

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>Cheboygan Housing Commission</u> PHA Code: <u>MI 030</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2010</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>38</u> Number of HCV units: <u>120</u>				
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input checked="" 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
	PHA 1:				PH HCV
	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: The Mission Of the Cheboygan Housing Commission is: to provide adequate housing and community development assistance, and to expand and preserve decent, safe and affordable housing for low and moderate income families. The Commission is further committed to providing quality Services to our clients in an effective, efficient and respectful 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. See attached 5.2 Goals and Objectives				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Due to ARRA Fund (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. Plan is available at Administrative Offices, 659 Culyer St., Cheboygan, Michigan.				
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. N/A				
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. See attached 2010 Annual Plan, 2009 Stimulus Performance and Evaluation Report and 2009 Performance and Evaluation Report.				
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. See attached 2010-2014 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.				
9.0	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. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.) See attached Housing Needs				

9.1	<p>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. See attached Strategy for Addressing Housing Needs</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).</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. The CHC has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination through the utilization of previous Capital funds and the proper application of our public housing policies.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>a. Substantial Deviation from the 5-Year Plan The Cheboygan Housing Commission’s Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> • changes to rent or admissions policies or organization of the waiting list; • additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and • Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. <p>b. Significant Amendment or Modification to the Annual Plan The Cheboygan Housing Commission’s Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> • changes to rent or admissions policies or organization of the waiting list; • additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and • Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.
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> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

11.0 (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.

The Resident Advisory Board was in full agreement with proposed CFP activities.

11.0 (g) **Challenged Elements**

There were no elements within the CHC annual plan that were challenged by residents, staff, Board of Commissioners or the general public.

5.2 Goals And Objectives

Cheboygan Housing Commission Vision Statement: Promote High Quality Customer Service. Ensure Management Operations Sustain and Enhance Property Values

Progress in meeting the 5-Year Plan Mission and Goals

The CHC has been able to maintain its mission to provide decent, safe, sanitary housing of the City of Cheboygan, to provide affordable housing to persons with low to moderate income, to offer and assist low to moderate income households with homeownership opportunities, to help families achieve self-sufficiency and to assist with supportive service for the elderly, disabled and families. Through the utilization of Capital Funds and the proper application of our public housing policies.

We are continuing to address public housing vacancies very aggressively and our PHAS scores indicate that other operational issues are being satisfactorily addressed.

Capital funds have been utilized to provide modernization of our property and our FY 2010 application will continue that effort.

CHC has implemented local preferences to improve the living environment by addressing deconcentration, promoting income mixing and improving security throughout our development.

The CHC created and continues to facilitate self-sufficiency programs to improve resident employability as well as solicit support services for the elderly and families with disabilities.

We are confident that the CHC will be able to continue to meet and accommodate all our goals and objectives in FY 2010.

The VAWA Policy has the following principal goals and objectives:

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA;
- B. Insuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by the Cheboygan Housing Commission;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or stalking;
- D. Creating and maintaining collaborative arrangements between the Cheboygan Housing Commission, law enforcement authorities, victim service providers, and others to promote the safety and well-being of victims of-actual and threatened domestic violence, dating violence and stalking, who are assisted by the Cheboygan Housing Commission; and
- E. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by the Cheboygan Housing Commission.

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: Cheboygan Housing Commission		Grant Type and Number Capital Fund Date of CFFP Program Grant No: MI33P030501-10		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2010</u> FFY of Grant Approval: _____	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	57,563.00			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)	57,563.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

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.

Part I: Summary					
PHA Name: Cheboygan Housing Commission		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MI33P030501-10</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2010</u> FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director <i>Doreen Stempney</i>		Date <i>5-19-10</i>		Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: Cheboygan Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI33P030501-10 Replacement Housing Factor Grant No:			CFFP (Yes/ <u>No</u>):		Federal FFY of Grant: 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	
HA Wide Operations	Housing Operations	1406	100%	57,563.00				
Grand Total				57,563.00				

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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Cheboygan Housing Commission MI33P030501-10					Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	3/31/12		3/31/14		

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

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number Cheboygan Housing Commission/MI 030		Locality (City/County & State) Cheboygan/ Cheboygan County/Michigan			<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				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations		57,563.00	57,563.00	57,563.00	57,563.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		57,563.00	57,563.00	57,563.00	57,563.00
L.	Total Non-CFP Funds					
M.	Grand Total		57,563.00	57,563.00	57,563.00	57,563.00

