| PHA 5- | | | ment of Housing and | U rban | | | 0. 2577-0226 |
|--------|----------------------------------|--------------------------|--------------------------------------|-----------------|----------|-----------|------------------------|
| Plan | | evelopmer ffice of Pu | it blic and Indian Housi | nσ | | Ex | xpires 4/30/2011 |
| 1.0 | PHA Information | | blic and mulan mousi | ing | | | |
| | PHA Name: Pasco County H | lousing Au | uthority | PHA Code: | FL-10 | 4 | |
| | | | Performing 🛛 Stand | lard 🗌 HC | CV (Sec | tion 8) | |
| | PHA Fiscal Year Beginning | (MM/YY | (YY): <u>10/2011</u> | | | | |
| 2.0 | Inventory (based on ACC u | nits at tim | e of FV beginning in | 1.0 above) | | | |
| 2.0 | Number of PH units: <u>207</u> | into ut tim | Number of HCV uni | , | | | |
| | | | | | | | |
| 3.0 | Submission Type | ٦ | $\overline{\times}$ Annual Plan Only | | 5 | Year Pla | n Only |
| 4.0 | | | | | | | • |
| | PHA Consortia PHA C | onsortia: (| (Check box if submitt | ing a joint Pla | in and c | complete | table below.) |
| | | PHA | Program(s) | Programs No | at in | No. of U | Jnits in Each |
| | Participating PHAs | Code | Included in the | the Consorti | | Program | |
| | | Coue | Consortia | | u | PH | HCV |
| | PHA 1: | | | | | | |
| | PHA 2: | | | | | | |
| 5.0 | PHA 3: | a 5 1 and 1 | 5.2 only of 5. Veen Die | a vadoto | | | |
| 5.0 | 5-Year Plan. Complete item | s 5.1 and 3 | 5.2 only at 5- Year Pla | in update. | | | |
| 5.1 | Mission. State the PHA's M | lission for | serving the needs of | low-income, v | very lov | v-income. | and extremely |
| | low income families in the P | HA's juris | diction for the next fi | ve years: | • | | - |
| | | | | | | | |
| | To Be Completed at 5 Year | Plan Upda | te. | | | | |
| 5.2 | Goals and Objectives. Ider | tify the DI | A's quantifiable good | ls and objectiv | vec that | will and | ble the $DU\Lambda$ to |
| 3.2 | serve the needs of low-incom | • | 1 0 | | | | |
| | five years. Include a report | | | • | | | |
| | described in the previous 5- | | | | | | .j••• |
| | L | | | | | | |
| | To Be Completed at 5 Year | Plan Upda | te. | | | | |
| | | | | | | | |
| | | | | | | | |

PHA Plan Update

6.0

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

PHA Plan Elements. (24 CFR 903.7)

1. Eligibility, Selection and Admissions Policies, including De-concentration 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.

There have been no revisions, since the last annual plan submission, to the Pasco County Housing Authority's statements on eligibility, selection and admissions policies, including de-concentration and wait list procedures

1. 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.

{Please see the following page for a statement of financial resources.}

| | ncial Resources: | |
|--|-------------------------------|---------------|
| Plannee Sources | d Sources and Uses Planned \$ | Planned Uses |
| 1. Federal Grants (FY 2009 | | |
| grants) | | |
| a) Public Housing Operating Fund | \$544,261 | |
| b) Public Housing Capital Fund | \$293,587 | |
| c) HOPE VI Revitalization | ¢ 2)0,001 | |
| d) HOPE VI Demolition | | |
| e) Annual Contributions for Section | \$9,262,006 | |
| 8 Tenant-Based Assistance | ¢ <i>y</i> ,202,000 | |
| f) Public Housing Drug Elimination | | |
| Program (including any Technical | | |
| Assistance funds) | | |
| g) Resident Opportunity and Self- | | |
| Sufficiency Grants | | |
| h) Community Development Block | | |
| Grant | | |
| i) HOME | | |
| Other Federal Grants (list below) | | |
| HOPWA | \$270,000 | |
| 2. Prior Year Federal Grants | | |
| (unobligated funds only) (list | | |
| below) | | |
| CFP 2009 | | |
| | | |
| | | |
| 3. Public Housing Dwelling Rental | | PH Operations |
| Income | ¢202.177 | |
| Tenant Rents | \$292,176 | |
| 4. Other income (list below) | | |
| Tenant Charges | \$39,111 | PH Operations |
| Laundry Revenue | \$3,155 | PH Operations |
| 4. Non-federal sources (list below) | ψυ,1υυ | |
| Interest Income | \$650 | PH Operations |
| | φ050 | |
| Total resources | \$10,704,946 | |
| | <i>\</i> | |
| | | |

1. Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units. There have been no revisions, since the last annual plan submission, to the Pasco County Housing Authority's statements on rent determination. 2. 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. There have been no revisions, since the last annual plan submission, to the Pasco County Housing Authority's statements on operation and management. 3. Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants. There have been no revisions, since the last annual plan submission, to the Pasco County Housing Authority's grievance procedures. 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. The Pasco County Housing Authority has received elderly designation for Pasco Terrace (50 Units) and Citrus Villas (70 Units) public housing developments (FL104-00003 and FL 104-000001 respectively). The Elderly Designation Plan was approved on March 27, 2011 and will be resubmitted for approval again in February of 2013 to maintain elderly designation status at Pasco Terrace and Citrus Villas. 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). There have been no revisions, since the last annual plan submission, to the Pasco County Housing Authority's statements on community service and self-sufficiency.

| 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. |
|--|
| There have been no revisions, since the last annual plan submission, to the Pasco County Housing Authority's statements on safety and crime prevention. |
| 9. Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing. |
| There have been no revisions, since the last annual plan submission, to the Pasco County Housing Authority's statements on pets. |
| 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. |
| The Pasco County Housing Authority annually reviews their programs to determine whether they are eaching all eligible population groups. If they find that the programs are disproportionally serving only some groups and not others, the Pasco County Housing Authority takes action to increase housing or social service opportunities for under-served households. The Authority is also in compliance with Executive Order 11063, which requires nondiscrimination and equal opportunity. The rules mplementing this Executive Order require that the Pasco County Housing Authority maintain demographic data in connection with its programs and take "affirmative action to overcome the effects of prior discrimination" (24 CFR Part 107). Records of the steps required to affirmatively further fair nousing, as well as the impacts that were made regarding the same are collected and maintained in a flat file database on an annual basis and is will be kept in the main office of the Housing Authority. Record the steping for this initiative includes but is not be limited to: race, ethnicity, familial status, and disability status of program participants and prospective participants. |
| 11. Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA. |
| The most recent completed fiscal audit dated 09/30/09 for the Pasco County Housing Authority conducted by The NCT Group CPA's, L.L.P certified that there were no audit findings or questioned costs. |
| |

| | 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. |
|---|--|
| | There have been no revisions, since the last annual plan submission, to the Pasco County Housing Authority's statements on Asset Management. |
| | 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 with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; |
| | The Pasco County Housing Authority works in partnership with the Pasco County Sheriff's Office, Sunrise Domestic Violence and Sexual Assault Center, Salvation Army Domestic Violence Shelter and the Dawn Center to provide activities, services and programs to child or adult victims of domestic violence, dating violence, sexual assault and stalking. Specifically the aforementioned agencies provide emergency protective shelter, a 24 hour hotline, one-on-one counseling, advocacy, support groups, transitional housing, batterer's intervention groups, community education and awareness, and information and referrals to those seeking assistance in other matters. |
| | (2) any activities, services, or programs provided, to child or adult victims of domestic violence, dating violence, sexual assault, and stalking to obtain or maintain housing; |
| | It is the policy of the Pasco County Housing Authority to assist child or adult victims of domestic violence, dating violence, sexual assault, and stalking maintain housing by terminating the assistance to remove a lawful occupant or tenant who engages in criminal acts or threatened acts of violence or stalking to family members or others without terminating the assistance or evicting victimized lawful occupants. |
| | (3) any activities, services, or programs provided or offered to prevent domestic violence, dating violence, sexual assault, and stalking. |
| | The Pasco County Housing Authority distributes pamphlets regarding the services describes above from the Abuse Counseling and Treatment, Inc. (ACT) to all new clients receiving assistance under the Housing Choice Voucher Program and the Public Housing Program. |
| , | (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. Copies of the FY 2010 Annual Plan can be obtained at the PHA's Main Office at the following address: |
| | Pasco County Housing Authority 14517 7th Street Dade City, Florida 33523 |

| 7.0 | Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, |
|-----|--|
| 7.0 | Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> |
| | |
| | Not Applicable |
| 8.0 | Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. |
| | |
| | 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</i> |
| | Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP |
| 8.1 | grant and CFFP financing. |
| | Please See attached- fl104a02; fl104b02; fl104c02; fl104d02; fl104e02; fl104f02; fl104g02; fl104h02; |
| | and f1104i02. |
| | |
| | |
| | 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 |
| 8.2 | 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. |
| | |
| | Please See attached- fl104j02. |
| | |
| | Capital Fund Financing Program (CFFP). |
| 8.3 | 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. |
| | rousing ractor (RTH) to repay door meaned to manee capital improvements. |
| | Not Applicable |

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.

| Hous | ing Needs of Familie | es on the PHA's Waiting | List |
|----------------------------|----------------------|------------------------------|-----------------|
| Waiting List Type: (Select | One) | | |
| | 1 | | |
| ✓ Section 8 Tenant-Ba | ised Assistance | | |
| Public Housing | | | |
| | and Public Housing | | 1 |
| | | ctional waiting list (option | al) |
| If used, identify whi | ch development/sub- | · | 4 1 T |
| | # of families | % of total families | Annual Turnover |
| Waiting List Total | 187 | | 97 |
| Extremely Low Income | | | |
| <=30% AMI | | | |
| Very Low Income>50% | | | |
| but <80% AMI | | | |
| Low Income >50% but | | | |
| <80% AMI | | | |
| Families with Children | 154 | 82% | |
| Elderly Families | 5 | 3% | |
| Families with Disabilities | 28 | 15% | |
| Race/Ethnicity-White | 90 | 48% | |
| Race/Ethnicity-Black | 45 | 24% | |
| Race/Ethnicity-Hispanic | 50 | 27% | |
| Race/Ethnicity- | 0 | 1% | |
| Asian/Pacific Islander | | | |
| Race/Ethnicity- | 1 | 0% | |
| Native American | | | |
| Race/Ethnicity-Unknown | 0 | 1% | |

| | P | Public Housing Site-Based | l Waiting Lists | |
|---|-------------------|---|--|---|
| Development Information : (Name, number, location) | Date Initiated | Initial mix of Racial, Ethnic or Disability Demographics | Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL | Percent change between initial and current mix of Racial, Ethnic, or Disability demographics |
| Cypress Villas I FL104-001 Dade City , Florida | June 2000 | White-20% Black-80% American Indian/Alaskan Native-0% Asian or Pacific Islander-0% Hispanic- 24% Non-Hispanic-76% | White-71% Black-24% American Indian/Alaskan Native-2% Asian or Pacific Islander-2% Hispanic-24% Mixed-1% Non-Hispanic-76% | White (+51%) Black (-56%) American Indian/Alaskan Native (+2%) Asian or Pacific Islander (+1%) Hispanic (+2%) Mixed (+1%) Non-Hispanic (-2%) |
| Cypress Villas II FL104-004 Dade City, Florida | June 2000 | White-20% Black-80% American Indian/Alaskan Native-0% Asian or Pacific Islander-0% Hispanic-24% Non-Hispanic-76% | White-68% Black-28% American Indian/Alaskan Native-3% Asian or Pacific Islander-1% Hispanic-27% Mixed-0% Non-Hispanic-73% | White (+48 %) Black (-52%) American Indian/Alaskan Native (+3%) Asian or Pacific Islander (+1%) Hispanic (+3%) Mixed (-2%) Non-Hispanic (-3%) |
| Pasco Terrace FL104-007 Port Richey, Florida | June 2000 | White-96% Black-4% American Indian/Alaskan Native-0% Asian or Pacific Islander-0% Hispanic-4% Non-Hispanic-96% | White-98% Black-0% American Indian/Alaskan Native-0% Asian or Pacific Islander-2% Hispanic-10% Non-Hispanic-90% | White (+2%) Black (-4%) American Indian/Alaskan Native (+0%) Asian or Pacific Islander (+2%) Hispanic (+6%) Non-Hispanic (-6%) |

| | Public | e Housing Site-Based Wa | iting Lists-Continued | |
|---|-------------------|--|---|---|
| Development Information : (Name, number, location) | Date Initiated | Initial mix of Racial, Ethnic or Disability Demographics | Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL | Percent change between initial and current mix of Racial, Ethnic, or Disability demographics |
| Bonnie Dale Villas FL104-004 New Port Richey, Florida | June 2000 | White-93% Black-5% American Indian/Alaskan Native-2% Asian or Pacific Islander-0% Hispanic-7% Mixed-0% Non-Hispanic-93% | White-90% Black-7% American Indian/Alaskan Native-1% Asian or Pacific Islander-1% Hispanic-17% Mixed-1% Non-Hispanic-83% | White (-3%) Black (+2%) American Indian/Alaskan Native (-1 %) Asian or Pacific Islander (+1 %) Hispanic (+10%) Mixed (+1%) Non-Hispanic (-10%) |
| Sunny Dale Villas FL104-005 New Port Richey, Florida | June 2000 | White-93% Black-5% American Indian/Alaskan Native-2% Asian or Pacific Islander-0% Hispanic-7% Non-Hispanic-93% | White-89% Black-9% American Indian/Alaskan Native-1% Asian or Pacific Islander-1% Hispanic-16% Non-Hispanic-84% | White (-4%) Black (+4%) American Indian/Alaskan Native (-1 %) Asian or Pacific Islander (+1 %) Hispanic (+9%) Non-Hispanic (-9%) |
| Citrus Villas FL104-001 Dade City, Florida | June 2000 | White-80% Black-20% American Indian/Alaskan Native-0% Asian or Pacific Islander-0% Hispanic-7% Non-Hispanic-93% | White-75% Black-25% American-0% Indian/Alaskan Native-0% Asian or Pacific Islander-0% Hispanic-25% Non-Hispanic-75% | White -5%) Black (+5%) American Indian/Alaskan Native (0%) Asian or Pacific Islander (0%) Hispanic (+18 %) Non-Hispanic (-18%) |

9.0 Also, please see attachment fl104k01 for a 6 page, in-depth, housing needs data analysis provided by The Shimberg Center for Affordable Housing: Florida Housing Data Clearinghouse that includes a housing profile for Pasco County, Florida with the following data: population projections; existing home values (based on County property appraisers' just value); rents; cost burden; household income; elderly households by age and cost burden; size of household; households by size and cost burden; age of housing and substandard housing. 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 # 1: The Pasco County Housing Authority will maximize the number of affordable units available to the PHA within its current resources by: > Employing effective maintenance and management policies to minimize the number of public housing units off-line > Reducing the turnover time for vacated public housing units Reducing the 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 > Participate in the Consolidated Plan development process to ensure coordination with broader community strategies Strategy # 2: The Pasco County Housing Authority will increase the number of affordable housing units by: > Applying for additional section 8 vouchers should they become available > Pursue housing resources other than public housing or section 8 tenant-based assistance Strategy # 3: The Pasco County Housing Authority will target available assistance to families at or below 30% of AMI > The Pasco County Housing Authority will exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing > The Pasco County Housing Authority will exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance Strategy # 4: The Pasco County Housing Authority will target available assistance to families at or below 50% of AMI The Pasco County Housing Authority will target more than 40% of all new admissions to public housing to families at or below 30% of medium income **Strategy # 5:** The Pasco County Housing Authority will target available assistance to the elderly > The Pasco County Housing Authority will continue to seek approval for it's elderly designated properties, Citrus Villas and Pasco Terrace, as required every 2 years > The Pasco County Housing Authority will apply for special purpose vouchers targeted to the elderly should they become available

| with disabilities should they become available The Pasco County Housing Authority will market to local non-profit agencies that assist famil with disabilities Strategy # 7: The Pasco County Housing Authority will increase awareness of PHA resources among families of races and ethnicities with disproportionate needs The Pasco County Housing Authority affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to locat of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | based on the section 504 Needs Assessment for Public Housing The Pasco County Housing Authority will apply for special purpose vouchers targeted to famili with disabilities should they become available The Pasco County Housing Authority will market to local non-profit agencies that assist famili with disabilities Strategy # 7: The Pasco County Housing Authority will increase awareness of PHA resources among families of races and ethnicities with disproportionate needs The Pasco County Housing Authority affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to locate of units outside of areas of poverty/minority concentrations The housing constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government | | ities |
|--|---|------------------|--|
| with disabilities should they become available The Pasco County Housing Authority will market to local non-profit agencies that assist famil with disabilities Strategy # 7: The Pasco County Housing Authority will increase awareness of PHA resources among families of races and ethnicities with disproportionate needs The Pasco County Housing Authority affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to locat of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | with disabilities should they become available The Pasco County Housing Authority will market to local non-profit agencies that assist famili with disabilities Strategy # 7: The Pasco County Housing Authority will increase awareness of PHA resources among families of races and ethnicities with disproportionate needs The Pasco County Housing Authority affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to locate of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | | based on the section 504 Needs Assessment for Public Housing |
| with disabilities Strategy # 7: The Pasco County Housing Authority will increase awareness of PHA resources among families of races and ethnicities with disproportionate needs The Pasco County Housing Authority affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to locat of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Extent to which particular housing needs are met by other organizations in the community Evidence of housing meeds as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | with disabilities Strategy # 7: The Pasco County Housing Authority will increase awareness of PHA resources among families of races and ethnicities with disproportionate needs The Pasco County Housing Authority affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to locatio of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | | with disabilities should they become available |
| families of races and ethnicities with disproportionate needs The Pasco County Housing Authority affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to locat of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | families of races and ethnicities with disproportionate needs The Pasco County Housing Authority affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to location of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | | |
| disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to locat of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | disproportionate housing needs Strategy # 8: The Pasco County Housing Authority will conduct activities to affirmatively further fair housing The Pasco County Housing Authority will market Housing Choice Voucher tenants as to location of units outside of areas of poverty/minority concentrations The housing strategies selected by the Pasco County Housing Authority were all influenced by: Housing constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board | - | |
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Additional Information. Describe the following, as well as any additional information HUD has requested. (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. Note: Standard and Troubled PHAs complete annually; Small and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Goal #1: Expand the Supply of Assisted Housing **Objective #1:** Apply for additional rental vouchers. IN 2010/2011 the PCHA received 25 VASH Vouchers, \$105,000.00 in rental Assistance under the Continuum of Care Grant Program and funding to provide housing to 30 families under the Homeless Prevention and Rapid Re-Housing Program. In addition, the PCHA will apply for vouchers, if applicable under any new Housing Choice Voucher NOFA's. **Objective #2:** Reduce public housing vacancies: The PCHA will reduce public housing vacancies by purging each waiting list quarterly to ensure viable candidates remain on the lists. The Pasco County Housing Authority recently has purged its waiting lists. Also, the PCHA has a large amount of viable candidates on the waiting list because of the amount of persons with preferences. Persons with preferences always guaranteed a viable waiting list because the people with preferences have complete and up to date information in their files. They are ready to be housed. **Objective #3:** Will leverage private or other public funds to create additional housing opportunities: The PCHA Board is setting up a sub-committee to work with private and public sector to review and invest in affordable housing opportunities. The PCHA Board assigned the Executive Director to work with the private and public sector to review and invest in affordable housing opportunities. The PCHA has sought opportunities with Community Development Division to acquire foreclosed multi-family properties through the Neighborhood Stabilization Program, but was unable to obtain a mutli-family property. The PCHA continues to seek affordable housing opportunities within the County.

| | Objective #4: Acquire or build units or developments: The PCHA is looking into possibilities of building units and will do a needs assessment to determine the greatest housing needs |
|------|---|
| | The PCHA is currently working on submitting an application to start a non-profit and is applying for 501 (c) (3) status from the IRS to move forward with applications for tax credits or other funding to acquire or develop new rental units. |
| | Goal # 2: Improve the Quality of Assisted Housing |
| | Objective #1: Improve public housing management: The last (PHAS Score) the PCHA received was an 88 and will work to further decrease the vacancy rate turnaround time to improve the PHAS score. |
| | The PCHA's vacancy turnaround time has increased. The PCHA is currently working on this issue to reduce the vacancy turnaround time by 20 days. |
| | Objective #2: Improve Voucher Management (SEMAP Score) 100%. |
| | The PCHA submitted its SEMAP information 1 day late to HUD due to a staff illness. Due to this late submission HUD gave the Authority a troubled status under SEMAP. This rating will not be lifted until the next SEMAP submission which will be November 29, 2011. Other than the late submission, the fundamentals of the program should return the program's status to High Performer. |
| 10.0 | Objective #3: Increase customer satisfaction: The PCHA is providing a new tenant information booklet passed out at interview with resident. |
| | The PCHA has reviewed and updated annually the tenant information booklet that is passed out to all new tenants and current residents at annual recertification. The PCHA continues to send sent staff to training seminars. |
| | Objective #4: Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections) 1) PCHA will train staff to provide more information to tenants—<u>Complete and on-going. (Training was and is provided monthly in-house and annually through outside vendors).</u> 2) PCHA will take more time with initial interviews—<u>The PCHA has mandated that only 8 interviews be conducted in one day.</u> 3) PCHA will review tenant files regularly—<u>Complete and on-going.</u> 4) PCHA will use hand held-inspection system to assist with computerization of inspections in Section 8—<u>Complete and on-going.</u> |

| ~ | #5: Renovate or modernize public housing units: The PCHA will do repairs to bathroom cabinets as per the Capital Fund Program requirements. |
|--------------------------------|---|
| | is currently repairing bathroom and kitchen cabinets through in-house operating funds. The ad during this period of time were needed to fund higher priority repairs, and they included: |
| 1) Kitel | nen Cabinets |
| , | llation of New Hot Water Heaters |
| | l Repaving |
| , | ation and Erosion Control |
| | acement of Rear Screen Doors |
| 6) Bring | g one additional unit up to 504 compliance |
| Goal # 3: I | ncrease Assisted Housing Choices |
| Objective # | # 1: Provide voucher mobility counseling: |
| , | HA will provide a new informational packet containing more information concerning vouch |
| | bility— <u>Complete and on-going.</u> |
| 2) PCI | HA has assigned one specialist to take care of portability— <u>Complete and on-going.</u> |
| All PCHA | clients are provided mobility counseling at least annually and as a new tenant. |
| Objective # of landlord | *2: Conduct outreach efforts to potential voucher landlords: The PCHA will establish a seri summits. |
| | did not need to conduct landlord summits because they have over 1000 landlords on the lis s in Housing Choice Voucher Program. |
| Objective # | #3: Implement Voucher Homeownership Program: Within 5 years. |
| following p include: 1) | did not implement a PCHA Voucher Homeownership program, but did partner with the rograms to provide Homeownership opportunities to Housing Choice Voucher holders. Th Pasco County CDD First Time Homebuyer's Program; 2) Pasco County CDD SHIP Progra st Pasco Habitat for Humanity |
| To date 42 | families purchased homes. |
| Goal #4: Iı | nprove Community Quality of Life and Economic Vitality |
| 1) PCI | #1: Implement public housing security improvements: HA will make efforts to get the Sheriff's sub-station in some communities—at the present there is one substation at Cypress Villa I public housing development. <u>Complete and on- ng.</u> |
| Dep | The PCHA will continue to work with the Officer Friendly Program through the Sheriff's partment, at present the Officer Friendly Program is at Cypress Villas I, Cypress Villas II, a us Villas. <u>Complete and on-going.</u> |
| | Page 15 of 21 |

In addition to the above public housing security improvements, the PCHA has contracted with the Pasco County Sheriff's Department through the Capital Fund to provide above baseline coverage in Cypress Villas I & II. And, two (2) times a year a meeting with the residents and the Sheriff's Department has been held and continues to be held in Cypress Villas I & II.

