

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Lakeland Housing Authority</u> PHA Code: <u>FL011</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2010</u>												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>453</u> Number of HCV units: <u>1445</u>												
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <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 <table border="1"> <tr> <th>PH</th> <th>HCV</th> </tr> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
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PHA 2:													
PHA 3:													
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.												
5.1	Mission. 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: To provide quality, affordable housing and self-sufficiency opportunities in an effective and professional manner.												
5.2	Goals and Objectives. 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. <p style="text-align: center;">Goals and Objectives</p> <p>Goal #1: Regain high performing status in Public Housing and sustain it in Section 8.</p> <p>Maintain a public housing vacancy rate of 2% or less.</p> <p>Maintain an average work order response time of less than three days.</p> <p>Collect at least 97% of the rent and other charges excluding fraud recovery and major tenant abuse due to LHA.</p> <p>Reduce utility usage (including water) by 25% by December 31, 2014.</p> <p>Maintain a Section 8 lease-up rate of at least 98% while not exceeding HUD limitations.</p> <p>Continue and improve task tracking / management by objectives.</p> <p>Enhance internal operations to reduce costs, improve efficiencies, and become even more effective and professional.</p> <p>Goal #2: Maintain and improve our public image through enhanced communication, coordination, and accountability with outside entities, among the staff and with residents.</p> <p>Continue to meet monthly with the Resident Advisory Board and other residents in a variety of forums to provide the opportunity for input and feedback about agency operations.</p> <p>Ensure that there are at least 8 positive media stories a year.</p> <p>Deliver at least 12 talks to groups a year about the activities of LHA, including, but not limited to, governmental, private sector, public sector, civic, religious, women, and minority organizations.</p> <p>Utilize technology to continue improving our public image. For example, double the annual number of hits on the LHA website by December 31, 2012.</p> <p>The Executive Director shall take a Lakeland decision maker to lunch at least 12 times a year.</p> <p>Goal #3: Be the premier innovative and effective affordable housing provider in Florida.</p>												

	<p>Close out the HOPE VI grant by June 30, 2011.</p> <p>Apply for additional housing choice vouchers as they become available.</p> <p>Seek out new funding opportunities as they become available.</p> <p>Partner with the Lakeland Polk Housing Corporation and other housing providers to increase the availability of affordable housing in its jurisdiction by 500 units by December 31, 2014.</p> <p>Assist at least 50 families into homeownership through the Section 8 Homeownership Program, the HOPE VI Program, or other programs by December 31, 2014.</p> <p>Incorporate non-traditional entrepreneurial methods and practices that positively impact affordable housing in LHA's jurisdiction.</p> <p>Incorporate financially feasible Green and Sustainability Best Practices in all future developments.</p> <p>Obtain at least \$100 million in grants and/or leveraging from all sources by December 31, 2014.</p> <p>Goal #4: Increase and encourage the self-sufficiency efforts of all residents.</p> <p>Assist 65 % of LHA children who participate in the 21st Century After School Program in attaining academic success as measured by the students FCAT scores so that the percentage passing the FCAT equals or exceeds the Polk County average.</p> <p>Assist 90% of LHA children who participate in the 21st Century After School Program to achieve a higher grade point average than the proceeding year.</p> <p>Increase the usage of LHA educational and computer literacy programs by 75% by December 31, 2014. (Subject to receiving the grant we have already applied for)</p> <p>As of July 1, 2009 the median LHA non-elderly non-disabled public housing resident household earned income is \$10,952.50. Increase the median household earned income of this target population to \$13,143.00 by December 31, 2014.</p> <p>Substantially increase the number of LHA seniors and people with disabilities using LHA sponsored programs by December 31, 2014.</p> <p>Goal #5: Maintain a high level of employee relations and morale.</p> <p>Enhance lines of communications through staff meetings and other necessary internal communications to provide updates and progress reports about agency activities.</p> <p>Continue to reward performance through the timely implementation of a performance management system.</p> <p>Encourage and support staff partaking in training and continuing education opportunities to the greatest degree possible within funding constraints.</p> <p>Conduct an annual employee satisfaction survey.</p>													
6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p style="text-align: center;">Our ACOP and Administrative Plan have been amended to comply with HUD required changes. In addition:</p> <ol style="list-style-type: none"> 1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures: No Changes 2. Financial Resources: Changes are reflected in our Supporting Documentation 3. Rent Determination: No Changes 4. Operation and Management: No Changes 5. Grievance Procedures: No Changes 6. Designated Housing for Elderly and Disabled Families: No Changes. The following properties have been designated: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Designation of Public Housing Activity Description</td></tr> <tr> <td>1a. Development name: Cecil Gober</td></tr> <tr> <td>1b. Development (project) number: FL-011-006</td></tr> <tr> <td>2. Designation type:</td></tr> <tr> <td style="padding-left: 20px;">Occupancy by only the elderly <input type="checkbox"/></td></tr> <tr> <td style="padding-left: 20px;">Occupancy by families with disabilities <input type="checkbox"/></td></tr> <tr> <td style="padding-left: 20px;">Occupancy by only elderly families and families with disabilities <input checked="" type="checkbox"/></td></tr> <tr> <td>3. Application status (select one)</td></tr> <tr> <td style="padding-left: 20px;">Approved; included in the PHA's Designation Plan <input type="checkbox"/></td></tr> <tr> <td style="padding-left: 20px;">Submitted, pending approval <input type="checkbox"/></td></tr> <tr> <td style="padding-left: 20px;">Planned application <input checked="" type="checkbox"/></td></tr> <tr> <td>4. Date this designation approved, submitted, or planned for submission: (04/01/2010)</td></tr> <tr> <td>5. If approved, will this designation constitute a (select one)</td></tr> </table>	Designation of Public Housing Activity Description	1a. Development name: Cecil Gober	1b. Development (project) number: FL-011-006	2. Designation type:	Occupancy by only the elderly <input type="checkbox"/>	Occupancy by families with disabilities <input type="checkbox"/>	Occupancy by only elderly families and families with disabilities <input checked="" type="checkbox"/>	3. Application status (select one)	Approved; included in the PHA's Designation Plan <input type="checkbox"/>	Submitted, pending approval <input type="checkbox"/>	Planned application <input checked="" type="checkbox"/>	4. Date this designation approved, submitted, or planned for submission: (04/01/2010)	5. If approved, will this designation constitute a (select one)
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	<input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
	6. Number of units affected: 33 Elderly / 4 Disabled 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
	Designation of Public Housing Activity Description 1a. Development name: The Manor at Washington Oaks 1b. Development (project) number: FL-011-015 2. Designation type: Occupancy by only the elderly <input checked="" type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/> 3. Application status (select one) Approved; included in the PHA's Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/> 4. Date this designation approved, submitted, or planned for submission: (04/01/2010) 5. If approved, will this designation constitute a (select one) <input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan? 7. Number of units affected: 30 7. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
	7. Community Service: No Changes 8. Safety and Crime Prevention: No Changes 9. Pets: No Changes 10. Civil Rights Certification: No Changes 11. Fiscal Year Audit: The latest audits are available for review 12. Asset Management: No Changes 13. Violence Against Women Act: No Changes (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. From the Central Office at 430 Hartsell Ave, at each of the AMP Offices and on the Web Site.
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> See Attachments
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. 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.
8.2	Capital Fund Program Five-Year Action Plan. 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.
8.3	Capital Fund Financing Program (CFFP). <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.

Housing Needs. 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.

Housing Needs

Housing Needs of Families in the Jurisdiction							
By Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ability	Size	Location
Income <= 30% of AMI	1997	5	5	5	5	5	5
Income >30% but <=50% of AMI	1520	4	4	4	4	4	4
Income >50% but <80% of AMI	2403	3	3	3	3	3	3
Elderly	1662	4	4	4	4	4	4
Families with Disabilities	Un-known						
Black	1952	3	3	3	3	3	3
Hispanic	259	3	3	3	3	3	3
Race/Ethnicity							
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s Indicate year: 2005
☐ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
☐ American Housing Survey data Indicate year:
☐ Other housing market study Indicate year:
☐ Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	336		55
Extremely low income <=30% AMI	209	62.2%	
Very low income (>30% but <=50% AMI)	88	26.1%	
Low income (>50% but <80% AMI)	39	11.6%	
Families with children	278	82.7%	
Elderly families	17	5%	
Families with Disabilities	41	12.2%	
Race/ethnicity – Black	209	62.2%	
Race/ethnicity – White	125	37.2%	
Race/ethnicity – Indian	1	.20%	
Race/ethnicity – Asian	0	0	
Characteristics by Bed- room Size (PH Only)			
1BR	112	33.3%	9

2 BR	132	39.2%	36
3 BR	70	20.8%	8
4 BR	22	6.5%	2
5 BR	0	0	0
5+ BR	0	0	0

Is the waiting list closed (select one)? No ☒ Yes If yes: How long has it been closed (# of months)? **Eleven (11) months**
Does the PHA expect to reopen the list in the PHA Plan year? ☒ No ☐ Yes
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☒ No ☐ Yes

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	201		59
Extremely low income <=30% AMI	73	36.3%	
Very low income (>30% but <=50% AMI)	87	43.2%	
Low income (>50% but <80% AMI)	41	20.3%	
Families with children	160	79.6%	
Elderly families	22	10.9%	
Families with Disabilities	19	9.4%	
White	47	23.3%	
Black	153	76.1%	
Native American	0	0	
Asian	1	.40%	

Is the waiting list closed (select one)? ☐ No ☒ Yes
If yes: How long has it been closed (# of months)? **Twenty six (26) months.**
Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☒ Yes
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☐ No ☒ Yes except for Public Housing Relocates

Strategy for Addressing Housing Needs. 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. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.**

Strategy for Addressing Housing Needs

C. Strategy for Addressing Needs
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**, and the Agency's reasons for choosing this strategy.

