

<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>Housing Authority of the City of Fountain</u> PHA Code: <u>CO071</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2010</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>40</u> Number of HCV units: <u>240</u>				
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input checked="" 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.				
<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: <b>To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</b>				
<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.  See Attachment A and Attachment B.				
<b>6.0</b>	<b>PHA Plan Update</b>  (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (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.				
<b>7.0</b>	<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>				
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				
<b>8.1</b>	<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>8.2</b>	<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>8.3</b>	<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.				
<b>9.0</b>	<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.				

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></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <ul style="list-style-type: none"> <li>(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.</li> <li>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</li> </ul>
11.0	<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> <ul style="list-style-type: none"> <li>(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)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(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.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>

## ATTACHEMENT A

### Housing Authority of the City of Fountain PHA 5-Year Plan

#### PHA GOALS AND OBJECTIVES

**Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

PHA Specific Goal: Expand the supply of assisted housing in the community.

Objectives:

- a. Apply for additional rental vouchers.
- b. Leverage private or other public funds to create additional housing opportunities by investigating the opportunity to partner with other entities to develop additional affordable housing units in the community.
- c. Pursue housing resources other than the public housing or Section 8 tenant-based assistance.

PHA Specific Goal: Improve the quality of assisted housing.

Objectives:

- a. Improve public housing management: (PHAS score) by maintaining High Performer Status.
- b. Improve voucher management: (SEMAP score) by maintaining High Performer Status.
- c. Concentrate on efforts to improve specific management functions by employing effective maintenance and management policies to minimize the number of units off-line.
- d. Renovate or modernize public housing units by using capital funds to renovate public housing units with an emphasis on increased energy efficiency.

PHA Specific Goal: Increase assisted housing choices in the community.

Objectives:

- a. Provide voucher mobility counseling by providing information at all certifications on the portability features of the Housing Choice Voucher Program.
- b. Conduct outreach efforts to potential voucher landlords by marketing participation in the Housing Choice Voucher Program to area landlords through publications and informational meetings.
- c. Educate the community on the value of affordable housing projects by participating in community planning efforts and supporting the development of affordable housing projects.

**Strategic Goal: Improve community quality of life and economic vitality**

PHA Specific Goal: Provide an improved living environment.

Objectives:

- a. Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments.
- b. Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments.

**PHA Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

PHA Specific Goal: Promote self-sufficiency and asset development of assisted households.

Objectives:

- a. Increase the number and percentage of employed persons in assisted families by investigating the feasibility of adopting policies that will promote self-sufficiency of families such as, the phase-in of increased tenant payments due to employment.
- b. Provide or attract supportive services to increase independence for the elderly or families with disabilities by developing relationships with community service providers that may be willing to provide supportive services to public housing residents that are elderly or disabled.
- c. Develop relationships with community service providers so that a network of services is available to program participants and other members of the community.

**PHA Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

PHA Specific Goal: Ensure equal opportunity and affirmatively further fair housing.

Objectives:

- a. Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability by administering all programs in a manner that will ensure consistent and fair treatment to all persons interested in program participation.
- b. Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability.
- c. Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.
- d. Ensure all program participants are aware of their rights under the PHA's grievance procedures, administrative plan and applicable Fair Housing Laws and

- provide assistance to program participants seeking to redress any discrimination encountered in obtaining housing.
- e. Monitor community populations to ensure that all members of the community have adequate housing choices and receive fair and equal treatment.

**PHA Strategic Goal: Provide Housing Opportunities and Safety for Battered Women and Children**

PHA Specific Goal: Serve the needs of victims of domestic violence.

Objectives:

- a. Undertake affirmative measures to provide a suitable living environment for victims of domestic violence, dating violence, sexual assault or stalking.
- b. Develop relationships with community service providers so that a network of services is available to program participants and other members of the community that are victims of domestic violence, dating violence, sexual assault or stalking.

## **ATTACHMENT B**

### **Housing Authority of the City of Fountain PHA 5-Year Plan 2010-2014**

#### **PROGRESS REPORT**

##### **Goals and Objectives Described in the Five-Year Plan for 2005-2009**

The PHA has made substantial progress in meeting the Goals and Objectives described in the Five-Year plan for 2005-2009.