Goal #5: Promote Self-Sufficiency and Asset Development of Families and Individuals

Objective #1: The PCHA is currently working with the Lacoochee Revitalization Program to provide or attract supportive services for public housing residents—<u>Complete and on-going.</u>

Objective #2: Provide or attract supportive services to increase independence for the elderly or families with disabilities. The PCHA will maintain and provide a listing of supportive services for elderly and disabled in Pasco County--<u>Complete and on-going.</u>

Goal #6: Ensure Equal Opportunity in Housing for all Americans

Objective #1: Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability: The PCHA will maintain the measures it has instituted to review waiting lists monthly and ensure clients are contacted in sequences in both the Public Housing and Section 8 Waiting Lists—<u>Complete and on-going.</u>

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" Note: Standard and Troubled PHAs complete annually; Small and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.

24 CFR Part 903.7(r) - PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

In accordance with PIH notice 99-51 (HA) issued December 14, 1999, PHA's must define "substantial deviation" of Annual Plans from the 5-Year Plan and "significant amendment or modification" of the Annual Plan. The Quality Housing and Work Responsibility Act of 1998 requires that PHA's explain "substantial deviation" from the 5-Year Plan in their Annual Plans. The Act also provides that, while PHAs may change or modify their plans or policies described in them, any "significant deviation" to the plan would require PHAs to submit a revised PHA plan that has met full public process requirements.

CRITERIA FOR DETERMINING SUBSTANTIAL DEVIATION AND SIGNIFICANT AMENDMENT OR MODIFICATION

The Pasco County Housing Authority definition of "substantial deviation" from the 5-Year Plan and "significant amendment or modification" of the Annual Plan will consider the following to be significant amendments or modifications:

• <u>A change in Mission Statement or Goals identified in the Five-Year Plan.</u>

Significant Amendment/Modification:

10.0

• <u>Significant modifications to major strategies to address housing needs and to major policies (e.g.,</u> policies governing eligibility, selection or admissions and rent determination) or programs (e.g., demolition or disposition, designation, homeownership programs or conversion activities).

(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).

The PCHA submitted its SEMAP information 1 day late to HUD due to a staff illness. Due to this late submission HUD gave the Authority a troubled status under SEMAP. This rating will not be lifted until the next SEMAP submission which will be November 29, 2011. Other than the late submission, the fundamentals of the program should return the program's status to High Performer. **Please see f1104102** for a copy of all correspondence regarding this issue.

- **11.0 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.
 - (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)

(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)

PLEASE SEE ATTACHED-fl104m02 for signed forms.

(e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)

NOT APPLICABLE

(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 Administrative Assistant, Ms. Abigail Jackson, reviewed in detail the Pasco County Housing Authority's Annual Plan with the Resident Council. She reviewed all anticipated budget items for the Capital Fund Program for all public housing communities and asked for comments from the residents. Ms. Jackson also reviewed all completed work items through the ARRA grant and the Capital Fund grants. The Resident Council was very happy with the completed work items through the ARRA and Capital Fund grant funding.

PLEASE SEE ATTACHED-fl104n02 for resident meeting notes and sign in-sheet.

(g) Challenged Elements

There have been no challenged elements of this plan either by the residents or by the public.

PLEASE SEE ATTACHED-f1104002 for the public hearing notes.

(h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)

PLEASE SEE Attached- fl104a02; fl104b02; fl104c02; fl104d02; fl104e02; fl104f02; fl104g02; fl104h02, and fl104i02.

(i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

PLEASE SEE ATTACHED- fl104j02

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 off ice 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)

- 2. 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.
- 3. 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.
- 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).

- 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.c fm

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 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.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Evolution 3/31/2014

| Part I: S | Part I: Summary | | | | | 1 222 |
|--------------------|--|--|----------|--|----------------------|---|
| PHA Nam HOUSING | PHA Name: PASCO COUNTY HOUSING AUTHORITY | Grant Type and Number Capital Fund Program Grant No: FL29P10450111 Replacement Housing Factor Grant No: Date of CFFP: | 450111 | | | FFY of Grant 2011 FFY of Grant Approval: |
| Type of Grant | e of Grant Original Annual Statement | Reserve for Disasters/Emergencies | | Revised Annual Statement (revision no: | t (revision no: | J |
| Perfor | Performance and Evaluation Report for Period Ending: | for Period Ending: | | ormance a | nd Evaluation Report | |
| Line | Summary by Development Account | Account | T | Total Estimated Cost | | Total Actual Cost |
| | | | Original | Revised ² | Obligated | Expended |
| | Total non-CFP Funds | | 0 | 0 | 0 | 0 |
| 2 | 1406 Operations (may not exceed 20% of line 21) 3 | eed 20% of line 21) ³ | 180607 | 0 | 0 | 0 |
| ω | 1408 Management Improvements | ents | 50000 | 0 | 0 | 0 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | exceed 10% of line 21) | 25623 | 0 | 0 | 0 |
| S | 1411 Audit | | 0 | 0 | 0 | 0 |
| 6 | 1415 Liquidated Damages | - | 0 | 0 | 0 | 0 |
| 7 | 1430 Fees and Costs | | 0 | 0 | 0 | 0 |
| 8 | 1440 Site Acquisition | - | 0 | 0 | 0 | 0 |
| 9 | 1450 Site Improvement | | 0 | 0 | 0 | 0 |
| 10 | 1460 Dwelling Structures | | 0 | 0 | 0 | 0 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | -Nonexpendable | 0 | . 0 | 0 | 0 |
| 12 | 1470 Non-dwelling Structures | | 0 | 0 | 0 | 0 |
| 13 | 1475 Non-dwelling Equipment | ť | 0 | 0 | 0 | 0 |
| 14 | 1485 Demolition | | 0 | 0 | 0 | 0 |
| 15 | 1492 Moving to Work Demonstration | stration | 0 | 0 | 0 | 0 |
| 16 | 1495.1 Relocation Costs | | 0 | 0 | 0 | 0 |
| 17 | 1499 Development Activities 4 | | 0 | 0 | 0 | 0 |
| | | | | | | |

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

| Part I: Summary | ummary | | | | | | | |
|---|---|----------|------------|--------------------------------------|---------------------------------------|---|---------------------|---|
| PHA Name: PASCO COUNTY HOUSING AUTHORITY | er OUNTY Grant Type and Number Capital Fund Program Grant No: FL29P10450111 Replacement Housing Factor Grant No: | | | | FFY of Grant:2011 FFY of Grant App | FFY of Grant:2011 FFY of Grant Approval: | | |
| Type of Grant | - | | | | | | | |
| X Ori | Original Annual Statement Reserve for Disasters/Emergencies | encies | | | evised Ani | Revised Annual Statement (revision no: |) | |
| Perfo | Performance and Evaluation Report for Period Ending: | | | 🗆 Final | l Perform | Final Performance and Evaluation Report | | |
| | Summary by Development Account | T | otal Estin | Total Estimated Cost | | | Total Actual Cost ' | |
| LINC | | Original | | Revised ² | | Obligated | Expended | |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | 0 | | 0 | | 0 | 0 | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | 0 | | 0 | | 0 | 0 | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | 0 | | 0 | | 0 | 0 | |
| 20 | Amount of Annual Grant:: (sum of lines 2 - 19) | 256,230 | | 0 | | 0 | 0 | |
| 21 | Amount of line 20 Related to LBP Activities | 0 | | 0 | | 0 | 0 | |
| 22 | Amount of line 20 Related to Section 504 Activities | 0 | | 0 | | 0 | 0 | |
| 23 | Amount of line 20 Related to Security - Soft Costs | 50000 | | 0 | | 0 | 0 | |
| 24 | Amount of line 20 Related to Security - Hard Costs | 0 | | 0 | | 0 | 0 | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | 0 | | 0 | | 0 | 0 | |
| Signature | Signature of Executive Director KAREN TURNER | | Signatu | Signature of Public Housing Director | ing Dire | sctor | Date | |
| Т | Haren Turne | 11/81/20 | | | | | | L |
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⁴ 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.

form HUD-50075.1 (4/2008)

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

| PHA Name: PASCO CO | UNTY HOUSING AUTHORITY | Grant Type and Capital Fund Proy CFFP (Yes/ No): Replacement Hou | Grant Type and Number Capital Fund Program Grant No: FL29P10450111 CFFP (Yes/ No): Replacement Housing Factor Grant No: | : FL29P104501 ant No: | 11 | Federal F | Federal FFY of Grant: 2011 | Ē | |
|-------------------------------------|---|---|---|--------------------------|----------------------|----------------------|---------------------------------|--------------------------------|----------------|
| Development Number Name/PHA-Wide | General Description of Major Work Categories | Work | Development Account No. | Quantity | Total Estimated Cost | ted Cost | Total Actual Cost | Jost | Status of Work |
| ACUVIUES | | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| PHA WIDE | 1406 OPERATIONS | | 1406 | | 180607 | 0 | 0 | 0 | |
| PHA WIDE | 1410 ADMINISTRATION | | 1410 | | 25623 | 0 | 0 | 0 | |
| FL104-00000108D | 1408 MANAGEMENT IMPROVEMENTS | | 1408 | | 50000 | 0 | 0 | 0 | |
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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.

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

| Part III: Implementation Schedule for Capital Fund Financing Program | edule for Capital Fund | Financing Program | | | |
|--|------------------------------------|---|----------------------------------|---|----------------------------------|
| PHA Name: PASCO COUNTY HOUSING AUTHORITY | FY HOUSING AUTI | IORITY | | | Federal FFY of Grant: 2011 |
| Development Number Name/PHA-Wide Activities | All Fund (Quarter I | All Fund Obligated (Quarter Ending Date) | All Func (Quarter) | All Funds Expended (Quarter Ending Date) | Reasons for Revised Target Dates |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| PHA WIDE | | | - | | |
| FL'04-00000108D | | | | | |
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¹Obligation 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.

Page5

form HUD-50075.1 (4/2008)

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

| $\begin transformer to the period Number capate of CFFP: $$ $$ $$ $$ $$ $$ $$ $$ $$ $$ $$ $$ $$$ | 0 | 0 | 0 | 0 | | | |
|---|---|----------------|------------------------------|----------|--|--|---------------|
| $\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$ | 0 | 0 | 0 | | | 1499 Development Activities 4 | 17 |
| $\begin transformer transformer transformer terms terms transformer terms terms transformer terms terms transformer terms terms transformer terms ter$ | | | | | | 1495.1 Relocation Costs | 16 |
| $\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$ | | 0 | 0 | 0 | tration | 1492 Moving to Work Demonst | CT |
| $\begin{tabular}{ c c c c } \hline \begin{tabular}{ c c c c c } \hline \begin{tabular}{ c c c c c } \hline \begin{tabular}{ c c c c c c c } \hline \begin{tabular}{ c c c c c c c c c c c c c c c c c c c$ | 0 | 0 | 0 | 0 | | | 1.1 |
| $\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$ | 0 | 0 | 0 | 0 | | 1/95 Demolition | 14 |
| $\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$ | 0 | 0 | 0 | C | | 1475 Non-dwelling Equipment | 13 |
| $ \begin{array}{ c c c c c c } \hline \mbox{Number} & \mbox{Fry of Grant Type and Number} & \mbox{Fry of Grant Type and Number} & \mbox{Fry of Grant No:} & \mbox{Particle Fund Program Grant No: F1.29P1(0450110 & \mbox{Particle Fund Program Grant No: F1.29P1(0450110 & \mbox{Particle Fund Report for Disastery/Emergencies} & \mbox{Particle Fund Breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Report for Disastery/Emergencies} & Particle Fund Program Grant No: F1.29P1(0450110 & \mbox{Particle Fund Breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: breator Grant No: breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: breator Grant No: F1.29P1(0450110 & \mbox{Particle Fund Statement (revision no: breator Grant No: breator Gran$ | 0 | 0 | 0 | | | 1470 Non-dwelling Structures | 12 |
| INTY Grant Type and Number Capital Fund Program Grant No: FL29P10450110 FIV of Gr Profice Previous Profice Previous Profice Prevision no: Intervision Report for Previou Ending: Intervision Intervision Report Intervision Intervision no: Intervision no: Intervision no: Intervision Report Intervision Intervision no: Intervision no: Intervision Report Intervision Intervision no: Intervision no: Intervision Report Intervision | 0 | 0 | | | Nonexpendable | 1465.1 Dwelling Equipment- | 11 |
| INTY Grant Type and Number Capital Fund Program Grant No: FL29P10450110 FFV of Gr Prof Capital Fund Program Grant No: FL29P10450110 neat Date of CFFP: Date of CFFP: Previous Factor Grant No: FL29P10450110 FFV of Gr neat Date of CFFP: Date of CFFP: Prevised Annual Statement (revision no: 1) FFV of Gr neat Date of CFFP: Original Original Revised Annual Statement (revision no: 1) FFV of Gr neat Date of CFFP: Original Original Date of CFFP: Final Performance and Evaluation Report F store 0 0 0 0 0 0 0 store 0 0 0 0 0 0 0 0 0 store 0 </td <td>) O</td> <td></td> <td></td> <td>→ <</td> <td></td> <td>1460 Dwelling Structures</td> <td>10</td> |) O | | | → < | | 1460 Dwelling Structures | 10 |
| INTY Grant Type and Number FF2 of Gr Capital Fund Program Grant No: F29P10450110 FFY of Gr Date of CFFP: Date of CFFP: Revised Annual Statement (revision no::) Ination Report for Period Ending: 0 0 0 Indian Report for Sector Grant No: 0 0 0 Indian Report for Period Ending: 0 0 0 0 Indian Report for Period Ending: 0 0 0 0 0 Indian Report for Period Ending: 0 0 0 0 0 0 Indian Report for Period Ending: 0 0 0 0 0 0 0 Indiano encode 20% of line 21) ³ 220783 0 0 0 0 0 0 Informance 10% of line 21) 30087 0 0 0 0 0 0 Informance 0 0 0 0 0 0 0 0 0 Informance 0% of line 21) ³ 0087 0 0 0 0 0 0 0 | | | 0 | 0 | | 1450 Site Improvement | 9 |
| INTY Grant Type and Number FEV of Gr Capital Fund Pogram Grant No: FEV of Gr Date of CFFP: Date of CFFP: nent Date of CFFP: Indian Report for Period Ending: Original Verelopment Account Original Funds 0 s (may not exceed 20% of line 21) ³ 220783 ation (may not exceed 10% of line 21) 30087 ots 0 Obarages 0 0 0 <td></td> <td></td> <td>0</td> <td>0</td> <td></td> <td>1440 Site Acquisition</td> <td>00</td> | | | 0 | 0 | | 1440 Site Acquisition | 00 |
| INTY Grant Type and Number FFY of Grant Type and Number FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital Capital Fund Program Grant No: FL29P10450110 FFY of Grant Capital C | |) (| 0 | 0 | | 1430 Fees and Costs | |
| INTY Grant Type and Number FFV of Grant Capital Fund Program Grant No: FFV of Grant Grant No: Late of CFFP: Date of CFFP: Date of CFFP: File Second For Period Ending: > Lustion Report for Period Ending: Original Total Estimated Cost > Output Account > Funds Original Original Revised? Oligated 0 0 0 s (may not exceed 10% of line 21)* 220783 0 0 0 0 0 0 0 ation (may not exceed 10% of line 21) 30087 0 | 0 | 0 | 0 | 0 | | 1415 Liquidated Damages | |
| INTY Grant Type and Number FFY of Gr Capital Fund Program Grant No: FL29P10450110 FFY of Gr Replacement Housing Factor Grant No: FFY of Gr Intel Corper: Date of CFFP: Intel Corper: Intel Corper: Intercorper: Intercorper: Interorper: | 0 | 0 | 0 | 0 | | 14167 | ~ |
| INTY Grant Type and Number FFY of Gr Capital Fund Program Grant No: FL29P10450110 FFY of Gr Replacement Housing Factor Grant No: Performance and Statement (revision no: Late of CFFP: nent Reserve for Disasters/Emergencies Revised Annual Statement (revision no: Late of CFFP: nent Report for Period Ending: Performance and Evaluation Report huation Report for Period Ending: Original Total Estimated Cost Performance 20% of line 21) ³ 0 0 0 s (may not exceed 20% of line 21) ³ 220783 0 0 220783 2207 ation (may not exceed 10% of line 21) 30007 0 0 0 0 0 | 15043.50 | 30087 | 0 | 1000 | | 1411 Audit | 2 |
| INTY Grant Type and Number FFY of Gr Capital Fund Program Grant No: FL29P10450110 FFY of Gr Replacement Housing Factor Grant No: Previous Prevised Annual Statement (revision no: Date of CFFP:) nent Reserve for Disasters/Emergencies Privat Period Ending:) Image: Period Ending: Original Total Estimated Cost) Image: Period Ending: 0 0 0 0 Image: Period Ending: 0 0 0 0 220783 Image: Period Ending: 0 0 0 0 220783 0 | 0 | | | 20007 | t exceed 10% of line 21) | 1410 Administration (may not | 4 |
| INTY Grant Type and Number FFY of Gr Capital Fund Program Grant No: FL29P10450110 FFY of Gr Replacement Housing Factor Grant No: Pate of CFFP: nent Date of CFFP: nent Reserve for Disasters/Emergencies Prive Copy is a stern of the prive of t | 001022 | A | 0 | 50000 | ents | 1408 Management Improvem | 3 |
| INTY Grant Type and Number FFV of Gr Capital Fund Program Grant No: FI.29P10450110 FFV of Gr Replacement Housing Factor Grant No: FI.29P10450110 nent Date of CFFP: nent Reserve for Disasters/Emergencies Revised Annual Statement (revision no: the statement for Period Ending: levelopment Account Original Total Estimated Cost Total Actual Cost Funds 0 0 0 0 | 770783 | 220783 | 0 | 220783 | ced 20% of line 21) 3 | 1400 Uperations (may not exc | 2 1 |
| INTY Grant Type and Number FFV of Gr Capital Fund Program Grant No: FI_29P10450110 FFV of Gr Replacement Housing Factor Grant No: FI29P10450110 Date of CFFP: Date of CFFP: nent Reserve for Disasters/Emergencies Revised Annual Statement (revision no: thuston Report for Period Ending: utuation Report for Period Ending: Total Actual Cost Total Actual Cost evelopment Account Original Total Estimated Cost | 0 | 0 | 0 | 0 | | 1406 Occurring to the second | 3 |
| INTY Grant Type and Number FFV of Gr Capital Fund Program Grant No: FL29P10450110 FFY of Gr Replacement Housing Factor Grant No: PETV of Gr Date of CFFP: Date of CFFP: nent Reserve for Disasters/Emergencies Revised Annual Statement (revision no: utuation Report for Period Ending: Total Actual Cost Total Actual Cost | Expended | | Revised ² | Uriginal | | Total non-CFP Funde | - |
| INTY Grant Type and Number FFV of Gr Capital Fund Program Grant No: FL29P10450110 FFY of Gr Replacement Housing Factor Grant No: Date of CFFP: nent Date of CFFP: nent Reserve for Disasters/Emergencies luation Report for Period Ending: Involument Providement Account Image of CFFP: | Fotal Actual Cost 1 | | Total Estimated Cost | | ACCOUNT | | |
| INTY Grant Type and Number FFY of Gr Capital Fund Program Grant No: FL29P10450110 FFY of Gr Replacement Housing Factor Grant No: FFY of Gr Date of CFFP: Pate of CFFP: nent Reserve for Disasters/Emergencies | | luation Report | G Final Performance and Eva | | Account | Summary by Development | |
| INTY Grant Type and Number FFY of Gr Capital Fund Program Grant No: FI.29P10450110 FFY of Gr Replacement Housing Factor Grant No: FFY of Gr | | evision no: | Revised Annual Statement (re | | Reserve for Disasters/Emergencies | pe of Grant Original Annual Statement | Iype of Grant |
| | FFY of Grant: 2010 FFY of Grant Approval: 2010 | | | 10450110 | Grant Type and Number Capital Fund Program Grant No: FL29P Replacement Housing Factor Grant No: Date of CFFP: | HOUSING AUTHORITY | HOUSE |
| | | | | | | PHA Name: PASCO COTINTY | PHA N |
| | Expires 3/31/2014 | | | | | Commons | Part I. |