9.1 (1) Strategies
Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:
Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☐ Reduce turnover time for vacated public housing units
- ☐ Reduce time to renovate public housing units
- ☐ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☒ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☐ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☐ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☐ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program

- ☐ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
☐ Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- ☒ Apply for additional section 8 units should they become available
☒ Leverage affordable housing resources in the community through the creation of mixed – finance housing
☒ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
☐ Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
☐ Employ admissions preferences aimed at families with economic hardships
☒ Adopt rent policies to support and encourage work
☐ Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- ☒ Employ admissions preferences aimed at families who are working
☒ Adopt rent policies to support and encourage work
☐ Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- ☒ Seek designation of public housing for the elderly
☒ Apply for special-purpose vouchers targeted to the elderly, should they become available
☐ Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- ☒ Seek designation of public housing for families with disabilities
☐ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
☒ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
☒ Affirmatively market to local non-profit agencies that assist families with disabilities
☐ Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- ☒ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
☐ Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- ☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
☒ Market the section 8 program to owners outside of areas of poverty /minority concentrations
☐ Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
☒ Staffing constraints

	<input checked="" type="checkbox"/> Limited availability of sites for assisted housing <input checked="" type="checkbox"/> Extent to which particular housing needs are met by other organizations in the community <input checked="" type="checkbox"/> Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA <input checked="" type="checkbox"/> Influence of the housing market on PHA programs <input checked="" type="checkbox"/> Community priorities regarding housing assistance <input checked="" type="checkbox"/> Results of consultation with local or state government <input checked="" type="checkbox"/> Results of consultation with residents and the Resident Advisory Board <input checked="" type="checkbox"/> Results of consultation with advocacy groups <input type="checkbox"/> Other: (list below)																																				
10.0	<p>Additional Information. 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>The following table reflects the progress we have made in achieving our goals and objectives:</p> <table border="1"> <tr> <th colspan="2">Goal #1: Having become a high performing housing authority in both the Public Housing and Section 8 programs, LHA shall sustain it.</th></tr> <tr> <th>Objective</th><th>Progress</th></tr> <tr> <td>Improve the accuracy of rent calculation and the sufficiency of the documentation in tenant files in both public housing and Section 8 so that quality control indicates an accuracy rate in excess of HUD program high performance standards by December 31, 2006 and sustain it thereafter.</td><td>Accomplished. Also to be noted, LHA had no audit findings in 2005, 2006, 2007 or 2008.</td></tr> <tr> <td>Maintain a Section 8 lease-up rate of at least 98%.</td><td>Accomplished, but over spent in 2008. Close monitoring by management. Applied for additional vouchers and set aside money.</td></tr> <tr> <td>Continue and improve task tracking / management by objectives which incorporates appropriate elements of PHAS, SEMAP, CSS Workplan and similar existing measures.</td><td>On Going Access database helps with the grants tracking. Managers review PHAS and SEMAP regularly throughout the year. Awarded contract to Yardi Systems – will provide for more efficiency. 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Final phase of Hope VI is due to start as soon as the market allows. Due to the real estate market the remaining HOPE VI dollars (\$1.9M) are proposed to be used to create a lease purchase program, targeting approximately twenty homes in the Lakeland area. LHA shall utilize West Lake Realty, Inc. to locate and acquire the homes to be included in the Lease Purchase program.</td></tr> <tr> <td>Develop staff and organizational capability so that LHA or an affiliate is prepared to manage its third-party owned rental properties by December 31, 2009.</td><td>Created West Lake Management, LLC to manage Dakota Park and Renaissance.</td></tr> <tr> <td>Maintain eligibility to apply for additional housing choice vouchers as they become available.</td><td>Accomplished</td></tr> <tr> <td>Partner with the Lakeland Polk Housing Corporation and other housing providers to increase the availability of affordable housing in its jurisdiction by 500 units by December 31, 2009.</td><td>Through the LPHC, 100 units of affordable housing were created in Bartow at the Manor.</td></tr> <tr> <td>Assist at least 20 families into homeownership through the Section 8 Homeownership Program by December 31, 2009.</td><td>Pursuing Low Income Housing Tax Credit program financing for affordable housing, including joint venture application in Mulberry. Utilizing ARRA funds and applying for Competitive Capital funding. Applying for FHLB AHP program funds. Crating Lease Purchase Program to utilize remaining HOPE VI funding. Working in Consortium with County, City and Keystone Challenge fund on NSP 2. Preparing marketing materials for direct sale of tax credits to local area corporations. Implementing West Lake Realty, Inc. to capture available real estate commissions in transactions as possible.</td></tr> <tr> <td>Expand the LHA business plan to include non-traditional entrepreneurial methods and practices that positively impact affordable housing in LHA's jurisdiction.</td><td>Doing all that we can</td></tr> </table>	Goal #1: Having become a high performing housing authority in both the Public Housing and Section 8 programs, LHA shall sustain it.		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Objective	Progress																																				
Improve the accuracy of rent calculation and the sufficiency of the documentation in tenant files in both public housing and Section 8 so that quality control indicates an accuracy rate in excess of HUD program high performance standards by December 31, 2006 and sustain it thereafter.	Accomplished. Also to be noted, LHA had no audit findings in 2005, 2006, 2007 or 2008.																																				
Maintain a Section 8 lease-up rate of at least 98%.	Accomplished, but over spent in 2008. Close monitoring by management. Applied for additional vouchers and set aside money.																																				
Continue and improve task tracking / management by objectives which incorporates appropriate elements of PHAS, SEMAP, CSS Workplan and similar existing measures.	On Going Access database helps with the grants tracking. Managers review PHAS and SEMAP regularly throughout the year. Awarded contract to Yardi Systems – will provide for more efficiency. Creation of a procurement log is in progress.																																				
Goal #2: Continue to improve our public image through enhanced communication, coordination, and accountability with outside entities, among the staff and with residents.																																					
Objective	Progress																																				
Continue to meet monthly with the Resident Advisory Board and other residents in a variety of forums to provide the opportunity for input and feedback about agency operations.	Meet monthly with LHARAA and other residents at our various public housing sites.																																				
Generate at least 8 positive media stories a year.	Partially accomplished																																				
Deliver at least 24 talks to groups a year about the activities of LHA, including; but not limited to, governmental, private sector, public sector, civic, religious, women, and minority organizations.	Partially Accomplished																																				
Goal #3: Be the premier innovative and effective affordable housing provider in Florida.																																					
Objective	Progress																																				
Utilize LHA's role as the HOPE VI developer to implement the remaining phases by end of the HOPE VI grant period.	Accomplished. Final phase of Hope VI is due to start as soon as the market allows. Due to the real estate market the remaining HOPE VI dollars (\$1.9M) are proposed to be used to create a lease purchase program, targeting approximately twenty homes in the Lakeland area. LHA shall utilize West Lake Realty, Inc. to locate and acquire the homes to be included in the Lease Purchase program.																																				
Develop staff and organizational capability so that LHA or an affiliate is prepared to manage its third-party owned rental properties by December 31, 2009.	Created West Lake Management, LLC to manage Dakota Park and Renaissance.																																				
Maintain eligibility to apply for additional housing choice vouchers as they become available.	Accomplished																																				
Partner with the Lakeland Polk Housing Corporation and other housing providers to increase the availability of affordable housing in its jurisdiction by 500 units by December 31, 2009.	Through the LPHC, 100 units of affordable housing were created in Bartow at the Manor.																																				
Assist at least 20 families into homeownership through the Section 8 Homeownership Program by December 31, 2009.	Pursuing Low Income Housing Tax Credit program financing for affordable housing, including joint venture application in Mulberry. Utilizing ARRA funds and applying for Competitive Capital funding. Applying for FHLB AHP program funds. Crating Lease Purchase Program to utilize remaining HOPE VI funding. Working in Consortium with County, City and Keystone Challenge fund on NSP 2. Preparing marketing materials for direct sale of tax credits to local area corporations. Implementing West Lake Realty, Inc. to capture available real estate commissions in transactions as possible.																																				
Expand the LHA business plan to include non-traditional entrepreneurial methods and practices that positively impact affordable housing in LHA's jurisdiction.	Doing all that we can																																				