##### **1. HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

###### **PHA Goal: Expand the supply of assisted housing.**

During the five-year period of 2005-2009, the PHA investigated partnering with several private developers on the creation of an assisted living facility; the conversion of a rural development housing development into a tax credit project and the development of a Section 202 project for the elderly. Due to economic conditions, none of these projects could obtain the necessary financing to complete.

The PHA participated in the Disaster Housing Assistance Program that provided assistance to four families displaced by Hurricanes Katrina and Rita. As a result, the Housing Authority has received 3 special admission vouchers to place the remaining participating families in permanent housing.

###### **PHA Goal: Improve the quality of assisted housing.**

The PHA maintained High Performer Status on all PHAS assessments during the five-year period of 2005-2009.

The PHA maintained High Performer Status on all SEMAP assessments during the five-year period 2005-2009.

The PHA maintained a high level of customer satisfaction in the operation of all its programs during the five-year period 2005-2009.

The PHA improved the specific management function of voucher unit inspection reporting during the five-year period of 2005-2009 resulting in the receipt of a 100% score on the SEMAP assessment for the year ending 2008.

The PHA used capital funds to renovate its public housing units. During the five-year period of 2005-2009, the PHA replaced the bathroom and kitchen sinks and faucets in all public housing units; installed energy efficient exterior lighting at the public housing facility; planted draught resistant landscaping to reduce water use at its public housing facility; installed energy efficient

lighting in the community areas of the public housing facility; installed new flooring in the tenant units and the community areas of its public housing facility; installed a new air conditioning unit for the community area of its public housing facility; replaced unit air conditioners; installed a new handicapped ramp on the north side of the parking lot; replaced bathroom heaters in all tenant units; and resurfaced the parking lot.

**PHA Goal: Increase assisted housing choices.**

The PHA provided information at all certifications on the portability features of the Housing Choice Voucher Program.

The PHA conducted outreach efforts to potential voucher landlords resulting in a total number of 105 new landlords that participated in the program during the five-year period of 2005-2009.

The PHA applied for a CDBG grant to provide deposit assistance to families that qualify for its programs so that such families will have the resources to enable them more choice in obtaining quality housing.

The PHA continued to educate the community on the value of affordable housing projects by participating in community planning efforts and supporting the development of affordable housing projects.

**HUD Strategic Goal: Improve community quality of life and economic vitality**

**PHA Goal: Provide an improved living environment.**

The PHA increased its percentage of higher income households admitted to its public housing from 0% in 2005 to 33% in 2009.

The PHA supported efforts to promote income mixing in public housing by assuring access for lower income families into higher income developments through use of income targeting requirements.

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

**PHA Goal: Promote self-sufficiency and asset development of assisted households.**

The PHA continued to promote self-sufficiency and asset development of assisted families. However, due to budget constraints during the five-year period of 2005-2009, the PHA decided not to adopt a policy to phase-in increased tenant payments due to employment as a method to increase the number and percentage of employed persons in assisted families. Currently 51% of all assisted families serviced by the Housing Authority are employed.

The PHA continued to develop relationships with community service providers that are willing to provide supportive services to public housing residents that are elderly or disabled. The PHA

sponsors an annual flu shot clinic at its public housing facility and has explored the possibility of providing healthy living seminars and the establishment of a community garden in conjunction with Live Well Fountain.

The PHA continued its relationship with the Golden Circle Nutrition Program operated by the Colorado Springs Housing Authority to provide noon meals at its public housing facility that is available to program participants and other members of the community.

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

**PHA Goal: Ensure equal opportunity and affirmatively further fair housing.**

The PHA undertook affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability by administering all of its programs in a manner that will ensure consistent and fair treatment to all persons interested in program participation.

The PHA has ensured that all program participants are aware of their rights under the PHA's grievance procedures, administrative plan and applicable Fair Housing Laws.

The PHA provided assistance to program participants seeking to redress any discrimination encountered in obtaining housing.

The PHA continued to monitor populations to ensure that all members of the community have adequate housing choices and receive fair and equal treatment.

**PHA Goal: Educate the community on the value of affordable housing projects.**

The PHA continued to educate the community on the value of affordable housing projects by participating in community planning efforts and supporting the development of affordable housing projects.



## ATTACHMENT C

### **Resident Advisory Board Review and Comments** **Housing Authority of the City of Fountain, Colorado** **Five-Year Plan 2010-1014**

The PHA Board of Commissioners held its regular meeting of the Board on June 18, 2009 at its public housing facility, Grinde Manor, and discussed the five-year capital plan with the residents of the facility.