¹To be completed for the Performance and Evaluation Report. ²To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ³PHAs 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

| J | Signature | 25 | 24 | 23 | 22 | 21 | 20 | 19 | 18ba | 18a | | Line | X Per | Origi | Type of Grant | PHA Name: PASCO COUNTY HOUSING AUTHORITY | Part I: Summary |
|---------------|--|---|--|--|---|---|--|---|---|---|----------------------|--------------------------------|--|--|---------------|---|-------------------|
| and turner 07 | Signature of Executive Director KAREN TURNER | Amount of line 20 Related to Energy Conservation Measures | Amount of line 20 Related to Security - Hard Costs | Amount of line 20 Related to Security - Soft Costs | Amount of line 20 Related to Section 504 Activities | Amount of line 20 Related to LBP Activities | Amount of Annual Grant:: (sum of lines 2 - 19) | 1502 Contingency (may not exceed 8% of line 20) | 9000 Collateralization or Debt Service paid Via System of Direct Payment | 1501 Collateralization or Debt Service paid by the PHA. | | Summary by Development Account | Performance and Evaluation Report for Period Ending: | Original Annual Statement | rant | ie: Grant Type and Number Capital Fund Program Grant No: FL29P10450110 Replacement Housing Factor Grant No: Date of CFFP: | ummary |
| 07/13/2011 | Date | 0 | 0 | 50000 | 0 | 0 | 300870 | 0 | 0 | 0 | Original | | | gencies | | | |
| | Signatur | | | | | | | | • | | e | Total Estimated Cost | | | | | |
| | Signature of Public Housing Director | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Revised ² | nated Cost | 🗆 Fin | Revise | | म् | |
| | ng Director | 0 | 0 | 0 | 0 | 0 | 250870 | 0 | 0 | 0 | Obligated | Tot | Final Performance and Evaluation Report | Revised Annual Statement (revision no: | | FFY of Grant2010 FFY of Grant Approval: 2010 | • |
| | Date | 0 | 0 | 0 | 0 | 0 | 235826.50 | 0 | 0 | 0 | Expended | Total Actual Cost ¹ | ort | ~ | | | Expires 4/30/2011 |
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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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| HUD- |
| 50075.1 |
| (4/2008) |

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

| PHA Name: PASCO CO | PHA Name: PASCO COUNTY HOUSING AUTHORITY | Grant Type and Number Capital Fund Program Grant No: FL29P10450110 CFFP (Yes/ No): Replacement Housing Factor Grant No: | ımber m Grant No: FL2 g Factor Grant N | 9P1045011 | 0 | Federal F | Federal FFY of Grant: 2010 | 10 | |
|---|---|---|--|-----------|----------------------|----------------------|---------------------------------|--------------------------------|----------------|
| Development Number Name/PHA-Wide Activities | General Description of Major Work Categories | Work Development Account No. | | Quantity | Total Estimated Cost | Ited Cost | Total Actual Cost | Jost | Status of Work |
| | | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| PHA WIDE | 1406 OPERATIONS | 1406 | | | 220783 | 0 | 220783 | 220783 | 100% |
| PHA WIDE | 1410 ADMINISTRATION | 1410 | | | 30087 | 0 | 30087 | 15043.50 | 50% |
| FL104-00000108D | 1408 MANAGEMENT IMPROVEMENTS | 1408 | | | 50000 | 0 | 0 | 0 | 0% |
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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.

FL'04-00000108D PHA WIDE Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: PASCO COUNTY HOUSING AUTHORITY Development Number Name/PHA-Wide Activities 07/14/2012 07/14/2012 Obligation End Date Original All Fund Obligated (Quarter Ending Date) 06/30/2011 Actual Obligation End Date 07/14/2014 Original Expenditure End Date All Funds Expended (Quarter Ending Date) Actual Expenditure End Date Federal FFY of Grant: 2010 Reasons for Revised Target Dates Expires 4/30/2011

Capital Fund Financing Program

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing OMB No. 2577-0226

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.

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form HUD-50075.1 (4/2008)

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

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

| Part I: S | Part I: Summary | | | | | Expires 3/31/2014 |
|-------------------|---|--|----------|--|---------------------------------|---|
| PHA Nan HOUSIN | PHA Name: PASCO COUNTY HOUSING AUTHORITY | Grant Type and Number Capital Fund Program Grant Nof(29s10450109 Replacement Housing Factor Grant No: Date of CFFP: | 601 | | | FFY of Grant: 2009 ARRA FFY of Grant Approval: |
| Type of Gran | t Annual Statement | Reserve for Disasters/Emergencies | | Revised Annual Statement (revision no: | ent (revision no:) | |
| X Perf | tion Repo | Performance and Evaluation Report for Period Ending: 06/30/2011 | | Final Perfo | rformance and Evaluation Report | |
| Line | Summary by Development Account | Account | | Total Estimated Cost | | Fotal Actual Cost 1 |
| | | | Original | Revised ² | Obligated | Expended |
| 1 | Total non-CFP Funds | | 0 | 0 | 0 | 0 |
| 2 | 1406 Operations (may not exceed 20% of line 21) 3 | ceed 20% of line 21) ³ | 0 | 0 | 0 | 0 |
| ω | 1408 Management Improvements | lents | 0 | 0 | 0 | 0 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | t exceed 10% of line 21) | 7500 | 5000 | 5000 | 5000 |
| 5 | 1411 Audit | | 0 | 0 | 0. | 0 |
| 6 | 1415 Liquidated Damages | | 0 | 0 | 0 | 0 |
| 7 | 1430 Fees and Costs | | 27617 | 0 | 27617 | 27617 |
| 8 | 1440 Site Acquisition | | 0 | 0 | 0 | 0 |
| 6 | 1450 Site Improvement | | 289248 | 193422 | 193422 | 193422 |
| 10 | 1460 Dwelling Structures | | 59440 | 157766 | 157766 | 157766 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | -Nonexpendable | 0 | 0 | 0 | 0 |
| 12 | 1470 Non-dwelling Structures | | 0 | 0 | 0 | 0 |
| 13 | 1475 Non-dwelling Equipment | ıt | 0 | 0 | 0 | 0 |
| 14 | 1485 Demolition | | 0 | 0 | 0 | 0 |
| 15 | 1492 Moving to Work Demonstration | Istration | 0 | 0 | 0 | 0. |
| 16 | 1495.1 Relocation Costs | | 0 | 0 | 0 | 0 |
| 17 | 1499 Development Activities 4 | 4 | 0 | 0 | 0 | 0 |

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

| | | | | 110 | 67/14/2011 | Haven Turner | |
|----|--------------------------------|--|--------------------------------------|------------|------------|--|---|
| te | Date | virector | Signature of Public Housing Director | | Date | Signature of Executive Director KAREN TURNER | Signatur |
| | 0 | 0 | 0 | | 0 | Amount of line 20 Related to Energy Conservation Measures | 25 |
| | 0 | 0 | 0 | | 0 | Amount of line 20 Related to Security - Hard Costs | 24 |
| | 0 | 0 | 0 | | 0 | Amount of line 20 Related to Security - Soft Costs | 23 |
| | 0 | 0 | 0 | | 0 | Amount of line 20 Related to Section 504 Activities | 22 |
| | 0 | 0 | 0 | | 0 | Amount of line 20 Related to LBP Activities | 21 |
| | 383805 | 383805 | 356188 | | 383805 | Amount of Annual Grant:: (sum of lines 2 - 19) | 20 |
| | 0 | 0 | 0 | | 0 | 1502 Contingency (may not exceed 8% of line 20) | 19 |
| | 0 | 0 | 0 | | 0 | 9000 Collateralization or Debt Service paid Via System of Direct Payment | 18ba |
| | 0 | 0 | 0 | | 0 | 1501 Collateralization or Debt Service paid by the PHA | 18a |
| 4 | Expended | Obligated | Revised ² | ținal | Original | | |
| | Total Actual Cost ¹ | Tota | Total Estimated Cost | Total Esti | | Summary by Development Account | Line |
| | Report | Final Performance and Evaluation Report | 🗆 Fina | | | Performance and Evaluation Report for Period Ending: 06/30/2011 | X Pe |
| |) | Revised Annual Statement (revision no: | Revised An | | rgencies | Original Annual Statement Reserve for Disasters/Emergencies | Orig |
| | | | | | | Grant | Type of Grant |
| | | FFY of Grant:2009 ARRA FFY of Grant Approval: | FFY of | | | PHA Name: Grant Type and Number PASCO COUNTY Capital Fund Program Grant No: FL29P10450110 HOUSING Replacement Housing Factor Grant No: AUTHORITY Date of CFFP: | PHA Name: PASCO COUN HOUSING AUTHORITY |
| | | | | | | Part I: Summary | Part I: S |

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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| HUD-S |
| 0075.1 (|
| (4/2008) |

¹ To be completed for the Performance and Evaluation Report or a Kevised Annual Staten ² To be completed for the Performance and Evaluation Report.

| Capital Fund Financing Program | Capital Fund Financing Program | | | | | OM | OMB No. 2577-0226 Expires 4/30/2011 | 26 Expires 4/30/2011 |
|--|---|--|-----------------|--------------|---------------|---------------------------------|--|-------------------------|
| Part II: Supporting Pages | | | | | | | | 101100 TO 0012 |
| PHA Name: PASCO COUNTY HOUSING AUTHORITY | | Grant Type and Number Capital Fund Program Grant No: FL29P10450110 CFFP (Yes/ No): | lo: FL29P104501 | 10 | Federal | Federal FFY of Grant: 2009 ARRA | 009 ARRA | |
| | Re | iceme | Grant No: | 3 | | | | 2 |
| A-Wide | General Description of Major Work Categories | rk Development Account No. | Quantity | Total Estima | stimated Cost | Total Actual Cost | Cost | Status of Work |
| | | | | Original | Revised 1 | Funds | Funds | |
| | | | | | | Obligated | Expended | 1000 |
| | 1410 EEES AND COSTS | 1410 | | 71210 | | 71217 | 77617 | 100% |
| 0102D | 1460 WINDOW REPLACEMENT | 1460 | \$3 | 0 2,01, | 0 | 0 | 0 | 100/0 |
| | | 2 | | | | | | |
| FL104-00000108D 1460 KIT | 1460 KITCHEN RENOVATIONS | 1460 | 7 | 13720 | 30685 | 30685 | 30685 | 100% |
| | 1460 WATER HEATERS | 1460 | 14 | 11200 | 5000 | 5000 | 5000 | 100% |
| | 1460 KITCHEN RENOVATIONS | 1460 | 12 | 23520 | 52603 | 52603 | 52603 | 100% |
| | 1460 REPLACE REAR SCREEN DOORS | 1460 | 50 | 11000 | 23250 | 23250 | 23250 | 100% |
| | 1460 UNIT TO 504 COMPLIANCE | 1460 | 1 | 0 | 46228 | 46228 | 46228 | 100% |
| | 1450 RESURFACE ROADS | 1450 | | 104666 | 52235 | 52235 | 52235 | 100% |
| | 1450 TREE REMOVAL | 1450 | | 3178 | 0 | 0 | 0 | |
| | 450 EROSION CONTROL | 1450 | | 49875 | 31089 | 31089 | 8015 | 100% |
| | 1450 GRADING IRRIGATION | 1450 | | 16931 | 28125 | 28125 | 28125 | 100% |
| | 1450 REPLACE RETAINING WALL | 1450 | 1 | 30000 | 20573 | 20573 | 20573 | 100% |
| FL104-00000208D 1450 ASPI | 1450 ASPHALT PAVING RESTRIPE | E 1450 | | 84598 | 61400 | 61400 | 61400 | 100% |

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| .1 (4/2) | |
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² To be completed for the Performance and Evaluation responses a restrict running ² To be completed for the Performance and Evaluation Report.

| Part II: Supporting Pages | | | | | | | | | |
|---|---|--|--|--------------|----------------------|----------------------|---------------------------------|--------------------------------|----------------|
| PHA Name: | 2000 | Grant Type an Capital Fund P CFFP (Yes/ Ne Ceplacement H | Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/No): Replacement Housing Factor Grant No: | : ant No: | | Federal | Federal FFY of Grant: | | |
| Development Number Name/PHA-Wide Activities | General Description of Major Work Categories | | Development Account No. | Quantity | Total Estimated Cost | ated Cost | Total Actual Cost | Cost | Status of Work |
| | | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
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| ¹ To be co | ¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. | eport or a Revise | d Annual Statemer | Ħ. | | | | | |

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

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

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form HUD-50075.1 (4/2008)

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.

| Part III: Implementation Schedule for Capital Fund Financing Program | edule for Capital Fund | Financing Program | | | |
|--|------------------------------------|---|----------------------------------|---|----------------------------------|
| PHA Name: PASCO COUNTY HOUSING AUTHORITY | TY HOUSING AUTI | IORITY | | | Federal FFY of Grant: 2010 |
| Development Number Name/PHA-Wide Activities | All Fund (Quarter I | All Fund Obligated (Quarter Ending Date) | All Func (Quarter) | All Funds Expended (Quarter Ending Date) | Reasons for Revised Target Dates |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| PHA WIDE | 03/17/2010 | 03/17/2010 | 03/17/2012 | 06/30/2011 | |
| FL104-00000108D | 03/17/2010 | 03/17/2010 | 03/17/2012 | 06/30/2011 | |
| FL104-00000208D | 03/17/2010 | 03/17/2010 | 03/17/2012 | 06/30/2011 | |
| FL104-00000308D | 03/17/2010 | 03/17/2010 | 03/17/2012 | 06/30/2011 | |
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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

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

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

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.

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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

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Annual Statement/Performance and Evaluation Report

Capital Fund Financing Program

| 0 | 0 | 17 1499 Development Activities ⁴ |
|------------------------|------------|--|
| 0 | 0 | 16 1495.1 Relocation Costs |
| 0 | 0 | 15 1492 Moving to Work Demonstration |
| 0 | 0 | 14 1485 Demolition |
| 0 | 0000 | 13 1475 Non-dwelling Equipment |
| 0 | 0 | 12 1470 Non-dwelling Structures |
| 0 | 44000 | 11 1465.1 Dwelling Equipment—Nonexpendable |
| 0 | 22000 | 10 1460 Dwelling Structures |
| 0 | 0 | 9 1450 Site Improvement |
| 0 | 0 | 8 1440 Site Acquisition |
| 0 | 2000 | 7 1430 Fees and Costs |
| 0 | 0 | 6 1415 Liquidated Damages |
| 0 | 0. | 5 1411 Audit |
| 29957 | 10000 | 4 1410 Administration (may not exceed 10% of line 21) |
| 60000 | 48000 | 3 1408 Management Improvements |
| 209622 | 112679 | 2 1406 Operations (may not exceed 20% of line 21) ³ |
| 0 | | 1 Total non-CFP Funds |
| Revised ² | Original | |
| timated Cost | Total Es | Line Summary by Development Account |
| Revised Annual Stateme | | Type of Grant Image: Construction of the second |
| | | Replacement Housing Factor Grant No: Date of CFFP: |
| | 4-501-00 | PHA Name: PASCO COUNTY HOUSING AUTHORITY Casibal Fund Decream Grant No: EI 200104_501_00 |
| | | Part I: Summary |
| | Pactor and | Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program |

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

| | | 1106/51/20 | haven huma | |
|---------------------------|---------|------------|--|---|
| Signature of Public Housi | Signa | Date | Signature of Executive Director KAREN TURNER | Signatu |
| | | | Amount of line 20 Related to Energy Conservation Measures | 25 |
| | | | Amount of line 20 Related to Security - Hard Costs | 24 |
| | | | Amount of line 20 Related to Security - Soft Costs | 23 |
| | | | Amount of line 20 Related to Section 504 Activities | 22 |
| | | | Amount of line 20 Related to LBP Activities | 21 |
| 299579 | | 299579 | Amount of Annual Grant:: (sum of lines 2 - 19) | 20 |
| 0 | | 0 | 1502 Contingency (may not exceed 8% of line 20) | 19 |
| 0 | | 0 | 9000 Collateralization or Debt Service paid Via System of Direct Payment | 18ba |
| 0 | | 0 | 1501 Collateralization or Debt Service paid by the PHA | 18a |
| Revised ² | | Original | | |
| Total Estimated Cost | Total E | | Summary by Development Account | Line |
| | | | Performance and Evaluation Report for Period Ending: 06/30/2011 | X |
| Revise | | ergencies | Original Annual Statement | |
| | | | Grant | Type of Grant |
| <u> </u> | | | PHA Name: Grant Type and Number PASCO COUNTY Capital Fund Program Grant No: FL29P104-501-09 HOUSING Replacement Housing Factor Grant No: AUTHORITY Date of CFFP: | PHA Name: PASCO COUN HOUSING AUTHORITY |
| | | | Part I: Summarv | Part I: |

T MANY I MANY Cili yan

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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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

| PHA Name: PASCO CO | UNTY HOUSING AUTHORITY | Grant Type and Number Capital Fund Program Grant No: FL29P104-501-09 CFFP (Yes/No): Replacement Housing Factor Grant No: | 5: FL29P104-50 rant No: | 1-09 | Federal | Federal FFY of Grant: 2009 | | |
|-------------------------------------|---|--|----------------------------|----------------------|-----------|---------------------------------|--------------------------------|----------------|
| Development Number Name/PHA-Wide | General Description of Major Work Categories | Development Account No. | Quantity | Total Estimated Cost | ated Cost | Total Actual Cost | Cost | Status of Work |
| Activities | | | | Original | Revised 1 | Funds Obligated ² | Funds Expended ² | N |
| DHA WIDE | 1406 OPERATIONS | 1406 | | 112679 | 209622 | 209622 | 209622 | COMPLETE |
| PHA WIDE | 1410 ADMINISTRATION | 1410 | | 10000 | 29957 | 29957 | 19971.28 | 67% |
| PHA WIDE | 1430 FEES AND COSTS | 1430 | | 2000 | 0 | 0 | 0 | |
| FL104-00000108D | 1408 MANAGEMENT IMPROVEMENTS | 1408 | | 48000 | 60000 | 60000 | 19971.28 | 33% |
| FL104- 00000208D | 1460 DWELLING STRUCTURES | 1460 | | 22000 | 0 | 0 | 0 | |
| FL104-00000308D | 1466 DWELLING EQUIPMENT | 1466 | | 44000 | 0 | 0 | 0 | |
| FL104-00000308D | 1475 NON DWELLING EQUIPMENT | 1475 | | 60900 | 0 | 0 | 0 | |
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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.

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| | 09/14/2013 | 01/31/2011 | 09/14/2011 | PHA WIDE |
| Actual Expendit Date | Unginal Expenditure End Date | End Date | Original Obligation End Date | |
| | | | | Activities |
| All Funds Expended (Quarter Ending Date) | All Fund (Quarter E | All Fund Obligated (Quarter Ending Date) | All Fund (Quarter J | Development Number Name/PHA-Wide |
| | | HORITY | Y HOUSING AUT | PHA Name: PASCO COUNTY HOUSING AUTHORITY |
| | | Financing Program | dule for Capital Fund | Part III: Implementation Schedule for Capital Fund Financing Program |
| | tor and | eport Macement Housing Fac | ce and Evaluation Re al Fund Program Rep ,ram | Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program |

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of

| | 0T | 12 | 15 | . 13 | 11 | 11 | 10 | 2 | 0 | | 0 | 5 | 4 | | 2 1 | | - | June | Type of Gran | PHA Na HOUSIN | Part I: | Annua Capital Capital |
|-----------------------------|-------------------------|-----------------------------------|----------------|------------------------------|------------------------------|---|--------------------------|-----------------------|-----------------------|---------------------|-------------------------|------------|---|-------------------------------|--|---|----------------------|--------------------------------|--|--|-----------------|---|
| 1497 Development Activities | 1495.1 Kelocation Costs | 1492 Moving to Work Demonstration | 1465 Demoitton | 14/J INOR-GWeiling Equipment | 1470 Non-dweiling Structures | 1465.1 Dwelling Equipment—Nonexpendable | 1460 Dwelling Structures | 1450 Site Improvement | 1440 Site Acquisition | 1430 Hees and Costs | 1415 Liquidated Damages | 1411 Audit | 1410 Administration (may not exceed 10% of line 21) | 1400 Mariagement Improvements | 1400 Operations (thay not exceed 20% of line 21) 3 | | Total non CED Europh | Summary by Development Account | pe of Grant Original Annual Statement Disasters/Emergencies Performance and Evaluation Report for Period Ending: | PHA Name: PASCO COUNTY Grant Type and Number HOUSING AUTHORITY Capital Fund Program Grant No: FL29P104-501-08 Replacement Housing Factor Grant No: Date of CFFP: | Part I: Summary | Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program |
| 0 | 0 | 0 | 0 | 0 | 0 | 21731 | 55569 | 0 | 0 | 20000 | 0 | 0 | 30321 | 50000 | 125590 | 0 | Original | | | 04-501-08 | | Factor and |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 27037 | 0 | 0 | 26801 | 0 | 0 | 30321 | 50000 | 169052 | 0 | Revised ² | = " | Revised Annual Staten | | | |