Goal #4: Implement income generating and cost saving measures while increasing operational efficiency in order to reduce LHA's dependency on HUD funding.	
Objective	Progress
Complete implementation of the Energy and Water Cost savings programs by December 31, 2007.	Re-evaluating
By December 31, 2006 begin marketing LHA staffing assets to others.	Doing this
Develop and implement a plan to obtain \$50 million of grant or leveraged funds by December 31, 2009 and ensure compliance with all grant agreements.	The Manor - \$16.4M Paul Colton Villas - \$13.8M Bonnet Shores - \$14.8M Cecil Gober/John Wright (DCA Grant) \$669K Total: \$45.6M
Maximize the HUD funding systems (including the Tenant Integrity Program) to better fund LHA without unduly burdening the residents.	Accomplishing

Goal #5: Increase and encourage the self-sufficiency efforts of all residents.	
Objective	Progress
Assist children who reside in LHA properties to attain academic success as measured by increases in FCAT scores so that the percentage passing the FCAT equals or exceeds the Polk County average.	Programs are in place, but FCAT scores are not available to LHA. However, LHA has contracted with Morgan Platt to monitor and evaluate our After School Program participants FCAT scores and control group.
Increase the number of children using LHA educational and computer literacy programs by 20% by December 31, 2009.	LHA has exceeded this goal and has made computers easily accessible for our children with a computer lab at each public housing site.
Adult residents will be afforded the opportunity to increase their literacy skills and to continue their adult educational goals through the use of Technical Learning Centers so that at least an additional 20% have either a high school diploma or GED by December 31, 2009.	The opportunity to increase the resident literacy skills and to continue adult educational goals through the use of technical learning centers is currently provided and is near accomplishing. LHA has provided easy access for resident participation.
LHA shall assist its non-elderly non-disabled public housing residents increase the LHA average annual household income by 35% by December 31, 2009.	Ongoing
Substantially increase the number of LHA seniors and people with disabilities using LHA sponsored programs by December 31, 2009.	On schedule
Increase the number of people participating in the LHA Public Housing Family Self-Sufficiency Program to 50 by December 31, 2009.	Accomplished

Goal #6: Improve employee relations and morale.	
Objective	Progress
Improve lines of communications through staff meetings and other necessary internal communications to provide updates and progress reports about agency activities.	Conducted communication training for all LHA staff. Completed HR Training Plan for 2009.
Continue to reward performance through the timely implementation of the performance evaluation / merit increase system.	Conducted interviewing techniques training for supervisor and managers. Reviewing our performance management forms and process for improvement.
Encourage and support staff partaking in continuing education opportunities to the greatest degree possible within funding constraints.	On Going

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which requires formal approval of the Board of Commissioners.

(c) Other information:

The Lakeland Housing Authority has decided to elect to utilize Section 226 of the 2008 Appropriations Act as allowed for in PIH Notice 2008-16.

11.0	<p>Required Submission for HUD Field Office Review. 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. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (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) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (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. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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Hope VI and Mixed Finance

HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- ☒ Yes ☐ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name: Washington Ridge
2. Development (project) number: FL011-013, 014, 015
3. Status of grant: (select the statement that best describes the current status)
 - ☐ Revitalization Plan under development
 - ☐ Revitalization Plan submitted, pending approval
 - ☐ Revitalization Plan approved
 - ☒ Activities pursuant to an approved Revitalization Plan underway

- ☒ Yes ☐ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below: **West Lake**

- ☒ Yes ☐ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
If yes, list developments or activities below:

Washington Oaks and Lake Ridge H/O Section 23 conversion
Paul Colton Villas - possible
Bonnet Shores - possible
West Lake – possible
Scattered Site Homeownership with Section 23

- ☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
If yes, list developments or activities below:

Demolition and/or Disposition

1. ☒ Yes ☐ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

- ☐ Yes ☒ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

Demolition/Disposition Activity Description
1a. Development name: Bonnet Shores / Paul Colton Villas
1b. Development (project) number: FL011-007
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(5/8/2008)</u>
5. Number of units affected: 147
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 6/5/09 b. Projected end date of activity: 6/30/10

Demolition/Disposition Activity Description
1a. Development name: Washington Park
1b. Development (project) number: FL011-003
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(8/23/01)</u>
5. Number of units affected: 0 (4 acres of vacant land)
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity:

- a. Actual or projected start date of activity: 6/5/09
b. Projected end date of activity: 6/30/10

Demolition/Disposition Activity Description

1a. Development name: Westlake/Westlake Addition

1b. Development (project) number: FL011-002/004

2. Activity type: Demolition ☒

Disposition ☒

3. Application status (select one)

Approved ☐

Submitted, pending approval ☐

Planned application ☒

4. Date application approved, submitted, or planned for submission: (09/2010)

5. Number of units affected: 120

6. Coverage of action (select one)

☐ Part of the development

☒ Total development

7. Timeline for activity:

a. Actual or projected start date of activity: 6/5/11

b. Projected end date of activity: 6/30/12

Conversion of Public Housing to Tenant-Based Assistance

Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description
☐ Yes ☒ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

Homeownership Programs

A. Public Housing

1. ☒ Yes ☐ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)
2. Activity Description
☐ Yes ☒ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table?

B. Section 8 Tenant Based Assistance

1. ☒ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ?
2. Program Description:
- a. Size of Program
☒ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?
- If the answer to the question above was yes, which statement best describes the number of participants? (select one)
- ☒ 25 or fewer participants
☐ 26 - 50 participants
☐ 51 to 100 participants
☐ more than 100 participants
- b. PHA-established eligibility criteria
☒ Yes ☐ No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria below:
See Admission Preferences for Section 8.

Capacity

The Lakeland Housing Authority's Section 8 Homeownership Program has the required capacity because a purchasing family must invest at least three percent of the purchase price of the home they are buying in the property. This can take the form of either a down payment, closing costs, or a combination of the two. Of this sum, at least one percent of the purchase price must come from the family's personal resources.

In addition, the family must qualify for the mortgage loan under a lender's normal lending criteria taking into account the fact that this is by definition a low-income family.

Project-Based Vouchers

The Lakeland Housing Authority may project-base up to 20% of their Section 8 Housing Choice Vouchers. Currently Lakeland Housing Authority currently administers 1,445 Housing Choice Vouchers, and may project-base 289. The properties will be located somewhere within the jurisdiction of the Lakeland Housing Authority. If any of the locations about to be selected by the Lakeland Housing Authority are found to be in a census tract with poverty rates of more than 20 percent, the Housing Authority will seek an exception from HUD.

This action is consistent with the Agency Plan in the following ways:

- It is consistent with the Mission Statement of the Lakeland Housing Authority.
- It expands the supply of assisted housing
- It increases assisted housing choices
- It conducts outreach efforts to potential voucher landlord participants
- It helps ensure Equal Opportunity in Housing for all Americans
- Project-basing will help the Lakeland Housing Authority meet the statutory goals of deconcentrating poverty and expanding housing and economic opportunities.

The Lakeland Housing Authority is utilizing project-based vouchers for a portion of its housing choice vouchers because of the same reasons that the decision is consistent with the Agency Plan, it expands the supply, increase choice, assists with fair housing goals, and will assist in deconcentrating Section 8 participants.

LHA has exercised this discretion in project-basing 2 units to Habitat for Humanities of Lakeland and 99 to the Manor at West Bartow.

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.

10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.

11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.

12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.

13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

(a) Hope VI or Mixed Finance Modernization or Development.

1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>

(b) Demolition and/or Disposition.

With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm

Note: This statement must be submitted to the extent that **approved and/or pending** demolition and/or disposition has changed.

(c) Conversion of Public Housing.

With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

(d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.

(e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 **Capital Improvements.** This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report.

PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- 1. At the end of the program year; until the program is completed or all funds are expended;
- 2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- 3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 **Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

9.1 Strategy for Addressing Housing Needs. Provide a 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. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

Attachment A

Lakeland Housing Authority

Five-Year Plan

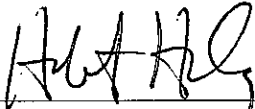
Fiscal Years 01/01/2010 – 01/01/2014

Comments of the Resident Advisory Board

The Lakeland Housing Authority conducted a meeting with its Resident Advisory Board (RAB) on October 16, 2009.

The Agency Plan and the Capital Fund Program were thoroughly discussed. The Resident Advisory Board had comments, which are included as an attachment.

The Lakeland Housing Authority's response to the Resident Advisory Board's comments are also attached.

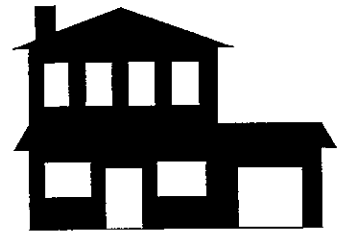


Herbert Hernandez, Executive Director
Lakeland Housing Authority

October 16, 2009

LHARAA

Lakeland Housing Authority Resident Advisory Association, Inc.