The PHA published notice of a public hearing and comment period on the PHA's Five-Year Plan on July 1, 2009. The PHA Five-Year Plan along with supporting documentation was available for review and comment at the PHA's main office from July 1, 2009 until the public hearing date of August 20, 2009. In addition, a summary of the PHA's Five-Year Plan was mailed to each member of the Resident Advisory Board on July 1, 2009 along with an invitation to attend the public hearing.

The PHA received no comments on the PHA plan from the Resident Advisory Board or members of the public.

The Board of Commissioners approved the PHA's Five-Year Plan at its regular meeting held September 17, 2009.

### **Challenged Elements** **Housing Authority of the City of Fountain, Colorado** **Five-Year Plan 2010-1014**

There are no elements of the PHA Five-Year Plan that have been challenged.

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		Grant Type and Number		FFY of Grant: 2010	
PHA Name: Housing Authority of the City of Fountain		Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant Approval: 2010	
Type of Grant	Original	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>3</sup>	
Line	Summary by Development Account	Total Estimated Cost		Expended	
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	50,000.00			
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2010 FFY of Grant Approval: 2010	
PHA Name: Housing Authority of the City of Fountain	Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. Date of CFFP	<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	
Type of Grant		<input checked="" type="checkbox"/> Original Annual Statement <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
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	50,000.00	
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		
Signature of Executive Director		Signature of Public Housing Director	
<i>Katherine Foley</i>		<i>Katherine Foley</i>	
Date		Date	
9-30-2009		9-30-2009	

<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> RIIF funds shall be included here.



**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		Locality (City/County & State)			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name CO071 Grinde Manor	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
B.	Physical Improvements Subtotal	Annual Statement	\$40,000.00	\$40,000.00		\$50,000.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment				\$35,000.00	
E.	Administration					
F.	Other					
G.	Operations		\$10,000.00	\$10,000.00	\$15,000.00	
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total	\$50,000	\$50,000.00	\$50,000.00	\$50,000.00	\$50,000.00



<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>4</u> FFY <u>2013</u>			Work Statement for Year: <u>5</u> FFY <u>2014</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	CO071 Grinde Manor			CO071 Grinde Manor		
Annual Statement	Replace Admin Vehicles	2	\$35,000.00	Replace Boiler System	3	\$50,000.00
	Subtotal of Estimated Cost		\$35,000.00	Subtotal of Estimated Cost		\$50,000.00

<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2</u> FFY <u>2011</u>		Work Statement for Year: <u>3</u> FFY <u>2012</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				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$



<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>4</u> FFY <u>2013</u>		Work Statement for Year: <u>5</u> FFY <u>2014</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				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

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		FFY of Grant: 2006 FFY of Grant Approval: 2006	
PHA Name: Housing Authority of the City of Fountain		Grant Type and Number Capital Fund Program Grant No: CO06P07150106 Replacement Housing Factor Grant No. Date of CFFP:	
Type of Grant		<input checked="" type="checkbox"/> Revised Annual Statement (revision no:3 ) <input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009	
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
	Original	Obligated	
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	-0-	32,000.00
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures	50,136.00	7,199.00
11	1465.1 Dwelling Equipment - Nonexpendable	-0-	15,179.00
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		

<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> PLLAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHIF 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  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2006 FFY of Grant Approval: 2006	
PHA Name: Housing Authority of the City of Fountain	Grant Type and Number Capital Fund Program Grant No: CO06P07130106 Replacement Housing Factor Grant No: Date of CFFP:		
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: 3 )	
	<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009	<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised
		Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	50,136.00	54,378.00
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		
Signature of Executive Director <i>Richard D. Kelly</i>		Signature of Public Housing Director <i>Richard D. Kelly</i>	
Date 9-30-2009		Date 9-30-2009	

<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> PIAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHP 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

Part I: Summary		Grant Type and Number		FFY of Grant: 2007
PHA Name: Housing Authority of the City of Fountain		Capital Fund Program Grant No: CO06P071501-07		FFY of Grant Approval: 2007
		Replacement Housing Factor Grant No:		
		Date of CFP:		
Type of Grant		Revised Annual Statement (revision no:2 )		
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		<input checked="" type="checkbox"/> Revised Annual Statement (revision no:2 )		
Line	Summary by Development Account	Total Estimated Cost	Obligated	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			
3	1408 Management Improvements			
4	1410 Administration (may not exceed 10% of line 21)			
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement	-0-	9,103.00	1,103.00
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable	20,000.00	9,420.00	7,890.00
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment	31,216.00	32,693.00	26,874.00
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1493.1 Relocation Costs			
17	1499 Development Activities <sup>4</sup>			