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

| | Signature of Exception Discont KAREN LURIVER | Simpture of | 25 Arr | | | | | 21 Ar | 20 Ar | 19 15 | | 18ba 90 | 18a 15 | | _ | Line S | Perform | Unginal | | Type of Grant | AUTHORITY | HOUSING | PHA Name: | Part I: Summary | |
|-------------|--|-------------|---|--|--|---|------------------|--|---|---|------------------|--|--|----------------------|--------------------------------|--------------------------------|--|--|---|---------------|---------------|--|-----------------------|-------------------|--|
| - tes | Service Party | Frantina | nount of line 20 | nount of line 20 | | HOWIN OF HINC 20 | normt of line of | Amount of line 20 Related to I BP Activities | Amount of Annual Grant :: (sum of lines 2 - 19) | 02 Contingency | | 000 Collateraliz | 501 Collateraliz | | | Summary by Development Account | ance and Evalu | Unginal Annual Statement | | • | | | | nmary | |
| Contract 1 | | Dimato- VI | 0 Related to Ene | U Kelated to Sec | O NEIALEU IO SEC | O Deleted to see | A Deleted to Coo | 0 Related to I.R | ual Grant:: (sum | y (may not exce | Payment | zation or Deht S | zation or Debt S | | | evelopment Ac | luation Report | ment | | | Date of CFFP: | ital Fund Progra | Grant Type and Number | | |
| A A A A A A | MEN LUKI | | Amount of line 20 Related to Energy Conservation Measures | Amount of line 20 Kelated to Security - Hard Costs | Automit of The 20 Network to Security - Soft Costs | Amount of line 20 Resided to Section 304 ACTIVITIES | | Activities | of lines 2 - 19) | 1502 Contingency (may not exceed 8% of line 20) | t pair and stars | 9000 Collateralization or Deht Service naid Via Statem of Direct | 1501 Collateralization or Debt Service paid by the PHA | | | count | Performance and Evaluation Report for Period Ending: | |] | | Date of CFFP: | Capital Fund Program Grant No: FL29P104-501-08 | umber | | |
| | EK | | 1 Measures | s | | 8 | | | |) | ystein of Direct | water of Diana | e PHA | | - | | ng: | teserve for Disa | | | NO: | 29P104-501-08 | | | |
| | Da | , | | | | | | | | | | | | | | | | Reserve for Disasters/Emergencies | | | | | | | |
| | Date 07/12/2011 | C | Þ | 50000 | 0 | 24937 | C | 117000 | 202011 | 0 | C | | > | 0 | > | | | cies | | | | | | | |
| | _ | _ | | | | | | | | | | | | Original | | Tatal | | | | | | | | | |
| | Signature of Public Housi | | D | 50000 | 0 | 24937 | 0 | 117505 | | Э | 0 | C | > | Rev | Lotal Estimated Cost | | | | | | | | | | |
| | Housing Director | | | | | | | | | | | | | Revised ² | | | X Final Per | Revised Annual Statement (revision no: | | | | FFY of | FFY of | | |
| | rector | C | 00000 | 50000 | 0 | 24937 | 0 | 303211 | C | > | 0 | C | > | 0 | | VI MANCE AND 1 | formance and I | nual Statement | | | | FFY of Grant Approval: | FFY of Grant:2008 | | |
| | | | | | | | | | | | | | | Obligated | To | Valuation Neb | nal Performance and Evaluation Danced | t (revision no: | | | | al: | | | |
| | | 0 | 20000 | 50000 | 0 | 24937 | 0 | 303211 | C | > | 0 | 0 | | _ | Total Actual Cost ¹ | 011 | ì | - | | | | | | | |
| | Date | | | | | | | *** | | | | | | Expended | .1 | | | | | | | | | Expires 4/50/2011 | |
| | | | | | | | | | | | | | | | | | | | | | | | | 0/2011 | |

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

| PHA Name: PASCOCOU | INTY HOUSING AUTHORITY | Grant Type and Number Capital Fund Program Grant No: FL29P104-501-08 | o: FL29P104-50 | 1-08 |
|---|---|---|----------------|--------------|
| | Crrr (Replace | CETT (Tesy No): Replacement Housing Factor Grant No: | rant No: | |
| Development Number Name/PHA-Wide | General Description of Major Work Categories | Development Account No. | Quantity | Total Estima |
| | | | | Original |
| PHA WIDE | 1406 OPERATIONS | 1406 | 169052 | 125590 |
| PHA WIDE | 1410 ADMINISTRATION | 1410 | 30321 | 30321 |
| PHA WIDE | 1430 FEES AND COSTS | 1430 | 26801 | 20000 |
| FL104-00000108D (CYPRESS VILLAS I AND II) | 1408 MANAGEMENT IMPROVEMENTS | 1408 | 50000 | 50000 |
| FL104-00000308D (PASCO TERRACE) | 1460 DWELLING STRUCTURES | 1460 | 27037 | 55569 |
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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.

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| | 05/05/2011 | 06/12/2012 | 03/29/2010 | 06/12/2010 | PHA WIDE |
| | Actual Expenditure End Date | Original Expenditure End Date | Actual Obligation End Date | Original Obligation End Date | |
| | | | | | Activities |
| Reasons for Revised Target Dates ¹ | All Funds Expended (Quarter Ending Date) | All Fund (Quarter I | All Fund Obligated (Quarter Ending Date) | All Fund (Quarter E | Development Number Name/PHA-Wide |
| Federal FFY of Grant: 2008 | | | HORITY | TY HOUSING AUTH | PHA Name: PASCO COUNTY HOUSING AUTHORITY |
| | | | Financing Program | edule for Canital Fund | Port ITT. Implementation Schedule for 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 | Ū. | or and | port lacement Housing Fact | ice and Evaluation Re al Fund Program Rep gram | Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program |

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.

Page5

form HUD-50075.1 (4/2008)

| 3/31/09 Signature of Public Housing Director/Office of Native American Programs Administration and Data | | a Director/Office of Nativ | Institute of Dublic Housing | Karen Turner | |
|---|--|---------------------------------------|--|--|------------------|
| | ation Report. | e Performance and Evalu | To be completed for the | 1 # | gnature o |
| | | · · · · · · · · · · · · · · · · · · · | | completed for the Performance and Engly Conservation Measures | To be c |
| | | \$47,055 | \$50,000 | Amount of line 20 Related to Security | 24 |
| | | | | Amount of line 20 Related to Section 504 Compliance | 22 |
| \$57,139.31 | \$203,072,00 | ACCORTA | | Amount of line 20 Related to LBP Activities | 21 |
| 0\$ | 00 073 000 | 00 508 086\$ | \$407,974.00 | Amount of Annual Grant (Sum of lines 2 - 19) | 20 |
| 08 | 60 | 02 | S | 1502 Contingency (may not exceed 8% of line 20) | 19 |
| 30 | 00 | So | \$0 | | 18 |
| 00 | 50 | SO | \$0 | Γ | 5 |
| 2 | 30 | 0\$ | \$0 | | 1 1 |
| 5 | \$0 | \$0 | \$0 | | 5 |
| SO | \$0 | \$0 | \$0 | | 15 |
| 0\$ | \$0 | \$0 | \$0 | | 14 |
| 0\$ | \$0 | \$0 | 0\$ | | 13 |
| \$0 | \$0 | 50 | \$127,151 | | 12 |
| \$0 | \$0 | \$0 | 04 | | # |
| \$0 | 0\$ | 760,08\$ | 101,110 | 1460 Dwelling Structures | 10 |
| \$0 | 0\$ | Uc | 677 424 | 1450 Site Improvement | 9 |
| \$0 | 0\$ | 0\$ | 60 0 | 1440 Site Acquisition | 8 |
| \$0 | \$0 | U¢. | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | 1430 Fees and Costs | 7 |
| | \$0 | 20 | 60 | 1415 Liquidated Damages | 6 |
| \$25,742 | \$28,082 | 200,020 | 100 | 1411 Audit | 5 |
| | \$50,000 | CC0, 140 | \$28.082 | 1410 Administration (May not exceed 10% of line 20) | 4 |
| \$31,397 | 060'071 & | ¢AT DEE | \$50.000 | 1408 Management Improvements (May not exceed 20% of line 20) | ω |
| | \$10E E00 | S125 500 | \$125,590 | 1406 Operations (May not exceed 20% of line 20 for PHAs with 250 or more U | 2 |
| Expended | Obligated | Hevised (2) | | Total Non-CFP Funds | - |
| (/ | | | Original | Cummary by bevelopment Account | |
| Cost (2) | Total Actual Cost (2) | ated Cost | Total Estimated | | Line No. |
| 1 Year Ending <u>03/3</u> | uation Report for Program | Performance and Evalu | al Statement/Revision N | [] Final Performance and Evaluation Report for Disasters/Emergencies [] Revised Annual Statement/Revision N Performance and Evaluation Report for Program Year Ending 03/31/20 | [] Final |
| 7 | 200 | 4-501-07 | FL29P104-501 | ised Original Annual Character Annual Annual Annual Character Annual Chara | IXI Revis |
| 7-0157 (Exp. 3/31/2 Approval | OMB Approval 2577-0157 (Exp. 3/31/2002) FFY of Grant Approval | ^o roject Number | Capital Funds Project Number | PASCO COUNTY HOUSING AUTHORITY HA Name | PASCO |
| | | an Housing | Office of Public and Indian Housing | Capital Funds Program (CFP) | Capital F |
| | | ~ | and Urban Development | Part I: Summary | Part I: S |
| | | gnis | U.S. Department of Housing | Performance and Evolution Depose | Perform |
| | | | | | |

| Performance and Evaluation Report Part II: Supporting Pages Capital Funds Program | | | U.S. Department of Hous and Urban Development Office of Public and Indi | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | G | - 12 | | |
|---|--------------------------------|--------------|---|--|--------------|---|--------------|---|
| Development | | | | 4-4-41-6 | | | | OMB Approval 2577-0157 (Exp. 3/31/2002) |
| Number / Name | General Description of Major | Development | Disantity | I otal Esumated Cost | ated Cost | Total Actual Cost | al Cost | |
| HA - Wide | Work Cateronice | Concordinate | Cudinty | | | | | Status of Proposed Work (2) |
| Activities | calofano viou | Account | | Original | Revised (1) | Funds | Funds | |
| PHA Wirth | 1400 Operations | Number | | | | Obligated (2) | Expended (2) | |
| | 14vo Operations | 1406 | | \$125,590.00 | \$125,590.00 | \$125,590.00 | \$31.397.49 | |
| DUA WEL- | | | | | | | | |
| | 14 IV Administration | 1410 | | \$28,082.30 | \$28,082.00 | \$28,082.00 | \$25,741.82 | |
| FL104-0000108D /CV1 &CV9 | 1400 Bassannut In-the | | | | | | | |
| | 144V managament improvements | 1408 | , | \$50,000.00 | \$47,054.50 | \$50,000.00 | \$0.00 | |
| | Subtotal 1408 | | | | \$47,054.50 | \$50,000.00 | \$0.00 | |
| | I GIAL COST TOF FL10400001080 | | | | \$47,054.50 | \$50,000,00 | \$0.00 | |
| | | | | | | | | |
| | 1450 Site Improvement | | | | | | | |
| | HUAD HESUHFACING | 1450 | | \$77,151.00 | \$80,096.50 | \$0.00 | \$0.00 | |
| | Subtotal 1450 | | | \$77,151.00 | \$80,096.50 | \$0.00 | \$0.00 | |
| | 10tal Cost for FL1040000208D | | | \$77,151.00 | \$80,096.50 | \$0.00 | \$0.00 | |
| FL104-00000308D | 1460 Dwelling Structures | | | | _ | n () () () () () () () () () (| | |
| (Pasco Terrace) | ROOF REPLACEMENT | 1465 | | \$0.00 | \$0.00 | \$0.00 | \$0.00 | |
| | Subtotal 1460 | | + | \$0.00 | \$0.00 | \$0.00 | \$0.00 | |
| | I OTAL COST FOR FL10400000308D | | | \$0.00 | \$0.00 | \$0.00 | \$0.00 | |

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| Karen Tumer 3/31/09 Signature of Public Housing Director/Office of Native American Programs Administrator and Date | ousing Director/Office | Signature of Public Ho | aren Tumer 3/31/09 | ~ | | Director and Date | Signature of Executive Director and Date |
|--|--|---|--|--|--|--------------------------------|--|
| (2) To be completed for the Performance and Evaluation Report. | for the Performance a | (2) To be completed | ement. | a Revised Annual Stat | Evaluation Report or a | he Performance and t | To be completed for the Performance and Evaluation Report or a Revised Annual Statement |
| , | | | | | | | |
| 1 | | NA | 9/12/2011 | | NVA | 9/12/2009 | FL104-00000308D |
| | | 9/30/2009 | N/A | 9/30/2009 | 6/12/2009 | N/A | FL104-00000208D |
| | | 9/12/2011 | N/A | 3/31/2009 | 9/12/2009 | N/A | FL104-00000108D |
| | | 12/31/2009 | 9/12/2011 | 3/31/2009 | 12/31/2008 | 9/12/2009 | PHA-Wide |
| Reasons for Revised Target Dates (2) | nding Date) Actual (2) 9/12/2011 | All Funds Expended (Quarter Ending Date) iginal Revised (1) Actual 9/12/2 | All Funds E Original | nding Date) Actual (2) 9/12/2009 | All Funds Obligated (Quarter Ending Date) ginal Revised (1) Actual 9/122 | All Funds C Original | Development Number / Name HA - Wide Activities |
| OMB Approval No. 2577-0157 (Exp. 3/31/2002) | | Housing ment ndian Housing | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | | | aluation Report on Schedule | Annual Statement / Performance and Evaluation Report Part III: Implementation Schedule Capital Fund Program |

| \$196,895. | ation Report. | e renormance and cyalu | (2) To be completed for the Performance and Evaluation Report. | | Cianatura of Exacutiva P |
|---|---------------|------------------------------|--|--|-----------------------------|
| \$196,895 | | o Doutomonoo and Cripte | | To be completed for the Performance and Evaluation Report or a Revised Annual Statement. | To be c |
| \$196,895 | | | | Amount of line 20 Related to Energy Conservation Measures | |
| \$196,895. | | \$65,541 | \$32,000 | Amount of line 20 Related to Security | 23 |
| \$16,5 | | | | Amount of line 20 Related to Section 504 Compliance | 22 |
| \$16,5 | 4 1 | | | Amount of line 20 Related to LBP Activities | 21 |
| \$16,0 | \$ | \$284,703.00 | \$284,703.00 | Amount of Annual Grant (Sum of lines 2 - 19) | 20 |
| \$16,5 | | \$0 | \$0 | 1502 Contingency (may not exceed 8% of line 20) | 19 |
| \$16,5 | | SO | \$0 | 1499 Mod Used for Development Activities | 18 |
| \$16,5 | | \$0 | S0 | 1495.1 Relocation Costs | 17 |
| \$16,0 | | \$0 | \$0 | 1492 Moving to Work Demonstration | 16 |
| \$16,5 | | \$0 | 0\$ | 1490 Replacement Reserve | 15 |
| \$16,5 | | \$0 | \$0. | 1485 Demolition | 14 |
| \$16,5 | | \$6,103 | \$14,100 | 1475 Nondwelling Equipment | 13 |
| \$16,5 | | \$0 | \$0 | 1470 Nondwelling Structures | 12 |
| | | \$16,583 | \$23,083 | 1465.1 Dwelling Equipment - Nonexpendable | = |
| | | \$0 | \$0 | 1460 Dwelling Structures | 10 |
| \$23,359 \$0 | | \$23,359 | \$30,664 | 1450 Site Improvement | 9 |
| 0\$ 0\$ | | \$0 | \$0 | 1440 Site Acquisition | 8 |
| \$14,1 | | \$19,056 | \$12,796 | 1430 Fees and Costs | 7 |
| | | \$0 | \$0 | 1415 Liquidated Damages | 6 |
| 0\$ 0\$ | | \$0 | \$0 | 1411 Audit | σ |
| | | \$28,470 | \$28,470 | 1410 Administration (May not exceed 10% of line 20) | 4 |
| | | \$65,541 | \$50,000 | 1408 Management Improvements (May not exceed 20% of line 20) | ω |
| \$125,590 \$125,590 | | \$125,590 | \$125,590 | 1406 Operations (May not exceed 20% of line 20 for PHAs with 250 or more Units) | N |
| | | | | Total Non-CFP Funds | - |
| Obligated Expended | Oblig | Revised (2) | Original Revision #1 | Summary by Development Account | Line No. |
| Total Actual Cost (2) | | nated Cost | Total Estimated | | |
| [] Revised Annual Statement/Revision I [X] Performance and Evaluation Report for Program Year Ending <u>3/31/09</u> | luation Repo | [X] Performance and Eva | nnual Statement/Revision I | [X] Revised Original Annual Statement [] Reserve for Disasters/Emergencies [] Revised Ar [] Final Performance and Evaluation Report | [X] Revise [] Final P |
| 2006 | 1.1 | FL29P104-501-06 | FL29P10 | ЯТҮ | PASCO C |
| FFY of Grant Approval | | Capital Funds Project Number | Capital Funds | HA Name | |
| OMB Approval 2577-0157 (Exp. 3/31/2002) | OME | c | | Capital Funds Program (CFP) | Capital Fu |
| | | n Housing | Office of Public and Indian Housing | Part I: Summary | Part I: Su |
| | | t | and Urban Development | Performance and Evaluation Report | Performa |
| | | sing | U.S. Department of Housing | Annual Statement / | Annual S |

| Performance and Evaluation Report Part II: Supporting Pages Capital Funds Program | | | and Urban Office of Pt | and Urban Development Office of Public and Indian Housing | lousing | 0 | |
|---|---|-------------|---------------------------|--|----------------------|--------------|-------------------|
| Development Number / Name | General Description of Major | Development | | Total Estin | Total Estimated Cost | Total Ac | Total Actual Cost |
| HA - Wide | Work Categories | Account | - cuanty | Original | Revised (1) | Funds | |
| PHA Wide | 1406 Operations | 1406 | | \$125,590.00 | \$125,590.00 | \$125,590.00 | \$125,590.00 |
| PHA Wide | 1410 Administration | 1410 | | \$28,470.00 | \$28,470.00 | \$28,470.00 | \$0.00 |
| PHA Wide | 1430 Fees and Costs | 1430 | | \$12,796.00 | \$19,056.01 | \$18,720.69 | \$14,121.90 |
| FL104-00000108D (CV1 & CV2) | 1408 Management Improvements | 1408 | | \$50,000.00 | \$65,541.25 | \$65,541.25 | \$40,599.69 |
| FL104-00000108D | 1465 Dwelling Equipment | 1465 | | | | | ×. |
| | REFRIGERATORS | | 30 | \$3 762 00 | \$0.00 | \$0.00 | \$0.00 |
| | Subtotal 1465 | | | \$4,722.00 | \$1,191.00 | \$1,191.00 | \$1,191.00 |
| | Playground Improvements | 1450 | | \$5,000.00 | \$0.00 | \$0.00 | \$0.00 |
| | Subtotal 1450 1475 Nondwelling Equipment | 1475 | | | \$0.00 | \$0.00 | \$0.00 |
| | WASHER ADA WACHER | | - 1 | \$650.00 | \$806.43 | \$806.43 | \$0.00 |
| | ADA WASHER | | | \$1,100.00 | \$0.00 | \$0.00 | \$0.00 |
| | Subtotal 1475 | | | \$2,650.00 | \$1,626.46 | \$1,626,46 | \$0.00 |
| Citrus Villas) | 1465 Dwelling Equipment | 1465 | , | | | | |
| | ADA RANGES | | 0 | \$480.00 \$272.00 | \$468.00 \$0.00 | \$468.00 | \$468.00 |
| | REFRIGERATORS Subtotal 1465 | | 0 | \$418.00 | \$0.00 | \$0.00 | \$0.00 |
| FL104-00000108D | 1460 Dwelling Structures | 1460 | | \$1,170.00 | \$400.UU | \$468.UU | \$468.00 |
| Cypress Villas 2 | ROOF REPLACEMENT | | | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | 1465 Dwelling Equipment | 1465 | | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | RANGES | | 0 | \$720.00 | \$0.00 | \$0.00 | \$0.00 |
| | HEFRIGERALURS Subtotal 1485 | | 0 | \$2,508.00 | \$0.00 | \$0.00 | \$0.00 |
| | Total Cost for FL104-00000108D | | | \$58,542.00 | \$68,826.71 | \$68,826.71 | \$5,356.25 |
| FL104-00000208D | 1450 Site Improvement | 1450 | | | | | |
| (Bonnie Dale Villas) | PLAYGROUND IMPROVEMENT & | | | \$25,664.00 | \$23,359.00 | \$23,359.00 | \$0.00 |
| | 1465 Dwelling Equipment | 1465 | | \$25,664.00 | \$23,359.00 | \$23,359.00 | \$0.00 |
| | RANGES | | 5 | \$1,200.00 | \$1,150.00 | \$1,150.00 | \$1,150.00 |
| | REFRIGERATORS | | 3- | \$544.00 | \$259.00 | \$259.00 | \$259.00 |
| | Subtotal 1465 | | Ż | \$4,507.00 | \$3,947.25 | \$3,947.25 | \$3,947.25 |
| | dwelling Equ | | | | \$0,000.20 | C7.000,00 | \$0,300.20 |
| | | 1475 | | \$1,950.00 | \$0.00 | \$0.00 | \$0.00 |
| | ADA DRYER | | | 100.00 | \$0.00 | \$0.00 | \$0.00 |
| | Subtotal 1475 | | | \$3,950.00 | \$826.46 | \$826.46 | \$0.00 |