November 4, 2009

Mr. Herb Hernandez
Executive Director
Lakeland Housing Authority
1529 West Main Street
Lakeland, Florida 33607

Dear Mr. Hernandez:

Re: Comments From LHARAA Regarding the 2009 LHA PH Agency Plan

Lakeland Housing Authority Resident Advisory Association (LHARAA) appreciates Lakeland Housing Authority (LHA) ensuring that its input is provided prior to LHA's submittal of its Annual Public Housing Agency Plan (PHA) to the Department of Housing and Urban Development (HUD). As you know, for many months LHARAA has been challenged by the lack of its office space being completed and set up for the use of the Board and the residents. This has hampered us in carrying out our duties including reviewing and commenting on the PHA Plan.

Generally, the LHARAA Board is in agreement with the changes that are included in the Plan and believe that these changes will improve opportunities for current residents and new applicants. LHARAA applauds LHA's effort to address victims of domestic violence and to further provide support for persons with disabilities. Here are our comments:

10.0 TENANT SELECTION AND ASSIGNMENT PLAN (ACOP)

10.1 PREFERENCES

Under this section Lakeland Housing Authority awards a full preference point for voter registration in the process of family selection for housing within each bedroom size category. We assume that presentation of the voter registration card or some method of verification of voter registration is accepted by LHA as evidence to guarantee the award of points in this category.

12.2 TYPES OF VERIFICATION (ACOP) and 10.2 TYPES OF VERIFICATION (Section 8 Administrative Plan) Verification Requirements for Individual Items

The chart that outlines the factors that may be accepted for verification now excludes the voter registration card. The two issues seem to conflict preference points and acceptable types of verification. If the voter registration is acceptable for preference points then the voter registration card should also be used for verification, especially considering that this document is government-issued and a person is required to

Mr. Herb Hernandez

November 4, 2009

Page two

provide a picture identification to receive the voter registration card. LHARAA wants to ensure that further hardships are not imposed on families in accessing housing.

In addition, the evidence of the voter registration for one point in the preference assessment and for verification encourages residents to register to vote and carry out their civic obligations. LHARAA spends much of its time getting residents registered and helping to ensure that we all exercise our right to vote. LHARAA is concerned that this double effect of the use of voter registration will be lost by its exclusion for verification purposes.

4.0 MANAGING THE WAITING LIST (Section 8 Administrative Plan)

“If funding is received for Housing Choice Vouchers that contain specific admission criteria, said criteria shall prevail over the normal admission criteria set forth in this Policy.”

LHARAA would like to be assured that inclusion of this section will not result in having new categories of applicants or specific admission criteria that will overstep the traditional Section 8 applicants who have been on a waiting list and may have been there for an extended length of time.

PHA 5-Year and Annual Plan

Demolition and / or Disposition

Demolition/Disposition Activity Description

Under this activity, LHA is reporting “Demolition / Disposition of Westlake /Westlake Addition.” LHARAA is making special note that this discussion has only been introduced by you in past LHA/LHARAA meetings but there has not been any detailed discussions or decisions in this regard.

Finally, the Lakeland Housing Authority Resident Advisory Association would like to ask that you ensure that its office for the use of residents and the Board be treated with the level of importance that will allow us to carry out the commitments that are included in Lakeland Housing Authority PHA Plan. For the past two years we have been dealing with issues that include the moving of LHARAA’s office to a much smaller complex to

Mr. Herb Hernandez

November 4, 2009

Page three

accommodate a newly funded program. That location did not allow most residents to easily visit our office. The computer system did not work well and the extremely slow dial-up internet access closed down regularly when we were working on the Florida ACCESS program that assists families in seeking needed services. The office was moved back to the Westlake complex in July of this year. However, the phone system and internet access were not installed until one week ago. LHARAA needs stronger support from LHA to help us provide input, meet with residents to hear their concerns, and serve as the liaison and the voice of residents to LHA.

Sincerely,


Lillie M. Brown
President

501 Hartsell Avenue Apartment #1
Lakeland, Florida 33815-4554
Phone (863) 413-3099
Fax (863) 413-2930
Cell (863) 797-9822



The Housing Authority of the City of Lakeland

November 6, 2009

Lillie M. Brown, President
Lakeland Housing Authority Resident Advisory Association
501 Hartsell Avenue, Unit #1
Lakeland, Florida 33815

Dear Ms. Brown:

Please express to your Board the Authority's thanks for your continued cooperation in pursuit of our shared mission. Your participation and advice is greatly appreciated and beneficial.

Your careful review of our Agency Plan has resulted in four comments. Two of the comments relate to the use of the Florida Voter Registration card. My staff has researched the procedures for obtaining a Voter Registration card. The Authority will continue to verify eligibility for the voter registration preference. Although not a form of identification the voter registration card does provide evidence of registration, once identity is established.

The State of Florida does not require the presence of identification when registering to vote/obtaining a voter registration card. The State allows its residents to register by mail without providing proof of identity. You are, however required to show proof of identity before one votes. Attached you will find a copy of the Florida Voter Registration Application for your information. The Authority, therefore, based on this information and upon advice from our auditors has concluded that it would not be prudent to use voter registration cards as a form of identity verification.

Regarding management of the Section 8 Wait List, certain Section 8 programs have different admission criteria. For example, the recently established Veterans Affairs Supportive Housing (VASH) program requires (among other things) that applicants be military veterans. This wait list is separately managed from the main wait list. Qualifying applicants on existing wait lists would be given preference over new applicants.

Lastly, you commented on the "Demolition/Disposition of Westlake/Westlake Addition. You are correct that this topic has only been introduced at previous LHA/LHARAA meetings. There have been no detailed decisions made.

I hope this helps you in understanding our need to make this improvement to our Operating Plan. This has been a long process and your review was impeded by the difficulties encountered during the move to your new offices at West Lake. We will do our best to ensure that this does not happen again, including better planning of moves and related computer and phone technical assistance.

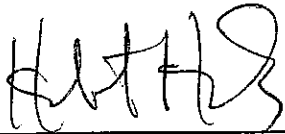
Please do not hesitate to call me with any additional questions or concerns.

Sincerely yours,

John Szyllowicz
for Herbert Hernandez
Executive Director

Attachment B
Lakeland Housing Authority
Five-Year Plan
Fiscal Years 01/01/2010 – 01/01/2014
Challenged Elements

There were no challenged elements to the Housing Authority's Five-Year Agency Plan

A handwritten signature in black ink, appearing to read 'HHH', is positioned above a horizontal line.

Herbert Hernandez, Executive Director
Lakeland Housing Authority

October 9, 2009

Citizen Participation Plan

PARTICIPATION: The LHA will provide for, and encourage, citizen participation emphasizing the involvement of low, very low, and poverty income residents in areas where housing authority funds may be spent. The LHA will encourage the participation of public and assisted housing residents of the Authority. The LHA will provide Agency Plan development information at our public hearings which is required in our Public Housing Agency Plan.

ACCESS TO MEETINGS: The LHA will afford adequate, timely notification of meetings so all citizens can attend our monthly Board of Commissioners meetings. This will include, as appropriate, public notices, legal notices, advertisements, press releases, public service announcements, letters or other means of notifying interested parties. The LHA will provide reasonable accommodations for persons with disabilities to all public hearings, and local meetings. Reasonable accommodations include but are not limited to holding meetings in handicapped accessible buildings when requested.

ACCESS TO INFORMATION: The LHA will provide citizens, public agencies, and other interested parties with reasonable and timely access to information and records relating to their Agency Plan development and all of its components. The public will have the opportunity to receive information, review and submit comments on any proposed submission including the Agency Plan and any Plan amendments to be adopted by the LHA's Board of Commissioners. Information will also be available on the range of programs, the amount of assistance the LHA expects to receive, the amount of funds available and the estimated amount proposed to benefit low, and very low income residents. Special arrangements are available to accommodate access to information for persons with disabilities.

PUBLIC HEARINGS: To obtain citizens views the LHA allows public comment at each Board of Commissioners monthly meeting. These public comment periods address and respond to proposals and comments on:

1. Housing and community development needs
2. Development of proposed activities
3. Review of proposed uses for funds
4. Review of program performance
5. Any other activity or program

TIMELY RESPONSE: The LHA will consider any comments or views of citizens, agencies, units of general local government, or other interested parties concerning their Agency Plan, any amendments to the Plan and all performance reports. The LHA's Resident Services Department will address any written complaints with written responses within 15 working days, where practical. Depending on the nature of the complaint, staff may refer the issue to the Executive Director if the response from staff is unsatisfactory to the complainant. As appropriate, an attachment summarizing comments and responses to comments to the final submission of the Agency Plan will take place.

NON-ENGLISH SPEAKING RESIDENTS: In the event that a significant number of non-English speaking residents can reasonably be expected to participate, the LHA will provide accommodations for non-English speaking residents in the case of public hearings, if such accommodations are available.