<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> RIF 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  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2007	FFY of Grant Approval: 2007
PHA Name: Housing Authority of the City of Fountain	Grant Type and Number Capital Fund Program Grant No: C006P071501-07 Replacement Housing Factor Grant No: Date of CFFP:		
Type of Grant		<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009 <input type="checkbox"/> Revised Annual Statement (revision no: 2 )	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Obligated
18a	1501 Collateralization of Debt Service paid by the PHA		
18ba	9000 Collateralization of Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	51,216.00	51,216.00
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		
Signature of Executive Director <i>Patricia Joly</i>		Signature of Public Housing Director <i>Patricia Joly</i>	
Date 9-30-09		Date 9-30-09	

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary		Grant Type and Number		FFY of Grant: 2008	
PHA Name: Housing Authority of the City of Fountain		Capital Fund Program Grant No: CO06P07150108		FFY of Grant Approval: 2008	
		Replacement Housing Factor Grant No:			
		Date of CFFP:			
Type of Grant		<input checked="" type="checkbox"/> Revised Annual Statement (revision no:1 ) <input type="checkbox"/> Final Performance and Evaluation Report			
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		Reserve for Disasters/Emergencies			
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009			
Line	Summary by Development Account	Original	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	5,699.00	-0-		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	-0-	20,000.00	5,136.00	5,136.00
10	1460 Dwelling Structures	50,000.00	35,699.00		
11	1465 1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<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 CFFP 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  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2008	
PHA Name: of the City of Fountain	Grant Type and Number Capital Fund Program Grant No: C006P07150108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: 2008	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2009		
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup> Obligated
			Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18b2	9090 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant <sup>3</sup> (sum of lines 2 - 19)	50,000.00	5,136.00
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		
Signature of Executive Director		Signature of Public Housing Director	
<i>[Signature]</i>		<i>[Signature]</i>	
Date		Date	
9-30-2009		9-30-2009	

<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 CFF Grants for operations.  
<sup>4</sup> RHIF 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  
 OMB No. 2577-0226  
 Expires: 4/30/2011

Part I: Summary		FFY of Grant: 2009 ARRA FFY of Grant Approval: 2009 ARRA	
PIA Name: Housing Authority of the City of Fountain		Grant Type and Number Capital Fund Program Grant No: C006S07150109 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		<input type="checkbox"/> Revised Annual Statement (revision no: ) <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
1	Total non-CFP Funds		Expended
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement	70,503.00	50,836.00
10	1460 Dwelling Structures		50,836.00
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>		FFY of Grant: 2009 ARRA	
PHA Name: Housing Authority of the City of Fountain	Grant Type and Number Capital Fund Program Grant No: CO06807150109 Replacement Housing Factor Grant No: Date of CTFP:	FFY of Grant Approval: 2009 ARRA	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no: )	
Summary by Development Account	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised
18a	1501 Collateralization of Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization of Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	70,503.00	50,836.00
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		
Signature of Executive Director <i>Katherine Foley</i>		Signature of Public Housing Director <i>Katherine Foley</i>	
Date 9/30/2009		Date 9/30/2009	

<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 CTFP 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

Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval: 2009	
PHA Name: Housing Authority of the City of Fountain		Grant Type and Number Capital Fund Program Grant No. C006P07150109 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Estimated Cost Revised <sup>1</sup>	Total Actual Cost <sup>1</sup> Expended
Line	Original	Obligated	
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>2</sup>	55,215.00	
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
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 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		

<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> PELAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RIIF 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  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2009	FFY of Grant Approval:
PHA Name: Housing Authority of the City of Fountain	Grant Type and Number Capital Fund Program Grant No: CO06P07150109 Replacement Housing Factor Grant No: Date of CFFPP:		
Type of Grant		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Obligated
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	55,215.00	
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		
Signature of Executive Director <i>Gucharm Polby</i>		Signature of Public Housing Director <i>Gucharm Polby</i>	
Date 9-30-2009		Date 9-30-2009	

<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 CFF Grants for operations.  
<sup>4</sup> RIIF funds shall be included here.