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| | | | | | | | | | | | | (Pasco Terrace) | FL104-00000308D | | | | | | | | | | (Sunny Dale Villas) | FL104-00000208D | Activities | HA - Wide | Number / Name | Development | Capital Funds Program | Part II: Supporting Pages | Performance and Evaluation Report | Milinual Statement / |
|-------------|--------------------------------|---------------|-----------|------------|----------------------------|---------------|---------------|------------|------------|---|---------------|------------------|--------------------------|--------------------------------|---------------|-----------|------------|------------|----------------------------|---------------|---------------|----------------|---------------------|-------------------------|----------------------|-----------------|------------------------------|-----------------------------|---|-------------------------------------|-----------------------------------|----------------------------|
| | Total Cost for FL104-00000308D | Subtotal 1475 | ADA DRYER | ADA WASHER | 1475 Nondwelling Equipment | Subtotal 1465 | REFRIGERATORS | ADA RANGES | RANGES | 1465 Dwelling Equipment | Subtotal 1460 | ROOF REPLACEMENT | 1460 Dwelling Structures | Total Cost for FL104-00000208D | Subtotal 1475 | ADA DRYER | ADA WASHER | WASHER | 1475 Nondwelling Equipment | Subtotal 1465 | REFRIGERATORS | ADA RANGES | RANGES | 1465 Dwelling Equipment | | Work Categories | General Description of Major | | | | | |
| | | | | | 1475 | | | | | 1465 | | 1460 | | | | | | | 1475 | | | | | 1465 | Number | Account | Development | | | | | |
| | | | | - | | | 10 | 0 | 6 | | - | | | | | - 1 | 0 | 1 | | | 3 | 0 | 13 | | | | Quantity | | | Office of Pu | and Urban I | U.S. Depart |
| | \$10,798.00 | \$3,100.00 | \$900.00 | \$2,200.00 | | \$7,698.00 | \$3,762.00 | \$816.00 | \$3,120.00 | | \$0.00 | \$0.00 | | \$40,279.00 | \$3,300.00 | \$900.00 | \$1,100.00 | \$1,300.00 | | \$3,114.00 | \$2,090.00 | \$544.00 | \$480.00 | | | Original | | Total Estimated Cost | | Office of Public and Indian Housing | and Urban Development | U.S. Department of Housing |
| C284 703 00 | \$7,390.06 | \$2,023.91 | \$820.03 | \$1,203.88 | 1 | \$5,366.15 | \$3,962.15 | \$0.00 | \$1,404.00 | - | \$0.00 | \$0.00 | | \$35,370.22 | \$1,626.46 | \$820.03 | \$0.00 | \$806.43 | | \$4,202.05 | \$1,185.05 | \$0.00 | \$3,017.00 | | | Revised (1) | | ated Cost | | ousing | | |
| 4084 3R7 R8 | \$7,390.06 | \$2,023.91 | \$820.03 | \$1,203.88 | | \$5,366.15 | \$3,962.15 | \$0.00 | \$1,404.00 | 1. A. | 1.1 | \$0.00 | | \$35.370.22 | \$1,626.46 | \$820.03 | \$0.00 | \$806.43 | 1.4 | | ;I\$ | 4. () ••••• | \$3,017.00 | | Obligated (2) | Funds | | Total Ac | 0 | | | |
| #DEE1 | \$5,366.15 | \$0.00 | \$0.00 | \$0.00 | | \$5,366.15 | \$3,962.15 | \$0.00 | \$1,404.00 | | | \$0.00 | | \$4,202.05 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | \$4,202.05 | \$1,1 | | \$3,017.00 | | Expended (2) | Funds | Status of Pr | Total Actual Cost | MB Approval 2577 | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | Status of Proposed Work (2) | | OMB Approval 2577-0157 (Exp. 3/31/2002) | | | |

Page _ of 2

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| Karen Turner 3/31/09 Signature of Public Housing Director/Office of Native American Programs Administrator and Date | ng Director/Office of Nati | Signature of Public Housir | Karen Tumer 3/31/09 S | | er | ector and Date | Signature of Executive Director and Date |
|---|----------------------------|--|---|--------------------------|--|--|--|
| aluation Report. | he Performance and Eva | (2) To be completed for the Performance and Evaluation Report. | | Annual Statement. | tion Report or a Revised | erformance and Evaluat | To be completed for the Performance and Evaluation Report or a Revised Annual Statement. |
| | ì | 9/30/2009 | 7/17/2010 | 3/31/2009 | | 7/17/2008 | FL104007 |
| | | 9/30/2009 | 7/17/2010 | 3/31/2009 | | 7/17/2008 | FL104005 |
| | | 9/30/2009 | 7/17/2010 | 3/31/2009 | | 7/17/2008 | FL104004 |
| | | 9/30/2009 | 7/17/2010 | 3/31/2009 | | 7/17/2008 | FL104001 |
| | | 9/30/2009 | 7/17/2010 | 3/31/2009 | | 7/17/2008 | 104001 & 104004 (CV1 & CV2) |
| | 9/30/2008 | 9/30/2009 | 7/17/2010 | 9/30/2006 | 2 | 7/17/2008 | PHA-Wide |
| Reasons for Revised Target Dates (2) | ding Date) Actual (2) | All Funds Expended (Quarter Ending Date) nal Revised (1) Actu | All Funds Original | ding Date) Actual (2) | All Funds Obligated (Quarter Ending Date) nal Revised (1) Act | All Funds Original | Development Number / Name HA - Wide Activities |
| OMB Approval No. 2577-0157 (Exp. 3/31/2002) | sing | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | U.S. Department of Housing and Urban Development Office of Public and Indian Ho | | Report ule | ent/ nd Evaluation I lentation Schedi ogram | Annual Statement / Performance and Evaluation Report Part III: Implementation Schedule Capital Fund Program |

| itan 1 | | | nggar. | | 1844 |
|--|-----------------------------|--|--|--|-----------------------------------|
| nd Date | an Programs Administrator a | ector/Office of Native America | Karen Turner 03/31/09 Signature of Public Housing Director/Office of Native American Programs Administrator and Date | Karen Turner 03/31/09 | |
| | port. | formance and Evaluation Rep | (2) To be completed for the Performance and Evaluation Report. | s communice and evaluation report of a Hevised Annual Sta | mature of I |
| | | 100 1 10 1 1 | | completed for the Berformanne and Evaluation Provide P |) To be cor |
| 59.560.36 | 59,560.36 | 59,560.36 | 59,560.91 | Amount of line 20 Belated to Energy Concentration Manual State | 24 |
| | | | | Amount of line 20 Related to Security | 23 |
| | | | | Amount of line 20 Related to Section 504 Compliance | ß |
| 293,167.00 | 233,107.00 | 00.101.00 | | Amount of line 20 Related to LBP Activities | 21 |
| | 202 467 00 | 293 167 00 | 293,167.00 | Amount of Annual Grant (Sum of lines 2 - 19) | \$20 |
| | | • | | 1502 Contingency (may not exceed 8% of line 20) | el la |
| | | | | | 18 |
| . | | | | | 1 |
| | | • • • | | | 16 |
| | | | | 1490 Replacement Reserve | 15 |
| 00,000.42 | | | | | ; ; |
| 20 223 05 | 30.668.42 | 30,668.42 | 30,859.89 | | : 0 |
| 01000101 | | • | | | ŝ i |
| 18.956.00 | 18,956.00 | 18,956.00 | 18,956.00 | | 5 |
| 25.305.45 | 25,305.45 | 25,305.45 | 25,306.00 | | = |
| 48,499.32 | 48,499.32 | 48,499.32 | 49,761.79 | | 10 |
| | | | | | 9 |
| 9,892.90 | 9,892.90 | 9,892.90 | 0,430.41 | | 8 |
| | | | 0 400 44 | 1430 Fees and Costs | 7 |
| | | | | 1415 Liquidated Damages | თ |
| | | | | 1411 Audit | 5 |
| 34,254.91 | 34,254.91 | 16:402 | | 1410 Administration (May not exceed 10% of line 20) | 4 |
| 125,590.00 | 125,590.00 | 00,05,021 | 34 354 04 | 1408 Management Improvements (May not exceed 20% of line 20) | ω |
| | | | 195 500 00 | 1406 Operations (May not exceed 20% of line 20 for PHAs with 250 or more Units) | 2 |
| Expended | Obligated | Revised (2) | Hevision #1 | Total Non-CFP Funds | - |
| | | | Original | a minimum of a computerit Account | |
| Total Actual Cost (2) | Total Act | nated Cost | Total Estimated | | Line No |
| r Ending | tion Report for Program Yea | [] Performance and Evaluation Report for Program Year Ending | | Rep | [X] Final |
| 2005 | 2 | rL29P10450105 | 2967 | Disasters/Emeranaion | [] Hevise |
| OMB Approval 2577-0157 (Exp. 3/31/2002) FFY of Grant Approval | OMB App FFY of Gr | Capital Funds Project Number | Capital Funds | HA Name PASCO COUNTY HOUSING AUTHORITY | PASCO |
| | | of Housing pment d Indian Housing | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | Annual Statement / Performance and Evaluation Report Part I: Summary Capital Funds Program (CFP) | Annu Perfo Part I Capita |
| | | | | | |

| alard 2007, may | \$899.00 completed | \$899.00 | \$899.00 | \$0.00 | | | r nessure washen | 6 |
|---|-----------------------|---------------|---------------|------------------------|--------------|-------------|--|---------------------------------|
| | SS REO RO COmple | \$6.859.89 | \$6,859,89 | \$6,859.89 | - | | MAINTENANCE VAN | M |
| | \$5,689.00 | \$5,689.00 | \$5,589.00 | 40,009.UV | | | | 14 |
| 2008, jul | \$4,285.00 | \$4,285.00 | \$4,285.00 | 00,002,04 | - | | Subtotal 1465 | |
| 2008, jul | \$1,404.00 | \$1,404.00 | \$1,404.00 | \$1,404.00 | - | | REFRIGERATORS (7) | RE |
| | | | | | , | 1465 | PANGES (7) | R |
| zuus, sep | \$25,305.45 | \$25,305,45 | \$25,305.45 | \$25,305.45 | | | 55 Dwalling Equipment Subtotal 1460 | 14 |
| | \$25,305,45 mm/s | \$25,305.45 | \$25,305.45 | \$25,305.45 | 86 . | | | |
| | | | | | | 1460 | 1460 Dwelling Structures | (Pasco Terrace) |
| | 35,/34.00 | 90,104,00 | 001101100 | | | | | |
| | \$5,/34.00 | \$5,734.00 | \$5,734.00 | \$5,734.00 | | | Total Cost for FL104005 | T |
| eted | 53,160.00 compl | 40,100.00 | \$5 734 00 | \$5,734.00 | | _ | Subtotal 1465 | T |
| leted | \$2,574.00 completed | 92,574.00 | \$3 160 00 | \$3,160.00 | 8 | | REFRIGERATORS (7) | A |
| | | 03 E74 m | \$3 574 nn | \$2.574.00 | = | | RANGES (7) | (Sunny Dale Villas) |
| | | | | | | 1465 | 465 Dwelling Equipment | 1- |
| | \$32,121.85 | \$32,121.85 | 002,121,00 | 3011001304 | | | | |
| | \$19,710.53 | 519,/10.53 | 910,1 10,00 | CE 200 CES | | | Total Cost for FL104004 | |
| | \$387.00 | \$387.00 | 9007.00 | \$19 303 53 | | | Subtotal 1475 | |
| leted | \$19,323.53 completed | \$19,323.53 | \$19,323.53 | 00.00 | | | SPLINE HAMMER | (Bonnie Dale Villas) |
| | | | C10 202 E2 | \$19 202 FR | - | | laintenance Van | |
| | \$5,573.00 | \$5,573,00 | \$0,573.00 | 00.010,00 | | | | |
| | \$0.00 | \$0.00 | \$0.00 | 00.06 | - | | Subtotal 1465 | |
| | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | REFRIGERATORS (2) | |
| pleted 2008. iul | \$2,765.00 comp | \$2,765.00 | \$2,765.00 | 92,700,00 | | | PANGES (2) | (Cypress Villas 2) |
| pleted | S2,808.00 completed | \$2,808.00 | \$2,808.00 | 92,808.00 | 0 | | REFRIGERATORS (7) | |
| | 1 | | | | ; | 1400 | RANGES (7) | (Bonnie Dale Villas) |
| | \$6,838.32 | \$6,838.32 | \$6,838.32 | \$8,100.79 | | 1400 | 465 Dwelling Equipment | |
| | \$6,838.32 | \$6,838.32 | \$6,838.32 | \$0.00 | | | | |
| | \$0.00 | \$0.00 | \$0.00 | \$8,100.79 | | | LAYGROUND FOI IIPMENT | |
| | | | | | | 1450 | BESURFACE BOADS | illas) |
| | | _ | | | | | And the line of th | FL104004 |
| | \$46,820.00 | \$46,820.00 | \$46,820.00 | \$43,621.00 | | | I otal Cost for FL104001 | |
| | \$3,199.00 | \$3,199.00 | \$3,199.00 | \$0.00 | | | Subtotal 1475 | |
| Deter | Deterting on out of | \$2.300.00 | \$2,300.00 | \$0.00 | 1 | | OTILITY THAILER | |
| | 1 1000 | \$899.00 | \$899.00 | \$0.00 | - | | THESSURE WASHER | (epure envio) |
| | | e. joo.oo | | | | | 1475 Nondwelling Equipment | |
| doued. | \$1 060 00 DOS | \$1.960.00 | \$1,960.00 | \$1,960.00 | | | Subtotal 1465 | |
| npieled | anos ul completed | 50.00 | \$0.00 | \$0.00 | 0 | | REFRIGERATORS (4) | |
| completed | eree oo con | \$468 00 | \$468.00 | \$468.00 | 2 | | HANGES (4) | (cypress villas 1) |
| npleted | STOD OD | 5790.00 | \$790.00 | \$790.00 | 2 | | HEFRIGERATORS (3) | |
| | e700 00 | \$702 00 | \$702.00 | \$702.00 | 3 | | HANGES (3) | |
| | \$41,661.00 | 341,661.00 | A11001100 | | | 1465 | bint | |
| mpleted | \$17,661.00 cor | \$17,561.00 | ent 661 00 | \$41.661.00 | | - | Subtotal 1450 | |
| mpleted | \$24,000.00 completed | \$24,000.00 | \$24,000.00 | \$17 AR1 00 | | | PLAYGROUND EQUIPMENT | (Cypress Villas 1) |
| | | | | ~ ~ ~ ~ | | | RESURFACE ROADS | (Citrus Villas) |
| | | | | | T | 1450 | 1450 Site Improvement | FL104001 |
| mplated | \$34,254.91 completed | \$34,254.91 | \$34,254.91 | \$34,254.91 | | 1408 | | |
| | | | | | | | 1408 Management Improvemente | FL104001 (CV1) & FL104004 (CV2) |
| moleted | \$9,892.90 completed | \$9,892.90 | \$9,892.90 | \$8,438.41 | | 1430 | 1450 Fees and Costs | |
| mpleted | \$125,590.00 co | 00.08C/2716 | - 12-0,000.00 | | | | | PHA Wide |
| | Expended (2) | Obligated (2) | \$10E E00 00 | \$125 590 00 | | 1406 | 1406 Operations | PHA Wide |
| () VIAL BOOMER | Funds | Funds | Revised (1) | Unginal | - | Number | | Activities |
| Status of Proposed Work / | | | | | nt Quantity | Development | Work Categories | HA - Wide |
| OMB Approval 2577-0157 (Exp. 3/31/2002) | | | nated Cost | Total Estimated Cost | | | | Vevelopment |
| | | | - Du | ublic and Indian Housi | Office of Pu | | | Capital Funds Program |
| | | | | and Urban Development | and Urban | | | Part II: Supporting Pages |
| | | | | | | | | |

Page . of 1

| | 2 | , | c | 1 | 1 | | 1 | • | |
|---|---|---|---|---|---|---|---|---|--|
| Ś | 0 | 1 | 7 | : | 2 | 1 | ł | ; | |
| | ŝ | 1 | ç | | 1 | | 1 | ŝ | |
| | | | 1 | | | | | | |
| | 1 | • | ł | | | ; | | | |

| Obligated (Quarter E | nding Date) | All Funds Expended | | |
|-------------------------------------|---|--|------------------------------------|---|
| Obligated (Quarter E Revised (1) | nding Date) Actual (2) | All Funds Expended Original | (Quarter Ending Da) Revised (1) | e) Actual (2) |
| 8/31/2007 | 5/31/2007 | 8/31/2009 | 10/31/2007 | 9/30/2007 |
| 8/31/2007 | 5/31/2007 | 8/31/2009 | 10/31/2008 | 10/31/2008 |
| 8/31/2007 | 5/31/2007 | 8/31/2009 | 10/31/2007 | 11/30/2007 |
| 8/31/2007 | 5/31/2007 | 8/31/2009 | 9/30/2008 | 7/31/2008 |
| 8/31/2007 | 7/31/2007 | 8/31/2009 | 9/30/2008 | 6/30/2008 |
| 8/31/2007 | 7/31/2007 | 8/31/2009 | 9/30/2008 | 6/30/2008 |
| 8/31/2007 | 7/31/2007 | 8/31/2009 | 8/31/2009 | 11/30/2008 |
| 8/31/2007 | 7/31/2007 | 8/31/2009 | 8/31/2009 | 11/30/2007 |
| 8/31/2007 | 7/31/2007 | 8/31/2009 | 8/31/2009 | 9/30/2008 |
| uation Report or a Re | Vised Annual Stateme | | | |
| | Karen Turner | | 2) To be completed to | (2) To be completed for the Berformance and Evolution Decou |
| | Revised (1) 8/31/2007 8/31/2007 8/31/2007 8/31/2007 8/31/2007 8/31/2007 8/31/2007 8/31/2007 | International Actual (2) 07 5/31/2007 07 5/31/2007 07 5/31/2007 07 5/31/2007 07 5/31/2007 07 7/31/2007 07 7/31/2007 07 7/31/2007 07 7/31/2007 07 7/31/2007 07 7/31/2007 07 7/31/2007 07 7/31/2007 07 7/31/2007 | 7 7 7 7 7 7 7 7 7 7 | I (2) Original 007 8/31/2009 007 8/31/2009 007 8/31/2009 007 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 07 8/31/2009 08 9 07 8/31/2009 08 9 09 9 09 9 09 9 |

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| Date | Programs Administrator and | ctor/Office of Native American | Signature of Public Housing Director/Office of Native American Programs Administrator and Date | Karen Turner 11/03/2008 | |
|-----------------------|-----------------------------|---|--|---|------------------------------------|
| | ort. | ormance and Evaluation Repo | (2) To be completed for the Performance and Evaluation Report. | relivinitatice and Evaluation Heport or a Hevised Annual Statement. | ionature of F |
| | | | | Completed for the Defense of the nergy Conservation Measures | 1) To he on |
| \$129.478 | \$129,478 | \$129,478 | \$120,732 | Amount of line 20 Related to Security | 22 |
| | | | | Amount of line 20 Related to Section 504 Compliance | 8 13 |
| 000,000.00 | 00.000 | | | Amount of line 20 Related to LBP Activities | 21 |
| 200 230 000 | 00 338 DUC\$ | \$309.866.00 | \$309,866.00 | Amount of Annual Grant (Sum of lines 2 - 19) | 20 |
| 0.00 | 00 | S0 | 0\$ | 1502 Contingency (may not exceed 8% of line 20) | 19 |
| 0.00 | 40 | 50 | \$0 | | 18 |
| 0.00 | S0 | SO | 0\$ | | 17 |
| 0.00 | 02 50 | 0\$ | 0\$ | | 16 |
| | SO | SO | 0\$ | 1490 Replacement Reserve | 15 |
| 0.00 | S0 | 0\$ | 0\$ | | 14 |
| 17 768 16 | \$17.768 | \$17,768 | \$17,768 | | 13 |
| 0.00 | SO | \$0 | 0\$ | | 12 |
| | 20 | 0\$0 | 0\$ | | = |
| 123 847 84 | \$123,848 | \$123,848 | \$123,848 | | 5 |
| 6.884.00 | \$6.884 | \$6,884 | \$6,884 | | 5 |
| 0.00 | 0\$ | 0\$ | \$0 | | , a |
| 0.00 | \$0 | 0\$ | \$0 | | • |
| 0.00 | 0\$ | \$0 | \$0 | | 7 |
| 0.00 | 0\$ | 0\$ | \$0 | 1415 Invidence Demonstra | " |
| 0.00 | 0\$ | \$0 | \$0 | | л. |
| 40,000.00 | \$40,000 | \$40,000 | \$40,000 | | 4 |
| 121,366.00 | \$121,366 | \$121,366 | \$121,366 | 1406 Management Improvements May not exceed 20% of line 20 for PHAs with 250 or more Units) | ω |
| | | | | Ś | , - |
| Expended | Obligated | Revised (2) | Revision #1 | | · |
| al Cost (2) | Total Actual Cost (2) | mated Cost | otal Esti | No. Summary by Development Account | Line No. |
| | n Report for Period Ending_ | [] Performance and Evaluation Report for Period Ending_ | 12 | aluat | [X] Final f |
| 2004 | 20 | 10430104 | LT71 | rs/Emeroencies | [] Original |
| FFY of Grant Approval | FFY of Gra | Project Number | Capital Funds Project Number | HA Name PASCO COUNTY HOUSING AUTHORITY | PASCO |
| | | of Housing opment Id Indian Housing | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | Annual Statement / Performance and Evaluation Report Part I: Summary Capital Funds Program (CFP) | Annu Perfo Part I: Capita |
| | | | | | |

| Annual Statement / Performance and Evaluation Report Part II: Supporting Pages Capital Funds Program | | U.S. Department of Hous and Urban Development Office of Public and Indian | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | gnist | | | |
|---|-----------------------------------|---|--|----------------------|---|-------------------|---|
| Development Number / Name | General Description of Mainr | | | Total Estimated Cost | Total Ac | Total Actual Cost | OMB Approval 2577-0157 (Exp. 3/31/2002) |
| HA - Wide Activities | Work Categories | Account | Original | Revised (1) | Funds | Funds | Status of Proposed Work (2) |
| PHA Wide | 1406 Operations | 1406 | \$121,366.00 | \$121,366.00 | Obligated (2) \$121,366.00 | Ţ | |
| FL104001 (CV1) & FL104004 (CV2) | 1408 Management Improvements | 1408 | \$40 000 00 | | \$40 000 00 | | |
| Ft 104001 | 1450 Gita Improvement | | - | | \$40,000.00 | \$40,000.00 | |
| (Citrus Villas and Cypress Villas 1) | PLAYGROUND SITE PREPARATION (CV1) | 1450 | 00 788 33 | | | | |
| : | Subtotal 1450 | | \$6,884.00 | \$6,884.00 | \$6,884.00 | \$6,884.00 | |
| | 1460 Dwelling Structures | Π | | Π | | 40,004.00 | |
| (Cypress Villas 1) | Security Screen Doors (54) | | \$13,500.00 | | | C15 721 66 | |
| (Citrus Villas) | Security Screen Doors (20) | | \$5,000.00 | \$5,826.54 | \$5,826,54 | \$5.826.54 | |
| | Subtotal 1460 | - | \$18,500.00 | | | \$21,558.20 | |
| | Total Cost for FL104001 | | \$25,384.00 | \$28,442.20 | \$28,442.20 | \$28,442.20 | |
| FL104004 | 1460 Dwelling Structures | 1460 | | | | | |
| (Cypress Villas 2) | WINDOW REPLACEMENT | | \$25.347.84 | \$34,370.29 | \$34.370.29 | \$34 370 20 | |
| | Security Screen Doors (24) | | \$6,000.00 | \$6,991.85 | \$6,991.85 | \$6,991.85 | |
| (Bonnie Dale) | Security Screen Doors (96) | | \$24,000.00 | \$27,967.43 | \$27,967.43 | \$27,967.43 | |
| | Subtotal 1460 | | \$55,347.84 | \$69,329.57 | \$69,329.57 | \$69,329.57 | |
| | Iotal Cost for FL104004 | | \$55,347.84 | \$69,329.57 | \$69,329.57 | \$69,329.57 | |
| FL104005 | 1460 Dwelling Structures | 1460 | | | 14 | | * |
| | Subtotal 1460 | | \$25,000.00 | \$29,132.62 | \$29,132.62 | \$29,132.62 | |
| | Total Cost for FL104005 | - | \$25,000.00 | \$29,132.62 | \$29,132.62 | \$29,132.62 | |
| FL104007 | 1460 Dwelling Structures | 1460 | | | | | |
| ce) | Security Screen Doors (100) | | \$25,000.00 | \$3,827,47 | \$3.827.45 | \$3 897 45 | |
| | Subtotal 1460 | | \$25,000.00 | \$3.827.47 | \$3 827 45 | C3 897 AE | |
| | | | | | | + | |
| | 1475 Non-Dwelling Equipment | 1475 | | | - | | |
| | | | \$17,768.16 | \$17,768.16 | \$17,768.16 | \$17,768,16 | |
| | Total Cost for FL104007 | | \$42,768.16 | \$21,595.63 | \$21,595,61 | \$91 505 61 | |
| | | | 972,100.10 | \$21,383.03 | \$21,595.61 | \$21,595.61 | |
| | | | | | | | |
| | | | | | | | |
| | | | | | 191 (****)(*****)(*** 263 - 112 - 12 | | |
| | | | | | | | |
| | | | | | | | |