SUBSTANTIAL AMENDMENTS: Substantial changes to the Agency Plan will require an amendment to the Plan.

A handwritten signature in black ink, appearing to read 'Herb Hernandez', is written over a horizontal line.

Herbert Hernandez, Executive Director
Lakeland Housing Authority

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: LAKELAND HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14 P01150110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: FFY of Grant Approval: 2010
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 ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	68000			
3	1408 Management Improvements	6000			
4	1410 Administration (may not exceed 10% of line 21)	68736			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15000			
8	1440 Site Acquisition	425000			
9	1450 Site Improvement				
10	1460 Dwelling Structures	25626			
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 ⁴				

¹ To be completed for the Performance and Evaluation Report.

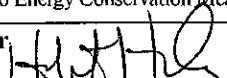
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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

⁴ 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					
PHA Name: LAKELAND HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P01150110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: FFY of Grant Approval: 2010
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 ¹	
		Original	Revised ²	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)	15000			
20	Amount of Annual Grant:: (sum of lines 2 - 19)	687362			
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: 		Date: 10/10/10		Signature of Public Housing Director: _____	
				Date: _____	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

² To be completed for the Performance and Evaluation Report.

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

[illegible]

² To be completed for the Performance and Evaluation Report.

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

¹ 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.

PHA Name:

Federal FFY of Grant:[illegible]

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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: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-10 Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010
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 ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
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 ⁴	176408			

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ 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					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-10 Date of CFFP:			FFY of Grant:2010 FFY of Grant Approval: 2010
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 ¹	
		Original	Revised ²	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)	176408			
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 Herbert Hernandez Date 04/08/10		Signature of Public Housing Director			Date

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

² To be completed for the Performance and Evaluation Report.

Part I: Summary						
PHA Name/Number Housing Authority of the City of Lakeland FL-011			Locality (City/County & State) Lakeland / Polk County, Florida		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	408,743	408,743	408,743	408,743
C.	Management Improvements		6,000	6,000	6,000	6,000
D.	PHA-Wide Non-dwelling Structures and Equipment (1470)		20,000	20,000	20,000	20,000
E.	Administration		68,736	68,736	68,736	68,736
F.	Other					
G.	Operations		137,400	137,400	137,400	137,400
H.	Demolition					
I.	Development (RHF)		905,159	369,396	722,212	
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		1,546,038	1,010,275	1,363,091	640,879
L.	Total Non-CFP Funds					
M.	Grand Total		1,546,038	1,010,275	1,363,091	640,879

Part I: Summary (Continuation)

PHA Name/Number Housing Authority of the City of Lakeland FL-011			Locality (City/county & State) Lakeland / Polk County, Florida		X Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
	FL- 14-011002 West Lake	Annual Statement	273,000	273,000		
	FL-011004 West Lake Addition				273,000	290,500
	FL-011006 Cecil Gober/John Wright		135,743	135,743	135,743	118,243
	HA-Wide – 1470 Light duty maintenance vehicles		10,000	10,000	10,000	10,000
	HA-Wide – 1470 Computer Hardware upgrades		10,000	10,000	10,000	10,000
	HA-Wide – Replacement Housing Factor Funds for the development of housing in accordance with an approved RHF Plan		1,546,038	1,010,275	1,363,091	640,879

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011			Work Statement for Year: 3 FFY 2012		
	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	FL-011002 West Lake			FL-011002 West Lake		
Annual	1450 - Site improvements including, demolition of existing walkways and the installation of new sidewalks, landscaping and site drainage	30 Units	50,000	1450 - Site improvements including, demolition of existing walkways and the installation of new sidewalks, landscaping and site drainage	30 Units	50,000
Statement	1460 -Demolition & Reconstruction of dwelling units to meet current housing standards	30 Units	220,000	1460 -Demolition & Reconstruction of dwelling units to meet current housing standards	30 Units	220,000
	1465 – Appliance Replacement	LS	3,000	1465 – Appliance Replacement	LS	3,000
	FL-011006 Cecil Gober/John Wright			FL-011006 Cecil Gober/John Wright		
	1460 - Interior renovations including new kitchen cabinets, bath fixtures, domestic water distribution system, floor covering, doors & trim	10 Units	69,743	1460 - Interior renovations including new kitchen cabinets, bath fixtures, domestic water distribution system, floor covering, doors & trim	10 Units	69,743
	1460 – Exterior renovations including, roofing, masonry repair, trim & site work	10 Units	60,000	1460 – Exterior renovations including, roofing, masonry repair, trim & site work	10 Units	60,000
	1465 – Appliance Repl	10 Units	6,000	1465 – Appliance Repl	10 Units	6,000
	Subtotal of Estimated Cost		\$ 408,743	Subtotal of Estimated Cost		\$ 408,743

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 3 FFY 2013			Work Statement for Year: 4 FFY 2014		
	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	FL-011004 West Lake Addition			FL-011004 West Lake Addition		
Annual Statement	1450 - Site improvements including, demolition of existing walkways and the installation of new sidewalks, landscaping and site drainage	30 Units	50,000	1450 - Site improvements including, demolition of existing walkways and the installation of new sidewalks, landscaping and site drainage	30 Units	67,500
	1460 - Demolition & Reconstruction of dwelling units to meet current housing standards	30 Units	220,000	1460 - Demolition & Reconstruction of dwelling units to meet current housing standards	30 Units	220,000
	1465 – Appliance Replacement	LS	3,000	1465 – Appliance Replacement	LS	3,000
	FL-011006 Cecil Gober/John Wright			FL-011006 Cecil Gober/John Wright		
	1460 - interior renovations including new kitchen cabinets, bath fixtures, domestic water distribution system, floor covering, doors & trim	10 Units	69,743	1460 - Interior renovations including new kitchen cabinets, bath fixtures, domestic water distribution system, floor covering, doors & trim	7 Units	58,500
	1465 – Appliance Replacement	10 Units	6,000	1465 – Appliance Replacement	7 Units	8,000
	1460 – Exterior renovations including, roofing, masonry repair	10 Units	60,000	1460 – Exterior renovations including, roofing, masonry repair,	7 Units	51,743
	Subtotal of Estimated Cost		\$ 408,743	Subtotal of Estimated Cost		\$ 408,743

Part III: Supporting Pages – Management Needs Work Statement(s)					
Work Statement for Year 1 FFY 2010 See Annual Statement	Work Statement for Year 2 FFY 2011		Work Statement for Year: 3 FFY 2012		
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
		FL-011002 West Lake		FL-011002 West Lake	
		1408 – Management, maintenance and financial training & certification	\$1,000	1408 – Management, maintenance and financial training & certification	\$1,000
		1408 – Computer software upgrades	\$500	1408 – Computer software upgrades	\$500
		1408 – Agency Plan development	\$500	1408 – Agency Plan development	\$500
	FL-011004 West Lake Addition		FL-011004 West Lake Addition		
	1408 – Management, maintenance and financial training & certification	\$1,000	1408 – Management, maintenance and financial training & certification	\$1,000	
	1408 – Computer software upgrades	\$500	1408 – Computer software upgrades	\$500	
	1408 – Agency Plan development	\$500	1408 – Agency Plan development	\$500	
	FL-011006 Cecil Gober/John Wright		FL-011006 Cecil Gober/John Wright		
	1408 – Management, maintenance and financial training & certification	\$1,000	1408 – Management, maintenance and financial training & certification	\$1,000	
	1408 – Computer software upgrades	\$500	1408 – Computer software upgrades	\$500	
	1408 – Agency Plan development	\$500	1408 – Agency Plan development	\$500	
	Subtotal of Estimated Cost	\$6,000	Subtotal of Estimated Cost	\$6,000	

[illegible]

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: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14S011501-10 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval: 2010	
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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements	100,000			
4	1410 Administration (may not exceed 10% of line 21)	145,733			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	140,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	69,900			
10	1460 Dwelling Structures	877,350			
11	1465.1 Dwelling Equipment—Nonexpendable	54,351			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	70,000			
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ 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					
PHA Name: Lakeland Housing Authority	Grant Type and Number Capital Fund Program Grant No: FL14S011501-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2010 FFY of Grant Approval: 2010			
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: 06/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	1,457,334			
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 Herbert Hernandez Date 4/08/10 <div style="text-align: center; margin-top: 10px;"> </div>		Signature of Public Housing Director 		Date 	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

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Part II: Supporting Pages		Grant Type and Number		Federal FFY of Grant: 2010				
PHA Name: Lakeland Housing Authority		Capital Fund Program Grant No: FL14P011501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:						
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 ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide	Management Improvements	1408	LS	100,000				
	Upgrade Security Cameras & Property Mnagement Software							
HA-Wide	Administration							
	Administration of Capital Programs	1410	LS	145,733				
FL-11011006 Cecil Gober/John Wright	Fees & Costs - Associated with capital Programs and Improvements	1430	LS	140,000				
FL-11011006 Cecil Gober/John Wright	Grading & Sitework, including sidewalks, roadway replacement & landscaping	1450	LS	39,900				
	Site Lighting	1450	LS	30,000				
	Total 1450			69,000				
FL-11011006 Cecil Gober/John Wright	Dwelling Structures							
	Upgrade plumbing system	1460	57 Units	200,000				
	Replace Plumbing Fixtures/Water Heaters		57 Units	180,500				
	Upgrade Electrical System		57 Units	110,850				
	Install HVAC & Heat Pumps		57 Units	228,000				