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary (Continuation)						
PHA Name/Number Cheboygan Housing Commission/MI 030		Locality (City/County & State) Kirkwood/Butler County/Missouri			<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 2012	Work Statement for Year 5 FFY 2014
		Annual Statement				

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						
Annual						
Statement						
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Capital Fund Program—Five-Year Action Plan

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

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013			Work Statement for Year: 5 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						
Annual Statement						
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Part III: Supporting Pages – Management 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	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide Operations		HA Wide Operations	
Annual	Housing Operations	57,563.00	Housing Operations	57,563.00
Statement				
	Subtotal of Estimated Cost	\$57,563.00	Subtotal of Estimated Cost	\$57,563.00

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013		Work Statement for Year: 5 FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	HA Wide Operations Housing Operations	57,563.00	HA Wide Operations Housing Operations	57,563.00
	Subtotal of Estimated Cost	\$57,563.00	Subtotal of Estimated Cost	\$57,563.00

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: Cheboygan Housing Commission		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MI33S030501-09</u>		FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>	
Replacement Housing Factor Grant No:					
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: 9/30/2009 <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	4000.00		4000.00	4000.00
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	4,000.00		4,000.00	4,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	6,000.00		6,000.00	6,000.00
11	1465.1 Dwelling Equipment—Nonexpendable	45,000.00		45,000.00	45,000.00
12	1470 Non-dwelling Structures	14,098.00		14,098.00	14,098.00
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)	73,098.00		73,098.00	73,098.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

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.

Part I: Summary					
PHA Name: Cheboygan Housing Commission		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MI33S030501-09</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>	
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: 9/30/2009 <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
Signature of Executive Director <i>Dorene Stempney</i>		Date <i>5-19-10</i>		Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: Cheboygan Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI33S030501-09 Replacement Housing Factor Grant No:			CFFP (Yes/ <u>No</u>):		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	
HA Wide	2 Computer – 1 laptop	1408	LS	4,000.00		4,000.00	4,000.00	
MI 30-1	A&E Fees	1430	LS	4,000.00		4,000.00	4,000.00	
	Subtotal			8,000.00		8,000.00	8,000.00	
MI 30-1	A. Chimney stacks safety check	1460	LS	6000.00		6000.00	6000.00	
	B. Replace furnace and boiler	1465	LS	10,000.00		10,000.00	10,000.00	
	C. Replace refrigerators	1465	29	17,500.00		17,500.00	17,500.00	
	D. Replace gas ranges	1465	29	17,500.00		17,500.00	17,500.00	
	E. Addition to carport/new roof	1470	LS	15,000.00		15,000.00	15,000.00	
	Subtotal			66,000.00		66,000.00	66,000.00	
	Grand Total			73,098.00		73,098.00	73,098.00	

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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Cheboygan Housing Commission, MI33S030501-09					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	3/17/2010	9/30/2009	3/17/2012	9/30/2009	
MI 030-1	3/17/2010	9/30/2009	3/17/2012	9/30/2009	

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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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: 9/30/2009 <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	57,563.00		57,563.00	57,563.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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21	Amount of line 20 Related to LBP Activities				
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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: 9/30/2009 <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
	Signature of Executive Director <i>Donna Stump</i>	Date 5-19-10		Signature of Public Housing Director	Date

Part II: Supporting Pages								
PHA Name: Cheboygan Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI33P030501-09 Replacement Housing Factor Grant No:			CFFP (Yes/ <u>No</u>):		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	
HA Wide	A. Partial salary & benefits of staff in CFP	1406						
MI 30-1	B. Maintenance, building repairs in and out, outside landscaping and yard work	1406						
	Subtotal	1406	100%	57,563.00		57,563.00	57,563.00	Completed
	Grand Total			57,563.00		57,563.00	57,563.00	

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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Cheboygan Housing Commission, MI33P030501-09					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	3/31/2011	12/31/2009	3/31/2013	3/31/2010	
MI 030-1	3/31/2011	12/31/2009	3/31/2013	3/31/2010	

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.