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| Annual Statement / Performance and Evaluation Report Part III: Implementation Schedule Capital Fund Program | nent / Ind Evaluation nentation Schectory ogram | Report Jule | | U.S. Department of Housing and Urban Development Office of Public and Indian Ho | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | sing | |
|--|--|---|--------------------------|---|--|--------------------------------|--|
| Development | | | | | | | OMB Approval No. 2577-0157 (Exp. 3/31/2002) |
| Number / Name HA - Wide Activities | All Fund Original | All Funds Obligated (Quarter Ending Date) 1al Revised (1) Act | ding Date) Actual (2) | All Funds Original | All Funds Expended (Quarter Ending Date) nal Revised (1) Act | l Iding Date) Actual (2) | Reasons for Revised Target Dates (2) |
| PHA Wide: 1406 | 8/31/2006 | | 3/31/2005 | 8/31/2008 | 9/30/2006 | 9/30/2006 | |
| PHA Wide: 1408 | 8/31/2006 | r | 9/30/2006 | 8/31/2007 | 8/31/2008 | 5/31/2007 | a na a |
| FL104001: 1450 | 8/31/2006 | 8/31/2006 | 9/30/2006 | 8/31/2008 | 8/31/2008 | 12/31/2007 | |
| FL104001: 1460 | 8/31/2006 | 8/31/2006 | 9/30/2006 | 8/31/2008 | 8/31/2008 | 9/30/2008 | - <u>1</u> - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |
| FL104004: 1460 | 8/31/2006 | 8/31/2006 | 9/30/2006 | 8/31/2008 | 8/31/2008 | 9/30/2008 | |
| FL104005: 1460 | 8/31/2006 | 8/31/2006 | 9/30/2006 | 8/31/2008 | 8/31/2008 | 9/30/2008 | |
| FL104007: 1460 | 8/31/2006 | 8/31/2006 | 9/30/2006 | 8/31/2008 | 8/31/2008 | 9/30/2008 | а на 1 80 селото на 1993 г. 199 |
| FL104007: 1475 | 8/31/2006 | 8/31/2006 | 9/30/2006 | 8/31/2008 | 9/30/2006 | 9/30/2005 | |
| be completed for the Pe | arformance and Evalual | To be completed for the Performance and Evaluation Report or a Revised Annual Statement | Annual Statement | | V To be possible to the second s | | |
| Signature of Executive Director and Date | inter and Data | | | | - | | |

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Actual Comprehensive Grant Cost Certificate

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

(Exp. 11/30/2008)

Comprehensive Grant Program (CGP)

| Photo Rampasco County Housing Authonity | FL29PI0450103 |
|---|-----------------------|
| 14517 7th St. | FFY of Grant Approval |
| Dade City, FL 33523 | 2003 |

The PHA/IHA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Comprehensive Grant, is as shown below:

| A. Original Funds Approved | \$ 264801.00 |
|---|--------------|
| B. Revised Funds Approved | \$ 264801.00 |
| C. Funds Advanced | \$ 264801.00 |
| D. Funds Expended (Actual Modernization Cost) | \$ 264801.00 |
| E. Amount to be Recaptured (A-D) | \$ 0.00 |
| F. Excess of Funds Advanced (C–D) | \$ 0.00 |

2. That all modernization work in connection with the Comprehensive Grant has been completed;

3. That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;

4. That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and

5. That the time in which such liens could be filed has expired.

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

Date Signature recutive Due nor

| For HUD Use Only | |
|--|-----------------------|
| The Cost Certificate is approved for audit. | |
| Approved for Audit (Director, Public Housing Division) | Date |
| The audited costs agree with the costs shown above. | |
| Verified (Director, Public Housing Division) | Date |
| Approved (Field Office Manager) | Date |
| | form HUD-52839 (2/92) |

| | | | | • | | | | ••• | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------|--|---|---|---------------------------------------|---|---|--|--|-------------------------------------|------------------|------------------------------|---------------------|------------|-----------------------|------------------------|---|---------------------|------------------|------------------|----------------|--------------------|-------|--|---|--|---------------------|--------------------------------|-----------------------------|---|---|--------------------------------|------------------------------|--|---|
| | ing to All shares | | | | | | | | | • | | | | | | | | | | , | | · | | | | | | | | | | | | |
| · · · · · · | T | (1) To be co Signature of | 24 | 23 | 22 | 21 | 20 | 19 | 18 | . 17 | 16 | 15 | 14 | 13 | 12 | 11 | 10 | 9 | 08 | 7 | 6 | ъ | 4 | ω | 2 | - | Line No. | | [X] Final P | [] Budget Revision | PASCO | | Part I: Capital | Annua Perfor |
| | Lun | Executive Dir | Amount of I | Amount of I | Amount of I | Amount of I | Amount of / | 1502 | 1499 | 1495.1 | 1492 | 1490 | 1485 | 1475 | 1470 | 1465.1 | 1460 | 1450 | 1440 | 1430 | 1415 | 1411 | 1410 | 1408 | 1406 | Total Non-CFP Funds | | | erformance a | | COUNTY | | Summary Funds Pro | Annual Statement / Performance and E |
| | un Turne | (1) To be completed for the Performance Signature of Executive Director and Date | ine 20 Related | Amount of line 20 Related to Security | ine 20 Related | ine 20 Related | Annual Grant (| Contingen | Mod Used | Relocation Costs | Moving to | Replacem | Demolition | Nondwellin | Nondwellin | Dwelling E | Dwelling Structures | Site Improvement | Site Acquisition | Fees and Costs | Liquidated Damages | Audit | Administra | Managem | Operation | CFP Funds | | | [X] Final Performance and Evaluation Report | [] Reserve f | HOUSING | | Part I: Summary Capital Funds Program (CFP) | ment / and Ev |
| | è | e and Evalua | I to Energy Co | I to Security | to Section 50 | Amount of line 20 Related to LBP Activities | Amount of Annual Grant (Sum of lines 2 - 19) | cy (may not ex | Mod Used for Development Activities | Costs | Moving to Work Demonstration | Replacement Reserve | | Nondwelling Equipment | Nondwelling Structures | Dwelling Equipment - Nonexpendable | tructures | vement | sition | Costs | Damages | | tion (May not | ent Improvem | s (May not exc | | Sumn |) | Report | [] Reserve for Disasters/Emergencies | PASCO COUNTY HOUSING AUTHORITY | | CFP) | aluation |
| | | Io be completed for the Performance and Evaluation Report or a Revised Annual Statement. Signature of Executive Director and Date Karen Turner. Executive Director 11/2 | Amount of line 20 Related to Energy Conservation Measures | | Amount of line 20 Related to Section 504 Compliance | ties | 2 - 19) | Contingency (may not exceed 8% of line 20) | ent Activities | | tration | | | | | nexpendable | | | | | | | Administration (May not exceed 10% of line 20) | Management Improvements (May not exceed 20% of line 20) | Operations (May not exceed 20% of line 20 for PHAs with 250 or more Units) | | Summary by Development Account | | | mergencies | RITY | HA Name | | Annual Statement / Performance and Evaluation Report |
| | | a Revised Ann | asures | | | | | e 20) | | | | | | | | | | | | | | | f line 20) | exceed 20% of | e 20 for PHAs | | opment Acco | | | [] Revise | | | | - |
| | | ual Statement. | | | | | | | | | | | | | | | | | | | | | | line 20) | with 250 or m | | unt | | | d Annual State | | | | |
| | 0000710 | ent. 11/3/2008 | | | | | | | | | | | | | | | | | | | | | | | ore Units) | | | | | [] Revised Annual Statement/Revision Number # | | | | |
| | | (2) To | | | | | | | | | | | | | | | | | | | | | | | | | | | | Number # | | | Offi | U.S |
| | ure or Public H | be completed | | | | | 20 | | | | | | | | | | | | | | | | | | - | | Original Revision #1 | 7 | | | н | Capita | Office of Pub | U.S. Department of Hous and Urban Development |
| | lousing Dire | for the Per | | | | | 264,801 | • | 0 | 0 | 0 | 0 | 0 | 25,000 | 0 | 0 | 70,234 | 41,021 | 0 | 27,742 | 0 | 0 | 0 | 0 | 100,805 | | - | Total Estimated Cost | | _ | FL29P10450103 | d Funds Pr | lic and | nent of levelop |
| | Signature of Public Housing Director/Office of Native American Programs Administrator and Date | (2) To be completed for the Performance and Evaluation Report. | | | | | N | | | | | | | | | | | | | | | | | | | | Revised (2) | ited Cost | | Performance and Evaluation Report for Period Ending | 450103 | Capital Funds Project Number | Public and Indian Housing | U.S. Department of Housing and Urban Development |
| | /e America | luation Rep | | | | | 264,801 | 0 | 0 | 0 | <u> </u> | 0 | 0 | 31,532 | 0 | 0 | 70,234 | 41,021 | 0 | 21,209 | 0 | 0 | 0 | 0 | 100,805 | | 。 | | | Evaluation | | _ | ng | |
| | n Programs Ad | oort. | | | | | | | | | | | | | | | | | | | | | | | | | Obligated | | | Report for Peri | | | | |
| | ministrator and | | | | | | 264,801 | 0 | • | 0 | 0 | 0 | 0 | 31,532 | 0 | 0 | 70,234 | 41,021 | 0 | 21,209 | 0 | 0 | 0 | 0 | 100,805 | | ited | Total Actual Cost (2) | i | od Ending | 2003 | FFY of Grant Approval | OMB Appro | |
| | 1 Date | | | | | | | | | | | | | | | | | | | | | | | | | | Expended | ıl Cost (2) | | |)3 | t Approval | OMB Approval 2577-0157 (Exp. 3/31/2002) | |
| | | | | | | | 264.801 | 0 | 0 | 0 | 0 | 0 | 0 | 31,532 | 0 | 0 | 70,234 | 41,021 | 0 | 21,209 | 0 | 0 | 0 | 0 | 100,805 | | nded | | | | | | Exp. 3/31/2002) | |

| | \$36,378.64 | \$36,378.64 | \$36,378.64 | \$36,378.64 | | | Total Cost forFL104007 | |
|---|--------------|-------------------|-------------------------------------|-----------------------------|----------|-------------|------------------------------|-----------------------------------|
| | \$36,378.64 | \$36,378.64 | \$36,378.64 | \$36,378.64 | | | Subtotal 1450 | - - |
| | \$36,378.64 | \$36,378.64 | \$36,378.64 | \$36,378.64 | | | EROSION CONTROL | (Pasco Terrace) |
| | | | | | | 1450 | 1450 Site Improvement | FL104007 |
| | | | | | | | | |
| | \$11,705.61 | \$11,705.61 | \$11,705.61 | \$0.00 | | | Total Cost forFL104005 | |
| | \$11,705.61 | \$11,705.61 | \$11,705.61 | \$0.00 | | | MAINTENANCE VEHICLE | (Sunny Dale Villas) |
| | | | | | | 1475 | 1475 Nondwelling Equipment | FL104005 |
| | | | | | | | | |
| | \$5,420.20 | \$5,420.20 | \$5,420.20 | \$5,417.22 | | | Total Cost forFL104004 | - |
| | \$777.84 | \$777.84 | \$777.84 | \$774.84 | | | Subtotal 1475 | |
| | \$777.84 | \$777.84 | \$777.84 | \$774.84 | | | MAINTENANCE VEHICLE | |
| | | | | | | 1475 | 1475 Nondwelling Equipment | |
| | | | | | | | | |
| | \$4,642.36 | \$4,642.36 | \$4,642.36 | \$4,642.38 | | | Subtotal 1450 | |
| | \$4,642.36 | \$4,642.36 | \$4,642.36 | \$4,642.38 | | | RETAINING WALL | (Bonnie Dale Villas) |
| | | | | | | 1450 | 1450 Site Improvement | FL104004 |
| | | | | | | | | |
| | \$70,233.50 | \$70,233.50 | \$70,233.50 | \$70,233.50 | | | Total Cost forFL104001 | |
| | \$70,233.50 | \$70,233.50 | \$70,233.50 | \$70,233.50 | | | Subtotal 1460 | |
| | \$70,233.50 | \$70,233.50 | \$70,233.50 | \$70,233.50 | 12 | | RE-ROOF HOUSES | (Cypress Villas 1) |
| | | | | | | 1460 | 1460 Dwelling Structures | FL104001 |
| | | | | | | | | |
| | \$19,048.80 | \$19,048.80 | \$19,048.80 | \$24,222.16 | | | MAINTENANCE TRUCK | |
| | | | | | | 1475 | 1475 Nondwelling Equipment | PHA Wide |
| | | | | 4 | | | | |
| | e 24 200 25 | \$24 200 25 | \$21 200 25 | \$27.741.50 | | 1430 | 1430 Fees and Cost | PHA Wide |
| | \$100,805.00 | \$100,805.00 | \$100,805.00 | \$100,805.00 | | 1406 | | |
| | Expended (2) | Obligated (2) | | | | Number | | Activities |
| | Funds | Funds | Revised (2) | Original | | Account | Work Categories | HA - Wide |
| Status of Proposed Work (2) | | | | | Quantity | Development | General Description of Major | Number / Name |
| | ual Cost | Total Actual Cost | ated Cost | Total Estimated Cost | | | | Development |
| OMB Approval 2577-0157 (Exp. 3/31/2002) | | ¢ | | | | | Э | Capital Funds Program |
| | | ing | Office of Public and Indian Housing | Office of Public a | | | ages | Part II: Supporting Pages |
| | | | it of nousing | and Urban Development | | | raluation Report | Performance and Evaluation Report |
| | | | 4 - E 1 1 | | | | | Annual Statement / |

| | Annual Statement / Performance and Evaluation Report Part III: Implementation Schedule Capital Fund Program | n t / Id Evaluation R entation Schedu gram | eport le | | U.S. Department of Housing and Urban Development Office of Public and Indian Ho | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | Dui | OMB Approval No. 2577-0157 (Exp. 3/31/2002) |
|----------|--|--|---------------------------|----------------------|---|--|--|--|
| <u> </u> | Development | All Funds (| hlinated (Ouarter Endi | ing Date) | All Funds E | xpended (Quarter End | ling Date) | Reasons for Revised Target Dates (2) |
| | HA - Wide Activities | Original | nal Revised (1) Actu | Actual (2) | Original | Original Revised (1) Actu | Actual (2) | |
| | PHA Wide: 1406 | 3/31/2005 | 10/31/2004 | 9/30/2004 | 9/30/2006 | 10/31/2006 | 9/30/2005 | |
| | PHA Wide: 1430 | 3/31/2005 | 9/16/2005 | 9/30/2004 | 9/30/2006 | 5/31/2007 | 5/31/2007 | |
| | FL104004: 1450 | 3/31/2005 | 9/16/2005 | 9/16/2005 | 9/30/2006 | 10/31/2005 | 9/30/2005 | |
| | FL104007: 1450 | 3/31/2005 | 9/16/2005 | 9/16/2005 | 9/30/2006 | 10/31/2005 | 6/30/2006 | |
| | FL104001: 1460 | 3/31/2005 | 9/16/2005 | 9/16/2005 | 9/30/2006 | 10/31/2005 | 6/30/2006 | |
| | FL104004: 1475 | 9/16/2005 | 9/16/2005 | 8/31/2005 | 9/16/2005 | 5/31/2007 | 9/30/2005 | |
| | FL104005: 1475 | 9/16/2005 | 9/16/2005 | 8/31/2005 | 9/16/2005 | 5/31/2007 | 5/31/2007 | |
| | To be completed for the Performance and Evaluation Report or a Revised Annual Statement | Performance and Evalu | ration Report or a Revise | ed Annual Statement. | | (2) To be completed for | (2) To be completed for the Performance and Evaluation Report. | valuation Report. |
| | Signature of Executive Director and Date | Director and Date | 6 | Karen Turner, Execut | ive Director 11/03/2008 | Signature of Public Hou | ising Director/Office of N | Karen Turner, Executive Director 11/03/2008 Signature of Public Housing Director/Office of Native American Programs Administrator and Date |
| | | | | | | · | | |





Ms. Karen Turner Executive Director Pasco County Housing Authority 14517 7th Street Dade City, Florida 33523-3102

Dear Ms. Turner:

Subject: Submission of the AMCC

We have received and reviewed the Housing Authority's AMCC submitted for CFP

grant:

Fl29P104501-02

\$ 333,613.00

3/17/2009

U. S. Department of Housing and Urban Development

Jacksonville Office, Region 4 Charles Bennett Federal Building

400 West Bay Street Suite 1015 Jacksonville, Florida 32202-5121

We have verified that the grant is ready for audit. As soon as possible please provide an audit completed by an independent auditor, which by their evaluation agrees to the amount disbursed in our Line of Credit Control System (LOCCS). When we receive the audit for this reporting period, this grant will be closed by HUD's Accounting Center.

For your records, we are including a copy of your form HUD-52839 "approved for audit."

If we can be of further assistance, please contact our Staff, Engineer Greg Cáceres by email at gregorio.caceres@hud.gov or by phone at (904) 232-1777, extension 2090.

Sincerely yours,

Mary M. Frepasso

Mary Trepasso Acting Director Office of Public Housing

Enclosure

Actual Comprehensive Grant Cost Certificate

Comprehensive Grant Program (CGP)

| PHA/IHA Na Rasco County Housing Authority | Comprehensive Grant Number |
|---|----------------------------------|
| 14517 7th St. | FL29P104501-02 |
| Dade City, FL 33523 | FFY of Grant Approval 2-00-2- |

The PHA/IHA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Comprehensive Grant, is as shown below:

| A. Original Funds Approved | \$ 333613.00 |
|---|--------------|
| B. Revised Funds Approved | \$ 333613.00 |
| C. Funds Advanced | \$ 333613.00 |
| D. Funds Expended (Actual Modernization Cost) | \$ 333613.00 |
| E. Amount to be Recaptured (A-D) | \$ 00.00 |
| F. Excess of Funds Advanced (C–D) | \$ 5.00 |

2. That all modernization work in connection with the Comprehensive Grant has been completed;

3. That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;

- 4. That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and
- 5. That the time in which such liens could be filed has expired.

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

Signature Date 11/08/2008 uner, Executive Diect

| For HUD Use Only | |
|--|----------------------|
| The Cost Certificate is approved for audit. | |
| Approved for Audit (Director, Public Housing Division) | Date |
| A Mary M. Drepasso, acting Director | 3-17-09 |
| The audited costs agree with the costs shown above. | |
| Verified (Director, Public Housing Division) | Date |
| | |
| Approved (Field Office Manager) | Date |
| | |
| | form HUD-52839 (2/92 |

OMB Approval No.

Actual Comprehensive Grant Cost Certificate

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

(Exp. 11/30/2008)

Comprehensive Grant Program (CGP)

| PHA/IHA Na Rasco County Housing Authority | Comprehensive Grant Number |
|---|----------------------------|
| 14517 7th St. | FL29P104501-02 |
| Dade City, FL 33523 | FFY of Grant Approval |

The PHA/IHA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Comprehensive Grant, is as shown below:

| A. Original Funds Approved | \$ 333613.00 |
|---|--------------|
| B. Revised Funds Approved | \$ 333613.00 |
| C. Funds Advanced | \$ 333613.00 |
| D. Funds Expended (Actual Modernization Cost) | \$ 333613.00 |
| E. Amount to be Recaptured (A-D) | \$ 0.00 |
| F. Excess of Funds Advanced (C-D) | \$ 5.00 |

2. That all modernization work in connection with the Comprehensive Grant has been completed:

3. That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;

- 4. That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and
- 5. That the time in which such liens could be filed has expired.