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Annual Statement/Performance and Evaluation Report
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 Capital Fund Financing Program

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14S011501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:			FFY of Grant:2010 FFY of Grant Approval: 2010			
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 ¹	Funds Obligated ²	Funds Expended ²	
FL-11011006 Cecil Gober/John Wright	Building Exterior - Clean repair exterior walls	1460	57 Units	15,500				
	Dwelling Units – Replace Kitchen & Bath Cabinets, repair drywall, floor coverings & framing & trim	1460	57 Units	142,500				
		TOTAL 1460		877,350				
FL-11011006 Cecil Gober/John Wright	Dwelling Equipment – New Kitchen Appliances	1465.1	57 Units	54,351				
FL-11011006 Cecil Gober/John Wright	Relocation – of residents to facilitate capital improvements	1495.1	57 Units	70,000				

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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
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 Expires 4/30/2011

Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-05 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2005 FFY of Grant Approval: 2005
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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	130,226		130,226	130,226
3	1408 Management Improvements	5,000		5,000	5,000
4	1410 Administration (may not exceed 10% of line 21)	61,500		61,500	61,500
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	16,000		16,000	16,000
8	1440 Site Acquisition				
9	1450 Site Improvement	21,000		21,000	14,930
10	1460 Dwelling Structures	402,000		402,000	387,253
11	1465.1 Dwelling Equipment—Nonexpendable	2,000		2,000	2,000
12	1470 Non-dwelling Structures	1,000		1,000	1,000
13	1475 Non-dwelling Equipment	10,000		10,000	10,000
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	500		500	500
17	1499 Development Activities ⁴	1,000		1,000	1,000

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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-05 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2005 FFY of Grant Approval: 2005	
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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	37,030		37,030	37,030
20	Amount of Annual Grant:: (sum of lines 2 - 19)	687,256		687,256	666,439
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 Herbert Hernandez Date 				Signature of Public Housing Director Date	

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority			Grant Type and Number Capital Fund Program Grant No: FL14P011501-05 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2005		
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 ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide	Operations	1406	LS	130,226		130,226	130,226	Complete
HA-Wide Management Improvements	Update Agency Plan	1408	LS	3,000		3,000	3,000	Complete
	Computer Software	1408	LS	2,000		2,000	2,000	Complete
	Total	1408		5,000		5,000	5,000	
HA-Wide Admin	Prorated administrative support costs	1410	LS	61,500		61,500	61,500	Complete
HA-Wide Fees & Costs	Security inspector fees	1430	LS	3,500		3,500	3,500	Complete
	Architectural Services for Capital Programs	1430	LS	12,500		12,500	12,500	Complete
	Total	1430		16,000		16,000	16,000	
FL-011007 Paul Colton/Bonnet Shores	Sidewalk repairs & erosion control	1450	LS	7,200		7,200	1,130	In Progress
	Fence Replacement	1450	LS	13,800		13,800	13,800	Complete
	Total	1450		21,000		21,000	14,930	
FL-011002 West Lake	Painting, roof repairs, new doors	1460	LS	34,233		34,233	19,486	In Progress
FL-011007 Paul Colton/Bonnet Shores	Interior Renovations including water line repairs, painting, cabinet replacement. Exterior renovations including roof & gutter repair, soffit repair	1460	LS	367,767		367,767	367,767	Complete
	Total	1460		402,000		402,000	387,253	

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Part II: Supporting Pages								
PHA Name:		Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant:			
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 ¹	Funds Obligated ²	Funds Expended ²	
FL-011002 West Lake	Non-Dwelling Equipment – Appliance replacement	1465	LS	1,000		1,000	1,000	Complete
FL-011007 Paul Colton/Bonnet Shores	Non-Dwelling Equipment – Appliance replacement	1465	LS	1,000		1,000	1,000	Complete
	Total	1465		2,000		2,000	2,000	
FL-011007 Paul Colton/Bonnet Shores	Non-Dwelling Structures – Community room Painting & floor covering	1470	LS	1,000		1,000	1,000	Complete
FL-011007 Paul Colton/Bonnet Shores	Non-Dwelling Equipment – Office Furniture	1475	LS	1,000		1,000	1,000	Complete
HA-Wide	Non-Dwelling Equipment – Tools and equipment for force labor	1475	LS	2,000		2,000	2,000	Complete
HA-Wide	Non-Dwelling Equipment – Light duty vehicle for maintenance	1475	LS	7,000		7,000	7,000	Complete
	Total	1475		10,000		10,000	10,000	
HA-Wide	Relocation Costs - during renovations	1495	LS	500		500	500	Complete
HA Wide	Development Activities	1499	LS	1,000		1,000	1,000	Complete

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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-06 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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	137,756	137,756	137,756	137,756
3	1408 Management Improvements	5,000	30,600	30,600	4,712
4	1410 Administration (may not exceed 10% of line 21)	61,500	61,500	61,500	61,500
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	16,000	34,700	34,700	34,700
8	1440 Site Acquisition				
9	1450 Site Improvement	21,000	26,820	14,930	
10	1460 Dwelling Structures	402,000	276,380	276,380	
11	1465.1 Dwelling Equipment—Nonexpendable	2,000	56,000	56,000	56,000
12	1470 Non-dwelling Structures	1,000	2,000	2,000	
13	1475 Non-dwelling Equipment	10,000	10,000	10,000	2,134
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	500	22,000	3,010	3,010
17	1499 Development Activities ⁴	1,000			

¹ To be completed for the Performance and Evaluation Report.

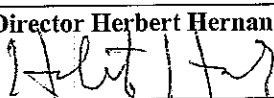
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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-06 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: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	37,030	37,030	34,430	34,394
20	Amount of Annual Grant:: (sum of lines 2 - 19)	694,786	694,786	661,306	334,206
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 Herbert Hernandez Date 		Signature of Public Housing Director		Date	

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority			Grant Type and Number Capital Fund Program Grant No: FL14P011501-06 CFFP (Yes/ 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 ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide	Operations	1406	LS	137,756	137,756	137,756	137,756	Complete
HA-Wide	Management Improvements – Financial management training	1408	LS	3,000	13,000	13,000	4,712	In Progress
HA-Wide	Management Improvements – Procurement, software & administrative training	1408	LS	2,000	17,600	17,600		In Progress
	Total	1408		5,000	30,600	30,600	4,712	
HA-Wide	Administration	1410	LS	61,500	61,500	61,500	61,500	Complete
HA-Wide	Fees & Costs – associated with grant writing consulting services for capital programs	1430	LS	11,000	12,600	12,600	12,600	Complete
	Fees & Costs – associated with real estate evaluations	1430	LS	5,000	22,100	22,100	22,100	Complete
	Total	1430		16,000	34,700	34,700	34,700	
FL-011002 West Lake	Site Improvements – Tree pruning, sidewalk repairs, erosion control	1450	LS	7,500	10,000	6,500		In Progress
FL-011004 West Lake Addition	Site Improvements – Tree pruning, sidewalk repairs, erosion control	1450	LS	7,500	10,000	7,500		In Progress
FL-011006 Cecil Gober/John Wright	Site Improvements – Tree pruning, sidewalk repairs, erosion control	1450	LS	5,500	6,820	930		In Progress
	Total	1450		21,000	26,820	14,930		

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority			Grant Type and Number Capital Fund Program Grant No: FL14P011501-06 CFFP (Yes/ 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 ¹	Funds Obligated ²	Funds Expended ²	
FL-011002 West Lake	Dwelling Structures -Interior renovations including cabinet replacement, floor covering, wall repairs and door replacement	1460	LS	57,663				Deferred
FL-011004 West Lake Addition	Dwelling Structures -Interior renovations including cabinet replacement, floor covering, wall repairs and door replacement	1460	LS	57,663				Deferred
FL-011006 Cecil Gober/John Wright	Cabinet replacements, water line replacement and wall repairs	1460	LS	148,379	138,085	138,085		Complete
FL-011007 Paul Colton/Bonnet Shores	Cabinet replacements, water line replacement and wall repairs	1460	LS	138,295	138,295	138,295		Complete
	Total	1460		402,000	276,380	276,380		
FL-011002 West Lake	Dwelling Equipment – Appliance Replacement	1465	LS	2,000	56,000	56,000	56,000	Complete
FL-011002 West Lake	Non-Dwelling Structures – Interior painting & finishing at Community Bldg	1470	LS	1,000	2,000	2,000		In Progress
FL-011002 West Lake	Non-Dwelling Equipment – Computer lab improvements & repairs	1475	LS	10,000	10,000	10,000	2,134	In Progress
FL-011006 Cecil Gober/John Wright	Relocation Costs	1495	LS	500	22,000	3,010	3,010	In Progress
FL-011007 Paul Colton/Bonnet Shores	Development Activity – Property evaluation	1499	LS	1,000				Deferred

