	1475		7,000				
NC081-HA Wide	Heating/Cooling Equipment	1475		1,500				
NC081-HA Wide	Refrigerators & Ranges	1475		1,500				
NC081-HA Wide	Computer Hardware	1475		2,000				
NC081-HA Wide	Office Furniture	1475		2,000				

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: DO NOT NEED THIS FORM UNLESS USING CFFP \$					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

**Capital Fund Program—Five-Year Action Plan**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011

<b>Part I: Summary</b>						
PHA Name/Number: Asheboro HA, NC081		Locality (City/County & State): Asheboro, NC			<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2009</u>	Work Statement for Year 2 FFY <u>2010</u>	Work Statement for Year 3 FFY <u>2011</u>	Work Statement for Year 4 FFY <u>2012</u>	Work Statement for Year 5 FFY <u>2013</u>
	NC081, PHA Wide Asheboro Housing Authority					
B.	Physical Improvements Subtotal	Annual Statement	275,000	246,000	265,000	261,000
C.	Management Improvements		17,000	13,000	13,000	13,000
D.	PHA-Wide Non-dwelling Structures and Equipment		10,000	50,000	35,000	45,000
E.	Administration		3,000	4,000	4,000	4,000
F.	Other		0	0	0	2,000
G.	Operations		70,000	70,000	70,000	70,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		375,000	383,000	387,000	395,000
L.	Total Non-CFP Funds					
M.	Grand Total		375,000	383,000	387,000	395,000

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY _____	Work Statement for Year <u>2</u> FFY <u>2010</u>			Work Statement for Year: <u>3</u> FFY <u>2011</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	Site Improvements		20,000	Site Improvements		25,000
	Bathroom Repair/Replacement		22,000	Bathroom Repair/Replacement		20,000
	Roof Repair/Replacement		105,000	Roof Repair/Replacement		60,000
	Floors		35,000	Floors		31,000
	Exterior Railings		25,000	Exterior Porches, Rails & Stairs		25,000
	Interior Walls & Ceilings		25,000	Interior Walls & Ceilings		15,000
	Plumbing		30,000	Interior Plumbing		30,000
	Electrical		13,000	Interior Electrical & Heating/Air		30,000
	Maint. Equip. Repair/Replacement		10,000	Maint equipment Repairs/Replace		15,000
				Gas Lines/Replace		5,000
				Exterior Siding/Paint/ Trim/Soffitt		15,000
				Non-Dwelling Bldgs.		25,000
	Subtotal of Estimated Cost		\$285,000	Subtotal of Estimated Cost		\$296,000





**Part III: Supporting Pages – Management Needs Work Statement(s)**

Work Statement for Year 1 FFY	Work Statement for Year <u>4</u> FFY <u>2012</u>		Work Statement for Year: <u>5</u> FFY <u>2013</u>	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	See Annual Statement	NC081, Main Office, Operations	70,000	NC081, Main Office, Operations
	NC081, Main Office, Software Training & Support	6,000	NC081, Main Office, Furniture Replacement	4,000
	NC081, Main Office, Computer Software	6,000	NC081, Main Office, Computer Software	4,000
	NC081, Main Office, Computer Hardware	5,000	NC081, Main Office, Computer Hardware	5,000
	NC081, Main Office, Administration (Training, Conferences, etc.)	3,000	NC081, Main Office, Administration (Training, Seminars, etc.)	4,000
	NC081, Main Office, Telephone Equipment	2,000	NC081, Main Office, Contracted Studies	2,000
	Subtotal of Estimated Cost	\$92,000	Subtotal of Estimated Cost	\$89,000