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

Signature Date Tumer, Executive Di

| For HUD Use Only | |
|--|------|
| The Cost Certificate is approved for audit. | |
| Approved for Audit (Director, Public Housing Division) | Date |
| The audited costs agree with the costs shown above. | |
| Verified (Director, Public Housing Division) | Date |
| Approved (Field Office Manager) | Date |
| | |
| · · · | |

| Annual St Performan Part I: Sum Capital Fund [] Budget Revision [] Budget Revision [] Final Performan Line No. | atement / nce and Evalua mary s Program (CFP) s Program (CFP) I] Reserve for Disa ce and Evaluation Report | LUS An: An: Off HA Name THORITY Sters/Emergencies [] Revised Annual Statement/Revision Number # | S. Department c d Urban Develo ice of Public anc Capital Funds I FL29P1(Original Revision #1 | partment of Housing an Development Public and Indian Housing Capital Funds Project Number FFY of Gr Capital Funds Project Number FFY of Gr Total Estimated Cost Total Ac Iginal Revised (2) Obligated | OMB Approval 2577-0157 (Exp. 3/31/2002) FFY of Grant Approval FFY of Grant Approval FFY of Grant Approval Total Actual Cost (2) Obligated Expended |
|---|---|---|---|---|---|
| Line No. | Sun | nmary by Development Account | Total Estin Original Revision #1 | nated Cost Revised (2) | Total Actu Obligated |
| 1 | Total Non-CFP Funds | | | | |
| 2 | 1406 Operations (May not e | Operations (May not exceed 20% of line 20 for PHAs with 250 or more Units) | 224,287.00 | 224,287.00 | 224,287.00 |
| з | | Management Improvements (May not exceed 20% of line 20) | 70,000.00 | 70,000.00 | 70,000.00 |
| . 4 | 1410 Administration (May n | Administration (May not exceed 10% of line 20) | 0.00 | 0.00 | 0.00 |
| 5 | 1411 Audit | | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damages | | 0.00 | | 0.00 |
| 7 | 1430 Fees and Costs | | 28,701.00 | 2,58 | 2,586.12 |
| 8 | 1440 Site Acquisition | | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | | 283.00 | 25,04 | 25,046.66 |
| 10 - | 1460 Dwelling Structures | | 0.00 | | 0.00 |
| - 11 | 1465.1 Dwelling Equipment - Nonexpendable | Nonexpendable | 0.00 | 38 | 852.22 |
| 12 | 1470 Nondwelling Structures | 25 | 0.00 | | 0.00 |
| 13 | 1475 Nondwelling Equipment | nt | 10,342.00 | 10,84 | 10,841.00 |
| 14 | 1485 Demolition | | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Reserve | | 0.00 | | 0.00 |
| 16 | 1492 Moving to Work Demonstration | onstration | 0.00 | | 0.00 |
| 17 | 1495.1 Relocation Costs | | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Mod Used for Development Activities | oment Activities | 0.00 | 0.00 | 0.00 |
| .19 | 1502 Contingency (may not exceed 8% of line 20) | exceed 8% of line 20) | 0.00 | 0.00 | 0.00 |
| 20 | Amount of Annual Grant (Sum of lines 2 - 19) | es 2 - 19) | 333,613.00 | 333,613.00 | 333,613.00 |
| 21 | Amount of line 20 Related to LBP Activities | ctivities | | | |
| 22 | Amount of line 20 Related to Section 504 Compliance | 1 504 Compliance | | | |
| 23 | Amount of line 20 Related to Security | Ŷ | \$70,000 | \$70,000 | \$70,000 |
| 24 | Amount of line 20 Related to Energy Conservation Measures | Conservation Measures | | | |
| (1) To be cor | mpleted for the Performance and Eval | (1): To be completed for the Performance and Evaluation Report or a Revised Annual Statement. | (2) To be completed for the F | (2) To be completed for the Performance and Evaluation Report. | eport. |
| Signature of E | Signature of Executive Director and Date Kar | Karen Turner, Executive Director 3/31/2006 | Signature of Public Housing [| Signature of Public Housing Director/Office of Native American Programs Administrator and Date | an Programs Administrator a |
| 5 | 107 W 707 | 7 | | | |
| | | | | | |
| | | | | | |

| | | DR | W) | 14 | | | 14 | | (Pasco Jerrace) | | | | | llas) | FL104005 | | | | X | 14 | | | illae) | FL104004 14 | | | | ress Villas 1) | FL104001 | FL104001 (CV1) & FL104004 (CV2) 14 | PHA Wide | PHA Wide | HA - Wide Activities | Development Number / Name | Capital Funds Program |
|-------------------------|---------------|------------|---------------------|-----------------------------|----------|----------|-------------------------|------------|-----------------|-----------------------|-------------------------|---------------|------------|----------------------|----------------------------|-------------------------|---------------|------------|----------------------|-----------------------------|---------|---------------|---------|-----------------------|-------------------------|---------------|------------|----------------------|-----------------------------|------------------------------------|---------------------|-----------------|-------------------------|------------------------------|---|
| Total Cost for FL104007 | Subtotal 1475 | DRYERS (2) | ASHING MACHINES (2) | 1475 Non-Dwelling Equipment | | | 1465 Dwelling Equipment | | | 1450 Site Improvement | Total Cost for FL104005 | Subtotal 1475 | DRYERS (2) | WASHING MACHINES (2) | 175 Non-Dwelling Equipment | Total Cost for FL104004 | Subtotal 1475 | DRYERS (2) | WASHING MACHINES (2) | 1475 Non-Dwelling Equipment | | Subtotal 1450 | | 1450 Site Improvement | Total Cost for FL104001 | Subtotal 1475 | DRYERS (2) | WASHING MACHINES (5) | 1475 Non-Dwelling Equipment | 1408 Management Improvements | 1430 Fees and Costs | 1406 Operations | | General Description of Major | |
| | | | | 1475 | | - | 1465 | | | 1450 | | | | | 1475 | | | | | 1475 | | | | 1450 | | | | | 1475 | 1408 | 1430 | 1406 | Account Number | Development | |
| \$2,268.00 | \$2,268.00 | 00.866\$ | \$1,270.00 | | 00.00 | \$0.00 | | \$U.U | \$0.00 | | \$2,268.00 | \$2,268.00 | \$998.00 | \$1,270.00 | | \$2,551.00 | \$2,268.00 | 00.866\$ | \$1,270.00 | | + | 00 58C3 | ¢383 NN | | \$4,037.00 | \$4,037.00 | \$1,497.00 | \$2.540.00 | | \$70,000.00 | \$28,701.00 | \$224,287.00 | Oríginal | Total Estimated Cost | |
| \$27,883.88 | \$2,268.00 | \$998.00 | \$1,270.00 | | 77.758¢ | \$852.22 | | 924,103.00 | \$24,763.66 | | \$2,268.00 | \$2,268.00 | \$998.00 | \$1,270.00 | | \$2,551.00 | \$2,268.00 | \$998.00 | \$1,270.00 | | * | 00:0010 | C782 ND | | \$4,037.00 | \$4,037.00 | \$1,497.00 | \$1,905.00 | | \$70,000.00 | \$2,586.12 | \$224,287.00 | Revised (1) | ated Cost | |
| \$27,883.88 | \$2,268.00 | \$998.00 | \$1,270.00 | | 77.758¢ | \$852.22 | | 924,103.00 | \$24,763.66 | | \$2,268.00 | \$2,268.00 | 00.866\$ | \$1,270.00 | | \$2,551.00 | \$2,268.00 | \$998.00 | \$1,270.00 | | 4200100 | 00.5863 | 00 5863 | | \$4,037.00 | \$4,037.00 | \$1,497.00 | \$1,905.00 | | \$70,000.00 | \$2,586.12 | \$224,287.00 | Funds Obligated (2) | Total Actual Cost | |
| \$27,883.88 | \$2,268.00 | \$998.00 | \$1,270.00 | | \$852.22 | \$852.22 | | 924,103.00 | \$24,763.66 | | \$2,268.00 | \$2,268.00 | \$998.00 | \$1,270.00 | | \$2,551.00 | \$2,268.00 | \$998.00 | \$1,270.00 | | 4200.00 | 00.004 | 00 2863 | | \$4,037.00 | \$4,037.00 | \$1,497.00 | \$2,540.00 | | \$70,000.00 | \$2,586.12 | | Funds Expended (2) | 6 | |
| 1000000 100 10000 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Status of Proposed Work (2) | OMB Approval 2577-0157 (Exp. 3/31/2002) |

| Part III: Implementation Schedule Capital Fund Program | Performance and Evaluation Report Part III: Implementation Schedule Capital Fund Program | Report Jule | | and Urban Development Office of Public and Indian H | | lousing | OMB Approval No. 2577-0157 (Exp. 3/31/2002) |
|---|--|---|---------------------|--|--|--|--|
| Development Number / Name | All Fund | All Funds Obligated (Quarter Ending Date) | iding Date) | All Fund | All Funds Expended (Quarter Ending Date) | nding Date) | Reasons for Revised Target Date: |
| HA - Wide Activities | Original | Revised (1) | Actual (2) | Original | Revised (1) | Actual (2) | ויטייסטיס וטן וופאזפער ומוקבר מענפס (ד) |
| 1406 | | | 3/31/2004 | 9/30/2005 | 10/31/2004 | 9/30/2004 | |
| 1408 | 6/30/2003 | 9/30/2004 | 9/30/2004 | 10/31/2005 | 12/31/2005 | 12/31/2005 | |
| 1430 | 9/30/2003 | 9/30/2004 | 9/30/2004 | 9/30/2005 | 9/30/2006 | 3/1/2006 | |
| 1450 | | | 3/31/2006 | | | 6/30/2006 | |
| 1465 | | 9/30/2005 | 9/30/2005 | 9/30/2005 | 9/30/2005 | 9/30/2005 | |
| 1475 | 9/30/2004 | 9/30/2004 | 9/30/2004 | | 12/31/2004 | 12/31/2004 | |
| be completed for the P | erformance and Evalu | To be completed for the Performance and Evaluation Report or a Revised Annual Statement | d Annual Statement. | | (2) To be completed fo | (2) To be completed for the Performance and Evaluation Report. | aluation Report. |
| Signature of Executive Director and Date | ector and Date Kan | Karen Turenr, Executive Director | | 11/03/2008 | Signature of Public Hou | sing Director/Office of Nat | Signature of Public Housing Director/Office of Native American Programs Administrator and Date |
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Capital Fund Program-Five-Year Action Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 06/30/2011

| Part | Part I: Summary | PLIDY Housing | I coality (City/County & State)PASCO COUNTY FLORIDA | ASCO COUNTY FLORIDA | XOriginal 5-Year Plan | n Revision No: |
|---------|---------------------------------------|------------------|---|---------------------------|---------------------------|----------------|
| × * * * | Development Number and Work Statement | Work Statement | Work Statement for Year 2 | Work Statement for Year 3 | Work Statement for Year 4 | Wo |
| Ą. | Name | for Year 1 | FFY 2012 | FFY 2013 | FFY 2014 | FFY 2015 |
| | | FFY 2011 | | | | |
| B | Physical Improvements | Annual Statement | nt | | | |
| | Subtotal | | | | | |
| Ċ. | Management Improvements | 50.000 | 50.000 | 50.000 | 50.000 | 50.000 |
| D. | PHA-Wide Non-dwelling | | | | | |
| | Structures and Equipment | | | | | |
| E. | Administration | 25 623 | 25.623 | 25.623 | 25 623 | 25 623 |
| F. | Other | | | | | |
| Ģ | Operations | 180.607 | 180.607 | 180.607 | 180.607 | 180.607 |
| H. | Demolition | | | | | |
| ŗ | Development | | | | | |
| Ŀ. | Capital Fund Financing - | | | | | |
| | Debt Service | | | | | |
| K. | Total CFP Funds | 256.230 | 256.230 | 256.230 | 256.230 | 256.230 |
| L. | Total Non-CFP Funds | | | | | |
| < | Grand Total | 026 220 | 256 230 | 256 230 | 256.230 | 256.230 |

form HUD-50075.2 (4/2008)

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/20011

| Part I: Summary (Continuation) | - | | |
|--|--------------------------------------|--------------------------------------|--------------------|
| PHA Name/NumberPASCO COUNTY HOUSING FL104Locality (City/county & State)PASCO COUNTY, FLORIDA | e)PASCO COUNTY, FLORIDA | XOriginal 5-Year Plan | Van Revision No: |
| Development Number Work Work Statement for Year 2 and Name Statement for FFY2012 | Work Statement for Year 3 FFY2013 | Work Statement for Year 4 FFY2014 | Vork (|
| Year 1 FFY_2011 | | | * * * <u>*</u> * * |
| Annual Statement | | | |
| PHA WIDE OPERATIONS OPERATIONS | OPERATIONS | OPERATIONS | OPERATIONS |
| FL104-00000108D ADDTL POLICING ADDT'L POLICING (CYPRESS VILLAS I AND II) | ADDT'L POLICING | ADDT'L POLICING | ADDT'L POLICING |
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Page 2 of 6

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form HUD-50075.2 (4/2008)

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/20011

| S | nated Cost | Subtotal of Estimated Cost | \$ | l Cost | Subtotal of Estimated Cost | |
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| | | | | | | Statement |
| | | | | | | Annual |
| | | N/A | | | N/A | See |
| | ~ | General Description of Major Work Categories | | | General Description of Major Work Categories | _2011 |
| Estimated Cost | Ouantity | Development Number/Name | Estimated Cost | Quantity | Development Number/Name | Year 1 FFY |
| | | EEA 2013 | | | FFY 2012 | Statement for |
| | ω | Work Statement for Year | | 2 | Work Statement for Year 2 | Work |
| | | | nt(s) | ork Stateme | Part II: Supporting Pages – Physical Needs Work Statement(s) | Part II: Sup |
| Expires 4/30/200 | | | | | | 1 |

Page 3 of 6

-form HUD-50075.2 (4/2008)-

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expir<u>es 4/30/200</u>11

| \$ | Cost | Subtotal of Estimated Cost | ↔ | st | Subtotal of Estimated Cost | |
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| | | | | | | Statement |
| | | | | | | Annual |
| | | N/A | | | N/A | See |
| | | General Description of Major Work Categories | | | General Description of Major Work Categories | _2011 |
| Estimated Cost | Quantity | Development Number/Name | Estimated Cost | Quantity | | Year 1 FFY |
| | | FFY 2015 | | | FFY 2014 | Statement for |
| | | Work Statement for Year: 5 | | | Work Statement for Year 4 | Work |
| | | | (s) | Statement | Part II: Supporting Pages – Physical Needs Work Statement(s) | Part II: Sup |
| Expires 4/30/2001 | | | | | | |

Page 4 of 6

-form HUD-50075.2 (4/2008)

Capital Fund Program-Five-Year Action Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No, 2577-0226 Expires 4/30/20011

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

| | | | | | | | | | | Statement | Annual | See | _2011 | Year 1 FFY | Statement for | Work |
|----------------------------|--|--|--|--|--|--|------|--|--------|--|-------------------------|---------------------|--|-------------------------|---------------|----------------------------|
| Subtotal of Estimated Cost | | | | | | | | | | FI 104-00000108D CYPRESS VII I AS I & II | PHA WIDE ADMINISTRATION | PHA WIDE OPERATIONS | General Description of Major Work Categories | Development Number/Name | FFY 2012 | Work Statement for Year 2 |
| \$256,230 | | | | | | | | | 10.000 | 50 000 | 25,623 | 180.607 | | Estimated Cost | | L |
| Subtotal of Estimated Cost | | | | | | | | | | FIINA NONNINST CYTERES VITLASI & II | PHA WIDE ADMINISTRATION | PHA WIDE OPERATIONS | General Description of Major Work Categories | Development Number/Name | FFY 2013 | Work Statement for Year: 3 |
| \$256,230 | | | | | | | ~~~~ | | JU,UU | 50 000 | 25.623 | 180.607 | | Estimated Cost | | |

form HUD-50075.2 (4/2008)

Page 5 of 6

Capital Fund Program-Five-Year Action Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/20011

| \$256,230 | Subtotal of Estimated Cost | \$256,230 | Subtotal of Estimated Cost | |
|-------------------|--|----------------|---|---------------|
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| 50,000 | FL104-00000108D CYPRESS VILLAS I & II | 50.000 | FI.104-00000108D CYPRESS VILLAS I & II | Statement |
| 25,623 | PHA WIDE ADMINISTRATION | 25,623 | PHA WIDE ADMINISTRATION | Annual |
| 180.607 | PHAWIDE OPERATIONS | 180.607 | PHA WIDE OPERATIONS | |
| | General Description of Major Work Categories | | General | 2011 |
| Estimated Cost | Development Number/Name | Estimated Cost | Development Number/Name | Year 1 FFY |
| | FFY 2015 | | | Statement for |
| | Work Statement for Year: 5 | | Work Statement for Year 4 | Work |
| | | atement(s) | Part III: Supporting Pages - Management Needs Work Statement(s) | Part III: Su |
| Expires 4/30/2001 | | | | |

form HUD-50075.2 (4/2008)

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| FHDC FLORIDA HOUS Improving Housing Decisions | FLORIDA HOUSING DATA CLEARINGHOUSE |
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| Home All Datasets 🐱 Profiles | Comparisons 🗸 Tools for Planning 🐱 Housing Seakers Library AcZ index |
| Regional & Local Profiles: Results | sults |
| CHANGE VIEW Show Notes and Sources GO | Housing Profile Pasco County, Florida Population, 2009: 439789. Pasco County ranks # 12 of Florida's 67 counties in population. Households, 2009: 185475 Homeownership Rate, 2009: 82.1%. Statewide, Florida's homeownership rate is 70.5%. |
| OTHER REPORT ACTIONS | Jump to: |
| 题 Download Excel data | Population Projections |
| VIEW OTHER DATA FOR THE SELECTED GEOGRAPHIC AREA | Housing Market |
| General Unit Characteristics Population Projections | Affordable Housing Needs |

Population Projections

START OVER

In 2030, Pasco County is projected to have a population of 619002, ranking it # 11 of Florida's 67 counties.

Projected Total Population, Pasco County, 2007-2030

| | | | | Г |
|-------------------------|--|--------------|-------|---|
| Sources: Not Available. | Notes: Housing Na | Pasco County | Place | |
| | eds Assessm | 439789 | 2009 | |
| | Housing Needs Assessment - Population and Household Projection Methodology | 440298 | 2010 | |
| | in and Househ | 479101 | 2015 | |
| | old Projection | 527799 | 2020 | |
| | | 574697 | 2025 | |
| | User Guide. | 619002 | 2030 | |

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Housing Market

Existing Home Values (Based on County Property Appraisers' Just Value)

Single Family Home, average just value, 2008: \$133708. (Statewide, the average just value of a single family home in Florida in 2008 was \$203634). Mobile Home, average just value, 2008: \$49537. Condominium, average just value, 2008: \$75904.

- * -100 means less than 25 observations
 * -200 means less than 2/3 of observations have valid year built entries
 * -300 means less than 2/3 of observations have valid square footage entries
 * -400 means no observations

Jump to:

Population Projections

Affordable Housing Needs

Home Sales Prices

No Home Sales Prices are available.

Jump to:

Population Projections

Affordable Housing Needs

Median Sales Price for Single Family Homes and Condominiums, Pasco County, 1996-2008

| | | · | | - |
|---|--|---|------------------------------------|---|
| Notes: *-100 means less than 25 obs *-200 means less than 2/3 of *-300 means less than 2/3 of *-400 means no observations. Sources: County property ap | Pasco County Condominiums | Pasco County | Place | |
| Notes: * -100 means less than 25 observations. * -200 means less than 2/3 of observations have valid entries for that year. * -200 means less than 2/3 of observations have valid square footage entries. * -300 means no observations. * -400 means no observations. Sources: County property appraiser tax rolls, compiled by Shimberg Center - Florida Housing Data Clearinghouse. | | Pasco County Single Family Homes 70000 70000 76800 82500 87000 107500 123700 137300 155500 195000 233000 205100 158000 142000 | Housing Type | |
| ns have ns have rolls, c | 45250 | 70000 | 1996 | |
| e valid er e valid si compile | 46000 | 70000 | 1997 | |
| ntries fo quare fo d by Shi | 46000 | 76800 | 1998 | |
| r that y otage e | 48000 | 82500 | 1999 | |
| ear. ntries. Center - | 48750 | 87000 | 2000 | |
| Florida H | 52500 | 107500 | 1996 1997 1998 1999 2000 2001 2002 | |
| tousing C | 61500 | 123700 | 2002 | |
|)ata Clea | 65000 | 137300 | 2003 | |
| ringhous | 77500 | 155500 | 2004 | |
| ō | 105000 | 195000 | 2005 | |
| | 129900 | 233000 | 2006 | |
| | 112100 | 205100 | 2007 | |
| | 45250 46000 46000 48000 48750 52500 61500 65000 77500 105000 129900 112100 80000 | 158000 | 2003 2004 2005 2006 2007 2008 | |
| | 62950 | 142000 | 2009 | |

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Rents

The median rent paid by Pasco County households in 2000 was \$518 per month, compared to a statewide median rent of \$641.

In Pasco County and the surrounding metro area, the HUD Fair Market Rent in 2010, representing rent for a typical modest apartment, was \$714 for a studio apartment, \$793 for a one-bedroom, \$959 for a two-bedroom, \$1215 for a three-bedroom, and \$1467 for a four-bedroom unit.

Households by Monthly Rent Paid, Pasco County, 2000

| Pasco County | Place | |
|-----------------|--------------------------|--|
| 1678 | No Cash Rent | |
| 608 | less than 200 | |
| 1280 | between 200 and 299 | |
| 9055 | between 300 and 499 | |
| 10077 | between 500 and 749 | |
| 1823 | between 750 and 999 | |
| 784 | between 1000 and 1499 | |
| 417 | 1500 or more | |

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Cost Burden, General

"Cost-burdened" households pay more than 30% of income for rent or mortgage costs. In 2009, 45605 Pasco County households (25%) pay more than 30% of income for housing. By comparison, 29% of households statewide are cost-burdened. 18924 households in Pasco County (10%) pay more than 50% of income for housing.