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U.S. Department of Housing and Urban Development
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-07 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:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	135,000	135,000	135,000	135,000
3	1408 Management Improvements	67,500	67,500	67,500	67,500
4	1410 Administration (may not exceed 10% of line 21)	71,007	71,007	71,007	71,007
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000	25,000	22,000	22,000
8	1440 Site Acquisition	1,000			
9	1450 Site Improvement	56,000			
10	1460 Dwelling Structures	160,567	250,601	25,077	25,077
11	1465.1 Dwelling Equipment—Nonexpendable	20,000	20,000	18,334	18,334
12	1470 Non-dwelling Structures	49,000	966	966	
13	1475 Non-dwelling Equipment	107,000	105,000	62,000	62,000
14	1485 Demolition	1,000			
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	1,000	35,000	1,000	1,000
17	1499 Development Activities ⁴	1,000			

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Part I: Summary					
PHA Name: Lakeland Housing Authority	Grant Type and Number Capital Fund Program Grant No: FL14P011501-07 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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	20000			
20	Amount of Annual Grant:: (sum of lines 2 - 19)	710,074	710,074	360,700	402,884
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 Herbert Hernandez Date 		Signature of Public Housing Director Date			

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority			Grant Type and Number Capital Fund Program Grant No: FL14P011501-07 CFFP (Yes/ 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 ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406	LS	135,000	135,000	135,000	135,000	Complete
PHA-Wide	Management Improvements -	1408	LS	30,000	30,000	30,000	30,000	Complete
	Management Improvements - Grant writing & agency plan	1408	LS	37,500	37,500	37,500	37,500	Complete
PHA-Wide	Administration	1410	LS	71,007	71,007	71,007	71,007	Complete
PHA-Wide	Fees & Costs - Architectural fees associated with capital project plans	1430	LS	20,000	25,000	22,000	22,000	In Progress
PHA-Wide	Site Acquisition	1440	LS	1,000				Deferred
FL-011002 West Lake	Site Improvements -- Sidewalk repairs , landscaping & drainage improvements	1450	LS	28,000				Deferred
FL-011004 West Lake Addition	Site Improvements -- Sidewalk repairs , landscaping & drainage improvements	1450	LS	28,000				Deferred
	TOTAL	1450		56,000				
FL-011002 West Lake	Dwelling Structures - Exterior Painting	1460	LS	3,000				Deferred
FL-011004 West Lake Addition	Dwelling Structures - Exterior Painting	1460	LS	3,000				Deferred
FL-011006 Cecil Gober/John Wright	Dwelling Structures -- Preparations for Interior renovations, limited demo & removal of equipment	1460	LS	82,195	82,195	25,077	25,077	In Progress

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority			Grant Type and Number Capital Fund Program Grant No: FL14P011501-07 CFFP (Yes/ 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 ¹	Funds Obligated ²	Funds Expended ²	
FL-011007 Paul Colton/Bonnet Shores	Dwelling Structures – Preparations for Interior renovations, limited demo & removal of equipment	1460	LS	72,372	168,406			In Planning
	TOTAL	1460		160,567	250,601	25,077	25,077	
FL-011007 Paul Colton/Bonnet Shores	Dwelling Equipment - Appliance replacement	1465	LS	4,000	344	344	334	Complete
FL-011006 Cecil Gober/John Wright	Dwelling Equipment - Appliance replacement	1465	LS	2,000	5,166	5,166	5,166	Complete
FL-011004 West Lake Addition	Dwelling Equipment - Appliance replacement	1465	LS	7,000	6,417	6,417	6,417	Complete
FL-011002 West Lake	Dwelling Equipment - Appliance replacement	1465	LS	7,000	6,417	6,417	6,417	Complete
	TOTAL	1465		20,000	20,000	18,334	18,334	
FL-011002 West Lake	Non-Dwelling Structures – Community room remodeling	1470	LS	49,000	966	966	966	966
FL-011004 West Lake Addition	Non-Dwelling Equipment - Light duty trucks for maintenance	1475	LS	99,000	97,000	54,000	54,000	In Progress
FL-011006 Cecil Gober/John Wright	Security Camera Replacement	1475	LS	8,000	8,000	8,000	8,000	Complete
	TOTAL	1475		107,000	105,000	62,000	62,000	
PHA-Wide	Demolition	1485	LS	1,000				Deferred
FL-011006 Cecil Gober/John Wright	Relocations Costs – in preparation for renovations	1495	LS	1,000	35,000	1,000	1,000	In Progress
PHA-Wide	Development Activity	1499	LS	1,000				Deferred

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

² To be completed for the Performance and Evaluation Report.

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: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-08 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:1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	137,472	137,472	137,472	137,472
3	1408 Management Improvements	68,736	68,736	56,900	56,900
4	1410 Administration (may not exceed 10% of line 21)	68,736	68,736	68,736	68,736
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	35,000	58,500	56,096	56,096
8	1440 Site Acquisition	1,000			
9	1450 Site Improvement	30,000	30,000		
10	1460 Dwelling Structures	224,918	187,983		
11	1465.1 Dwelling Equipment—Nonexpendable	20,000	12,000	488	488
12	1470 Non-dwelling Structures	30,000	10,000		
13	1475 Non-dwelling Equipment	70,000	70,000	88	88
14	1485 Demolition	500			
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	500	43,935	43,935	43,935
17	1499 Development Activities ⁴	500			

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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: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-08 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 checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	687,362	687,362	363,715	363,715
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 Herbert Hernandez Date 		Signature of Public Housing Director			Date

¹ To be completed for the Performance and Evaluation Report.

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

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority			Grant Type and Number Capital Fund Program Grant No: FL14P011501-08 CFFP (Yes/ 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 ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide	Operations	1406	LS	137,472	137,472	137,472	137,472	Complete
HA-Wide	Managemet Improvements - Computer Software & Training for Financial and Property Management	1408	LS	68,736	68,736	56,900	56,900	In Progress
HA-Wide	Administration	1410	LS	68,736	68,736	68,736	68,736	Complete
HA-Wide	Fees & Costs - Associated with design services for property improvements	1430	LS	35,000	38,500	38,500	38,500	Complete
	Fees & Costs associated with project monitoring	1430	LS		20,000	17,596	17,596	In Progress
HA-Wide	Site Aquisition	1440	LS	1,000				Deferred
HA-Wide	Non-Dwelling Equipment – Computer & security equipment to refurbish central security systems	1475	LS	30,000	25,000			In Planning
HA-Wide	Non-Dwelling equipment – computers for financial; & property management	1475	LS	40,000	45,000	88	88	In Progress
HA-Wide	Development Activity	1499	LS	500				Deferred
AMP- 1 FL-11011002 West Lake	Site Improvements - Tree pruning for hurricane protection, plantings around buildings & sidewalk repair	1450	LS	10,000	10,000			

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority			Grant Type and Number Capital Fund Program Grant No: FL14P011501-08 CFFP (Yes/ 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 ¹	Funds Obligated ²	Funds Expended ²	
AMP- 1 FL-11011004 West Lake Addition	Site Improvements - Tree pruning for hurricane protection, plantings around buildings & sidewalk repair	1450	LS	10,000	10,000			In Planning
FL-011006 Cecil Gober/John Wright	Site Improvements - Tree pruning for hurricane protection, plantings around buildings & sidewalk repair	1450	LS	10,000	10,000			In Planning
FL-011006 Cecil Gober/John Wright	Replacement of water lines, cabinet replacement in kitchens, new bath & kitchen fixtures, floor coverings, Paint & finishes	1460	15 Units	123,418	106,483			In Planning
FL-011006 Cecil Gober/John Wright	Roofing repairs & replacement, gutter repairs and other exterior improvements	1460	18 Bldgs	11,000	11,000			In Planning
FL-011006 Cecil Gober/John Wright	HVAC	1460	15 Units	50,500	50,500			
FL-11011004 West Lake Addition	Exterior Painting	1460	LS	40,000	20,000			In Planning
FL-011006 Cecil Gober/John Wright	Appliances	1465.1	15	20,000	12,000	488	488	In Progress
FL-011006 Cecil Gober/John Wright	Non-Dwelling Structures – Community room bath fixtures, lighting improvements & HVAC	1470	1	30,000	10,000			In Planning
HA-Wide	Demolition	1485	LS	500				
FL-011006 Cecil Gober/John Wright	Relocation costs associated with renovations	1495	LS	500	43,935	43,935	43,935	Complete