9.0 Housing Needs

Housing Needs of Families on the CHC's Combined Open Section 8 and Public Housing Waiting Lists

	Number of families	Percent of total families	Annual Turnover
Waiting list total	125		0
Extremely low income <=30% AMI	52	42	
Very low income (>30% but <=50% AMI)	60	48	
Low income (>50% but <80% AMI)	13	10	
Families with children	71	57	
Elderly families	54	43	
Families with Disabilities	42	34	
Race/ethnicity White	125	100	
Characteristics by Bedroom Size (Public Housing Only)			
1 Bedroom	54	43.2	
2 Bedroom	30	24	
3 Bedroom	38	30.4	
4 Bedroom	3	2.4	

9.1 Strategy for Addressing Housing Needs

Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy: Maximize the number of affordable units available to the CHC within its current resources by:

- 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
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program

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

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

- Adopt rent policies to support and encourage work

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

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

- Adopt rent policies to support and encourage work

The factors listed below influenced the CHC's selection of the strategies it will pursue:

- Funding and Staffing constraints
- Limited availability of sites for assisted housing
- Influence of the housing market on CHC programs

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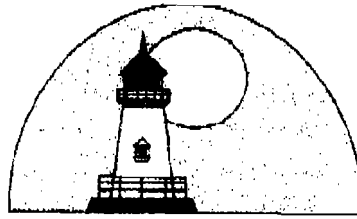
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Commissioners:
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Ramon Morrow
Milton Sova
Executive Director:
Dorene Stempky, P.H.M.

Cheboygan Housing Commission

Violence Against Women Policy

Resolution 2007/15

On this 7th day of February, 2007, Motion by Sova Supported by Morrow to adopt Resolution 2007/15, Violence Against Women Policy.

As required by the provisions of Sections 606 and 607 of the Violence Against Women, Justice Department Reauthorization Act of 2005 (VAWA), Public Law 109-162 and PIH Notice 2006-42.

“Violence Against Women Act” is an act defining violence against women and their children, providing for protective measures for victims, prescribing penalties therefore, and for others purposes.

“Violence against women and their children” refers to any act or a series of acts committed by any person against a woman who is his wife, former wife, or against a woman with whom the person has or had a sexual or dating relationship. Or with whom he has a common child, or against her whether legitimate or illegitimate, within or without the family abode, which result ion or is likely to result in physical, sexual, psychological harm or suffering, or economic abuse including threats of such acts, battery, assault, coercion, harassment or arbitrary deprivation of liberty. It includes, but is not limited, to the following acts:

A. “Physical Violence” refers to acts that include bodily or physical harm:

B. “Sexual Violence” refers to an act which is sexual in nature, committed against a woman or her child. It includes, but is not limited to:

a) rape, sexual harassment, acts of lasciviousness, treating a woman or her child as a sex object, making demeaning and sexually suggestive remarks, physically attacking the sexual parts of the victim’s body, forcing her/him to watch obscene publications and indecent shows or forcing the woman or her child to do indecent acts and/or make films thereof, forcing the wife and mistress/lover to live in the conjugal home or sleep together in the same room and with the abuser;



b) acts causing or attempting to cause the victim to engage in any sexual activity by force, threat of force, physical or other harm or threat of physical or other harm or coercion;

c) Prostituting the woman or child:

C. "Psychological Violence" refers to acts or omissions causing or likely to cause mental or emotional suffering of the victim such as but not limited to intimidation, harassment, stalking, damage to property, public, ridicule or humiliation, repeated verbal abuse and mental infidelity. It includes causing or allowing the victim to witness the physical, sexual or psychological abuse of a member of the family to which the victim belongs, or to witness pornography in any form or to witness abusive injury to pets or to unlawful or unwanted deprivation of the right to custody and/or visitation of common children.

D) "Economic abuse" refers to acts that make or attempt to make a woman financially dependent.

The Cheboygan Housing Commission Administer of Public Housing and the Section 8 Program Landlords may not deny admission to an applicant (male or female) who has been a victim of domestic violence, dating violence or stalking (if the applicant otherwise qualifies for assistance or admission.)

The Cheboygan Housing Commission as owner or the Section 8 Landlords may deny, remove, or terminate assistance to an individual perpetrator of such actions and continue to allow the victim or other household members to remain in the dwelling unit or receive housing assistance.

A Section 8 Housing Voucher Participant who is a victim of domestic violence, dating violence or stalking may request and be granted portability due to the incident.

In processing a request by a victim for continued assistance or for portability, Cheboygan Housing Commission may request that you certify that you are a victim of domestic violence, dating violence or stalking, by presenting certification of the following: (BPO) Barangay Protection Order, (TPO) Temporary Protection Order, (PPO) Permanent Protection Order. The Cheboygan Housing Commission would also accept a letter from a certified Counselor, Psychologist or Preacher. Once this has been proven, Cheboygan Housing Commission can give extra priority points for these victims.