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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
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	128,175	128,175		
3	1408 Management Improvements	50,000	69,000		
4	1410 Administration (may not exceed 10% of line 21)	64,087	64,087		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	55,000	55,000		
8	1440 Site Acquisition	500			
9	1450 Site Improvement	49,117	49,117		
10	1460 Dwelling Structures	182,000	192,000		
11	1465.1 Dwelling Equipment—Nonexpendable	20,000	20,000		
12	1470 Non-dwelling Structures	25,000	15,000		
13	1475 Non-dwelling Equipment	17,000	47,000		
14	1485 Demolition	500			
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	49,000	1,500		
17	1499 Development Activities ⁴	500			

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Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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U.S. Department of Housing and Urban Development
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Expires 4/30/2011

Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-09 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval: 2009	
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 type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	640,879	640,879	5	
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 Herbert Hernandez Date 		Signature of Public Housing Director		Date	

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Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority			Grant Type and Number Capital Fund Program Grant No: FL14P011501-09 CFFP (Yes/ 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 ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406	LS	128,175	128,175			In Progress
PHA-Wide	Management Improvements - New financial and property management software.	1408	LS	50,000	50,000			
	Software conversion from current property managements systems to new software including training of PHA staff	1408	LS		19,000			
PHA-Wide	Administration	1410	LS	64,087	64,087			
PHA-Wide	Fees & Costs - Architectural Services associated with modernization plans for PHA properties	1430	LS	35,000	35,000			
	Fees for construction supervision services	1430	LS	20,000	20,000			
PH-Wide	Site Aquisition	1440	LS	500				
FL-011006 Cecil Gober/John Wright	Site Improvements - Repair/replace Sidewalks, plant new bushes, lawn replacement, curb repairs, Tree removal & replacement and other landscape & site improvements	1450	LS	49,117	49,117			

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-09 CFFP (Yes/ 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 ¹	Funds Obligated ²	Funds Expended ²	
FL-011006 Cecil Gober/John Wright	Replacement of water lines, cabinet replacement in kitchens, new bath & kitchen fixtures, floor coverings	1460	22 Units	182,000	192,000			
FL-011006 Cecil Gober/John Wright	Dwelling Equipment - New appliances	1465	22 Units	20,000	20,000			
FL-011006 Cecil Gober/John Wright	Non-Dwelling Structures - new floor covering in community room	1470	LS	2,000	2,000			
FL- 14-011002 West Lake	Non-Dwelling Structures- Covert storage area to records retention area including area dividing walls, security systems & heating & ventalating	1470	LS	23,000	13,000			
FL- 14-011002 West Lake	Non-Dwelling Equipment - Security Cameras	1475	LS	5,000	5,000			
FL-011006 Cecil Gober/John Wright	Non-Dwelling Equipment - Security Cameras	1475	LS	12,000	12,000			
PHA-Wide	Non-Dwelling Equipment - Computer Hardware for financial & property management	1475	LS		30,000			
FL- 14-011002 West Lake	Demolition	1485	LS	500				
FL-011006 Cecil Gober/John Wright	Relocation Costs - during renovations	1495.1		49,000	1,500			
PHA-Wide	Development Activities	1499	LS	500				

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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: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P011501-10 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval: 2010	
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 ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	68,000			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	68,736			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15,000			
8	1440 Site Acquisition	425,000			
9	1450 Site Improvement				
10	1460 Dwelling Structures	25,626			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	70,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

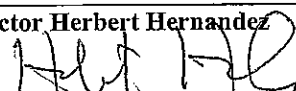
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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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
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: FLI4P011501-10 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010
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 ¹	
		Original	Revised ²	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)	15,000			
20	Amount of Annual Grant:: (sum of lines 2 - 19)	687,362			
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 Herbert Hernandez Date 		Signature of Public Housing Director			Date

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

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⁴ RHF funds shall be included here.

Part II: Supporting Pages			Grant Type and Number		Federal FFY of Grant: 2010			
PHA Name: Lakeland Housing Authority		Capital Fund Program Grant No: FL14P011501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:						
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 ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406	Lump Sum	68,000				
PHA-Wide	Administration	1410	Lump Sum	68,736				
PHA-Wide	Fees & Costs associated with an analysis of all PHA real estate to maximize potential uses and sources for improvements	1430	Lump Sum	15,000				In Planning
PHA-Wide	Site Acquisition of Arbor Manor in lieu of RHF funds	1440	Lump Sum	425,000				In Planning
AMP- 1 FL-11011002 West Lake	Dwelling Structures - Replacement of heating units using force labor	1460	35	25,626				In Planning
PHA-Wide	Non-dwelling equipment - Purchase of computer hardware necessary to fully implement new property management programs	1475	Lump Sum	70,000				In Planning

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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
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-04 Date of CFFP:			FFY of Grant: 2004 FFY of Grant Approval: 2004
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: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
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			423,900	423,900
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 ⁴	601,210		177,310	423,900

¹ To be completed for the Performance and Evaluation Report.

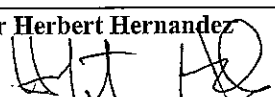
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-04 Date of CFFP:		FFY of Grant:2004 FFY of Grant Approval: 2004	
Type of Grant <input type="checkbox"/> 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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	601210	601210	601210	423900
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 Herbert Hernandez  Date		Signature of Public Housing Director 		Date	

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PHA Name: Lakeland Housing Authority

Capital Fund Program Grant No:

Replacement Housing Factor Grant No: FL14R011501-04

Federal FFY of Grant: 2004

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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-05 Date of CFFP:			FFY of Grant: 2005 FFY of Grant Approval: 2005
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: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
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 ⁴	303949		303949	

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Part I: Summary

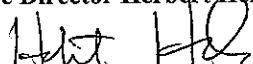
PHA Name: Lakeland Housing Authority	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-05 Date of CFFP:	FFY of Grant:2005 FFY of Grant Approval: 2005
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Type of Grant

☐ Original Annual Statement
 ☐ Reserve for Disasters/Emergencies
 ☐ Revised Annual Statement (revision no:)

☒ Performance and Evaluation Report for Period Ending: 6/30/09
 ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	303949		303949	
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 Herbert Hernandez Date: 	Signature of Public Housing Director Date:
--	--

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

PHA Name: Lakeland Housing Authority

Capital Fund Program Grant No: _____
CFFP (Yes/ No): _____
Replacement Housing Factor Grant No: FL14R011501-05

Federal FFY of Grant: 2005[illegible]

² To be completed for the Performance and Evaluation Report.

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: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-06 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: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
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 ⁴	192988		192988	

¹ To be completed for the Performance and Evaluation Report.

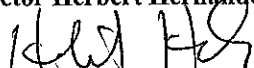
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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⁴ 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					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-06 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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	192988		192988	
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 Herbert Hernandez Date 		Signature of Public Housing Director _____ Date _____			

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⁴ RHF funds shall be included here.

PHA Name: Lakeland Housing Authority

Replacement Housing Factor Grant No: FL14R011501-06

Federal FFY of Grant: 2006

² To be completed for the Performance and Evaluation Report.

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
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-07 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:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
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 ⁴	176408			

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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: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-07 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:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	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)	176408			
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 Herbert Hernandez Date 		Signature of Public Housing Director Date			

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

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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
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Expires 4/30/2011

Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-08 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: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
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 ⁴	176408			

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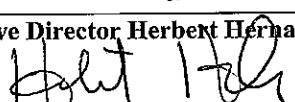
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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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U.S. Department of Housing and Urban Development
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-08 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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
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19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	176408			
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Signature of Executive Director Herbert Hernandez Date 		Signature of Public Housing Director Date			

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

PHA Name: Lakeland Housing Authority

Capital Fund Program Grant No:

CFFP (Yes/ No):

Replacement Housing Factor Grant No: FL14R011501-08

Federal FFY of Grant: 2008

[illegible]

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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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Part I: Summary					
PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-09 Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
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: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
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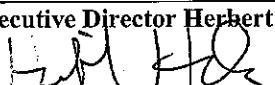
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PHA Name: Lakeland Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R011501-09 Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original 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: 6/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
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Signature of Executive Director Herbert Hernandez Date 		Signature of Public Housing Director		Date	

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Federal FFY of Grant: 2009

² To be completed for the Performance and Evaluation Report.

Violence Against Women Act Report

A goal of the Lakeland Housing Authority 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 degree we can.

The Lakeland Housing Authority provides or offers the following activities, services, or programs, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking.

We refer people to the Peace River Center and/or the Gulf Coast Community Care.

The Lakeland Housing Authority provides or offers the following activities, services, or programs that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing.

We offer a point preference for admission to public housing.

We refer people to the Peace River Center and/or the Gulf Coast Community Care.

The Lakeland Housing Authority 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.

We have as good a security system as possible including security cameras at most family sites.

The Lakeland Housing Authority has the following procedures in place to assure applicants and residents are aware of their rights under the Violence Against Women Act.

We brief all new participants of their rights prior to entering the program and are always available for private consultations on their rights and responsibilities under VAWA.