Households by Cost Burden, Pasco County, 2009

| Notes: Housing Needs Assessment - Population and Household Projection Methodology User Guide. Click here to get household projections by tenure, age of householder, income, and cost burden. Sources: Not Available. | nt - Population and House enure, age of householder | using Needs Assessme usehold projections by t able. | Notes: Click here to get househo Sources: Not Available |
|--|--|---|---|
| 18924 | 26681 | 139870 | Total |
| 50% or more | 30-50% | 0-30% | |
| aid for Housing | Amount of Income Paid for Housing | | |
| | | | |

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example, a user could find the number of 1-2 person renter households age 65 and older who pay more than 50% of income for housing by selecting household size, householder age, and household income as indicators. ** The Household Demographic Data Access Tool allows users to combine any of the variables below to create a custom report. For

Jump to:

Population Projections

Housing Market

Homeowners and Renters

Households by Homeowner/Renter Status and Cost Burden, Pasco County, 2009

| | | Amount of Income Paid for Housing | aid for Housing |
|--|---|---|---|
| | 0-30% | 30-50% | 50% or more |
| Owner | 119238 | 20359 | 12631 |
| Renter | 20632 | 6322 | 6293 |
| Notes: Housing Click here to get househ Sources: Not Available | ing Needs Assessment sehold projections by ten ble. | - Population and Househ ure, age of householder, | Notes: Housing Needs Assessment - Population and Household Projection Methodology User Guide. Click here to get household projections by tenure, age of householder, income, and cost burden. Sources: Not Available. |

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Household Income

In the following table, household income is measured as a percentage of the median income for the county or area, adjusted for family size. In Pasco County and the surrounding metro area, the HUD-estimated median income for a family of four is \$59400 in 2010.

Households by Income and Cost Burden, Pasco County, 2009

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the Household Demographic Data Access Tool ** For more detailed income categories and to combine with other variables such as age, cost burden, and owner/renter status, try

Elderly Households

66434 households in Pasco County (35.8%) are headed by a person age 65 or older in 2009. In comparison, 27.8% of households statewide are headed by elderly persons. 59792 of elderly households in Pasco County (90.0%) own their homes

14845 elderly households (22%) pay more than 30% of income for rent or mortgage costs.

Elderly Households by Age and Cost Burden, Pasco County, 2009

| Notes: Housing Needs Assessment - Population and Household Projection Methodolog Click here to get household projections by tenure, age of householder, income, and cost burden Sources: Not Available. | 65+ | Age of Householder | | |
|---|-------|--------------------|-----------------------------------|--|
| ment - Population ar by tenure, age of hou | 51589 | 0-30% | Am | |
| Housing Needs Assessment - Population and Household Projection Methodology User Guide : household projections by tenure, age of householder, income, and cost burden. Available. | 8075 | 30-49.9% | Amount of Income Paid for Housing | |
| idology User Guide. Irden. | 6770 | 50+ % | sing | |

Back to top

owner/renter status, try the Household Demographic Data Access Tool ** To learn about all head-of-household age categories and to combine with other variables such as income, cost burden, and

Size of Households

44530 households in Pasco County (24%%) are made up of 3-4 persons in 2009. 22% of these households pay more than 30% of income for rent or mortgage costs 128667 households in Pasco County (69%) are made up of 1-2 persons in 2009. 26% of these households pay more than 30% of income for rent or mortgage costs 12295 households in Pasco County (7%%) are made up of 5 persons or more in 2009. 23% of these households pay more than 30% of income for rent or mortgage costs.

Households by Size and Cost Burden, Pasco County, 2009

| | Number of Persons in the Household | | |
|---|------------------------------------|-----------------------------------|--|
| - | 0-30% | Amo | |
| | 30.01-50% | Amount of Income Paid for Housing | |
| | 50.01+ % | for Housing | |

| | | | | - |
|---|--------|------|-------|-------|
| Click here Sources: | Notor: | 5+ | 3-4 | 1-2 |
| Click here to get household projections by tenure, age of householder, income, and cost burden. Sources: Not Available. | | | | |
| if householder, | | 9477 | 34568 | 95837 |
| income, and cost bure | | 1959 | 6556 | 18164 |
| den. | | 859 | 3406 | 14666 |

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** To combine with other variables such as income, head-of-household age, and owner/renter status, try the Household Demographic Data Access Tool

Disability and Affordable Housing Need

In 2000, 23384 low-income households included at least one person with a disability age 15 or older. These households had incomes below 60% of the area median income.

2000 Low-Income (<60% AMI) Households Including Persons with Disabilities Age 15+ and Cost Burden, Pasco County,

| 10430 6095 | 0-29.9% 30-49.9% 50 | Amount of Income Paid for Housing |
|------------|---------------------|-----------------------------------|
| 6859 | 50+ % | using |

Back to top

Jump to:

Population Projections

Housing Market

Affected and Anticing Ma

Affordable Housing Need

Single Family Home Size and Age

In 2008, the median size for a new single-family home in Pasco County was 1917 square feet.

Year Structure Built, Pasco County, 2000

| 2123 2166 6131 17407 55678 53986 36226 Pasco County | 1939 and earlier 1940s 1950s 1960s 1970s 1980s 1990s P | Year Structure Bulk 2003 |
|---|--|--------------------------|
| Pasco County | Place | |

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Substandard Housing

Housing units are considered to be substandard if they are overcrowded, do not have heat, or lack complete kitchens or plumbing. In 2000,

3702 housing units (2.5% of all units) in Pasco County were overcrowded, meaning that they housed more than one person per room, compared to a statewide percentage of 6.5%.

1152 units (0.8%) in Pasco County did not use home heating fuel, compared to a statewide percentage of 1.8%.
449 units (0.3%) in Pasco County lacked complete kitchen facilities, compared to a statewide percentage of 0.5%.
345 units (0.2%) in Pasco County lacked complete plumbing facilities, compared to a statewide percentage of 0.4%.

PLANETIZEN

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SEARCH

Karen Turner

| From: | Crawford, Aisha R <aisha.r.crawford@hud.gov></aisha.r.crawford@hud.gov> |
|----------|---|
| Sent: | Friday, July 08, 2011 12:02 PM |
| To: | 'Karen Turner'; 'Hernando County Housing Authority ' |
| Cc: | Main, Victoria A; Courtney, Mark J; Newberry, Shonda L |
| Subject: | Scheduled SEMAP Confirmatory Review - Week beginning, July 11, 2011 |
| Cc: | 'Karen Turner'; 'Hernando County Housing Authority ' |

Good Morning,

This message is to inform you that the SEMAP Confirmatory review scheduled for your PHA for next week has been postponed due to the unavailability of travel funds. You will be notified when funds are available and we can re-schedule our visit at that time.

We apologize for any inconvience that this may cause. Please do not hesitate in contacting me if you have any questions.

Aisha Crawford

Public Housing Specialist U.S. Department of HUD Jacksonville, Florida Field Office Office: 904-208-6114 Fax: 904-232-1721

Office Hours:

Monday, Wednesday, and Friday: 8:30am - 5:00pm Tuesday and Thursday - Telework: 8:30am - 5:00pm

HUD is the nation's housing agency committed to creating affordable housing opportunities for low-income Americans; and supporting the homeless, elderly, people with disabilities and people living with AIDS. The Department also promotes economic and community development and enforces the nation's fair housing laws. More information about HUD and its programs is available on the Internet at <u>www.hud.gov</u> and espanol.hud.gov.

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Please do not print this e-mail unless necessary.



U. S. Department of Housing and Urban Development Jacksonville Field Office Charles Bennett Federal Building 400 West Bay Street Suite 1015 Jacksonville, Florida 32202-4410

2 3 JUN 2011

REC'D JUN 28 2011

Ms. Karen Turner Executive Director Pasco County Housing Authority 14517 7th Street Dade City, FL 33523-3102

SUBJECT: Section Eight Management Assessment Program (SEMAP) Confirmatory Review Fiscal Year End September 30, 2010

Dear Ms. Turner:

This letter is to confirm that Aisha Crawford, Public Housing Revitalization Specialist and Shonda Newberry, Portfolio Management Specialist, will be conducting an on-site visit to your agency July 11-13, 2011. The purpose of this visit is to review the SEMAP Certification for Fiscal Year Ending (FYE) September 30, 2010 that the Pasco County Housing Authority failed to submit timely in accordance with HUD requirements.

The on-site visit will entail a review of the documentation used by the Housing Authority to certify to each of the indicators on the SEMAP Certification for FYE September 30, 2010. Any concerns or technical assistance needed by the housing authority can be addressed during this visit.

We look forward to working with you and your staff during this visit. If you have any questions or additional information is desired, please contact Aisha Crawford at (904) 208-6114, or via email at Aisha.R.Crawford@hud.gov.

Sincerely,

litoria M.

Victoria A. Main Director Office of Public Housing

Pasco County Housing Authority FYE September 30, 2010 Section 8 SEMAP Confirmatory Review July 11-13, 2011

Documentation and File List

The following documents, records, and files should be available for the review.

- 1. Section 8 Administrative Plan with approved Board Resolution.
- 2. Documentation and verification used to support each of the 14 indicators on the SEMAP Certification.
- 3. Copy of the Section 8 waiting lists
- 4. List of the families selected and newly admitted for FYE September 30, 2010; include the name, unit address, date of application and date of admission.
- 5. List of ineligible applicants, date of application, date of denial, reason for denial, and letter of ineligibility to family
- Copy of Voucher Payment Standard with Board Resolution and Fair Market Rents for FYE 2010
- 7. Summary of lease up for each bedroom size, family type and race
- 8. Schedule of Utility Allowances for FY 2010
- 9. Process used to track monthly utilization of units and Budget Authority

<u>Please refer to 24 CFR 985.3. Indicators, HUD verification methods and ratings</u> for more specific information related to the review process.

<u>NOTE</u>: Other information not listed above may be requested to complete the review. Meetings with staff may be scheduled during the on site portion of the review.



U. S. Department of Housing and Urban Development Jacksonville Field Office Charles Bennett Federal Building 400 West Bay Street Suite 1015 Jacksonville, Florida 32202-4410

1 1 APR 201

Ms. Regina Mirabella Chairperson Pasco County Housing Authority 14517 7th Street Dade City, Florida 33523

REC'D APR 14 2011

Dear Ms. Mirabella:

This is in response to your letter of March 10, 2011, which provided the required response to any SEMAP indicators with a zero rating, for the September 30, 2010, SEMAP certification. For each zero-rating received on the SEMAP certification assessment the Housing Authority must send HUD a written report describing the corrective action taken.

Your response is sufficient to address the deficiency; however, your request to complete the SEMAP Certification at this time is denied. You will be on the SEMAP Troubled list until the next annual Certification. The SEMAP Certification onsite Confirmatory Review will verify your scores if you had submitted. Corrective actions will be required on any Indicator that we are unable to verify during the onsite visit. Thank you for your cooperation with the SEMAP process.

If you have any questions regarding the information in this letter or about the SEMAP certification process, please contact Shonda Newberry, SEMAP Coordinator, at (904) 208-6097, or via email at Shonda.L.Newberry@hud.gov.

Sincerely,

Office of Public Housing

cc: Ms. Karen Turner Executive Director Pasco County Housing Authority



Pasco County Housing Authority



MAIN OFFICE: (352) 567-0848 FAX NUMBER: (352) 567-6035 TTY: (352) 567-1438 14517 7th Street - Dade City, Florida 33523

KAREN TURNER EXECUTIVE DIRECTOR

March 10, 2011

Ms. Victoria Main, Director Office of Public Housing U.S. Department of HUD Charles Bennett Federal Building 400 West Bay Street Suite 1015 Jacksonville, Florida 32202

Re: Section 8 Management Assessment Program (SEMAP) Certification

Dear Ms. Main:

I have received your letter regarding the final score for Pasco County Housing Authority on our Section 8 Management Assessment Program (SEMAP) Certification for the Fiscal Year Ending September 30, 2010. The Board and the Executive Director fully understand the importance of the SEMAP Certification and truly apologize for the submission not being completed in a timely manner. Unfortunately, the Executive Director became very ill prior to the submission deadline; she was out of work on medical leave for over a week and then returned to the doctor after her return to work due to the continued illness. The Executive Director made every attempt possible to submit the Certification on November 30, 2010, but as you are aware was unable to complete the certification due to the lock out. We have instructed the Executive Director to complete the SEMAP submission the beginning of November in the future to allow for unforeseen circumstances such as what happened this year.

Our first request is asking HUD to consider a waiver and allow the Certification to be completed at this time. After reading your letter, I am not sure if a waiver can be granted due to the fact that it does not fall under the guidelines of Notice PIH 2004-16.

"THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER." AN EQUAL OPPORTUNITY EMPLOYER

If a waiver is unable to be granted, the Housing Authority will comply with all recommendations from the HUD on-site review written report. After receiving the written report, the Housing Authority will complete the Corrective Action Plan and submit the plan to HUD for approval. The Housing Authority will work closely with HUD to monitor the implementation of the Corrective Action Plan.

Once again, the Board and the Executive Director apologize for any inconvenience this may have caused you and appreciate your consideration in this matter. If you have any questions or need any additional information, please do not hesitate to contact the Executive Director at (352) 567-0848, extension 109. Thank you.

Sincerely,

Regina Mirabella, Chairperson Pasco County Housing Authority Board

Cc: Ms. Karen Turner, Executive Director Pasco County Housing Authority



U. S. Department of Housing and Urban Development Jacksonville Field Office Charles Bennett Federal Building 400 West Bay Street Suite 1015 Jacksonville, Florida 32202-4439

February 10, 2011

REC'D FEB 2 2 2011

Ms. Regina Mirabella Chairman Pasco County Housing Authority 12860 Honeybrook Drive Hudson, FL 34669-2819

Dear Ms. Mirabella:

We have calculated the Final Score on your Section 8 Management Assessment Program (SEMAP) Certification for the Fiscal Year Ending September 30, 2010. SEMAP enables HUD to better manage the Section 8 tenant-based program by identifying PHA capabilities and deficiencies related to the administration for the Section 8 program. As A result, HUD will be able to provide more effective program assistance to PHAs.

The Pasco County Housing Authority earned 0 points out of possible 135 points due to lack of submission of the required SEMAP Certification in PIC. Your overall performance rating is Troubled in accordance with the requirements of 24 CFR 985.101(b).

§ 985.101 SEMAP Certification.

(b) Failure of a PHA to submit its SEMAP certification within 60 calendar days after the end of its fiscal year will result in an overall performance rating of troubled and the PHA will be subject to the requirements at § 985.107.

§ 985.107 Required actions for PHA with troubled performance rating.

(c) *PHA corrective action plan*. Upon receipt of the HUD written report on its on-site review, the PHA must write a corrective action plan and submit it to HUD for approval.

(d) *Monitoring*. The PHA and HUD must monitor the PHA's implementation of its corrective action plan to ensure performance targets are met.

In accordance with Notice PIH 2004-16 (PHA), a PHA that failed to submit its SEMAP certification to HUD, may not appeal their troubled designation except where it can be sufficiently demonstrated the HUD was at fault, contributed to, or prevented the PHA from certifying. Since Pasco County Housing Authority failed to submit its SEMAP certification, it will remain troubled for the full fiscal year and will be subject to all required actions that apply to SEMAP troubled PHAs.

A response to this letter is required within 45 days from the date of this letter.

If you have any questions, please contact Shonda Newberry, of my staff, at (904) 208-6097, or by e-mail at Shonda.L.Newberry@hud.gov.

Sincerely,

Vitez mi

Victoria A. Main Director Office of Public Housing

cc: Ms. Karen Turner Executive Director Pasco County Housing Authority

PHA Certifications of Compliance with PHA Plans and Related <u>R e g u l a t i o n s</u>

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-*Year and Annual* PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the \underline{X} 5-Year and/or \underline{X} Annual PHA Plan for the PHA fiscal year beginning 2011. hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

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

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

Pasco County Housing Authority PHA Name

FL-104

PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20 - 20

X Annual PHA Plan for Fiscal Years 2011 - 2011

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

| Name of Authorized Official | Title | | |
|-----------------------------|------------------------------------|--|--|
| Regina Mirabella | Chairperson, Board of Commissioner | | |
| Signature Muhalle | Date 07/08/2011 | | |

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Pasco County Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund

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

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

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

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

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

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

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

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

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

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and

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

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

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

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

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

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

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

Pasco County Housing Authority 14517 7th Street Dade City, Florida 33523

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

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

| Name of Authorized Official | Title |
|-----------------------------|--------------------|
| Karen Turner | Executive Director |
| Signature | Date |
| × Augn June | July 7, 2011 |
| | |

form **HUD-50070** (3/98) ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Pasco County Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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

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

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions. (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

| Name of Authorized Official | | | |
|------------------------------|------------------|--|--|
| Karen Turner | Title Executi | utive Director | |
| Raren Turna | | $\frac{\text{Date (mm/dd/yyyy)}}{07/14/2011}$ | |
| Previous edition is obsolete | | Torrest Torrest of the second se | |

form HUD 50071 (3/98) ref. Handboooks 7417.1, 7475.13, 7485.1, & 7485.3

| DISCLOSURE OF LOBBYING ACTIVITIES | | | | Approved by OMB | |
|--|------------------------------|---|---------------------------|--------------------|-----------|
| Complete this form to disclose lobbying | | ig activities pursuant to 31 U.S.C. 1352 | | | 0348-0046 |
| | See reverse for pu | blic burden disclosu | re.) | | |
| | 2. Status of Federal Action: | | 3. Report Type: | | |
| b. a. contract | a. bid/offer/application | | a. initial filing | | |
| b. grant | b. initial award | | b. material change | | |
| c. cooperative agreement | c. post-award | | For Material Change Only: | | |
| d. Ioan | | | | quarter | |
| e. loan guarantee | | | date of last report | | |
| f. loan insurance | | | | | |
| 4. Name and Address of Reporting | Entity: | 5. If Reporting En | tity in No. 4 is a S | ubawardee F | nter Namo |
| ✓ Prime Subawardee | | 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: | | | |
| Tier, | if known: | Not Applicable | | | |
| Pasco County Housing | Authority | | | | |
| 14517 7th Street | Authority | | | | |
| | 3523 | | | | |
| | | | | | |
| Congressional District, if known: | 5&9 | Congressional District, if known: | | | |
| 6. Federal Department/Agency: | | 7. Federal Program Name/Description: | | | |
| U.S. Department of Housing and Urba | n Development | | | | |
| | | | | | |
| | | CFDA Number, if applicable: 14.872 | | | |
| | | | | | |
| 8. Federal Action Number, if known | : | 9. Award Amount, if known: | | | |
| | | \$ | | | · |
| 10. a. Name and Address of Lobbyi | ng Registrant | b. Individuals Performing Services (including address if | | | |
| (if individual, last name, first na | me, MI): | different from No. 10a) | | | |
| | | (last name, first name, MI): | | | |
| None | | None | | | |
| | | ivone | | | |
| | | | | | |
| | | | | | |
| upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. | | Signature: | uen Tur | ner | |
| | | Print Name: Karen Turner | | | |
| | | Title: Executive Dire | | | |
| | | Telephone No.: (35 | 52) 567-0848 | Date: | 7/7/2011 |
| Federal Use Only: | | | | Authorized for Loc | |
| | | | | Standard Form LI | |

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, George Romagnoli the Community Development Manager certify that the Five Year and Annual PHA Plan of the Pasco County Housing Authority is consistent with the Consolidated Plan of Pasco County, Florida prepared pursuant to 24 CFR Part 91.

6/14/11

Signed / Dated by Appropriate State or Local Official

form HUD-50077-SL (1/2009) OMB Approval No. 2577-0226 July 7, 2011

PASCO COUNTY HOUSING AUTHORITY ANNUAL RESIDENT COUNCIL MEETING ANNUAL PLAN

Meeting called to order at 11:00 a.m.

In attendance

Michael Maeker, Resident, 38546 Patti Lane Lupez Rinconada, Resident, 20654 Blanchette Court Cynthia Andino, Resident, 38536 Patti Lane Shelly Hodges, Resident, 20549 Blanchette Court Mary Thompson, Manager, Pasco County Housing Authority Abigail Jackson, Administrative Assistant, Pasco County Housing Authority

The Administrative Assistant, Ms. Abigail Jackson, reviewed in detail the Pasco County Housing Authority's Annual Plan with the Resident Council. She reviewed all anticipated budget items for the Capital Fund Program for all Public Housing Communities and asked for comments from the residents. Ms. Jackson also reviewed all completed work items through the ARRA grant and the Capital Fund grants. The Resident Council was very happy with the completed work items through the ARRA and Capital Fund grant funding.

The meeting was adjourned at 12:30 p.m.

Dasco County Housing Authority Annul Resident Council Meeting Annual Plan 2011

July 7, 2011

<u>Sign in Sheet</u>

| | | CICNIATURE |
|----|--|------------------|
| # | NAME/ADDRESS | SIGNATURE |
| 1 | Abigail Jackson 14517 7 th Street | Height K. palson |
| 2 | Mary Thompson 14517 7 th Street | May M. Ohompson |
| 3 | Michael Maeker 38546 Patti Lane | Michael Marken |
| 4 | LUDEZ Kitrong dg 20654 Blancette ct | Antonia |
| 5 | Cynthia Andino 33536 Patti La. | Cimping andire |
| 6 | Shelly F. Hodges 20549 Blanchette Ct. | Shum Hornight |
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June 30, 2011

PASCO COUNTY HOUSING AUTHORITY PUBLIC HEARING ANNUAL PLAN

Meeting called to order at 10:05 a.m. on June 30, 2011.

In attendance:

Karen Turner, Executive Director, Pasco County Housing Authority Abigail Jackson, Administrative Assistant, Pasco County Housing Authority

The Executive Director, Ms. Karen Turner, stated that the purpose of the Public Hearing was to obtain input from the general public on the Pasco County Housing Authority's Annual Plan for FY 2011. She stated that Notice was given to the public through advertisement in the newspaper and that during the 45 days preceding the Public Hearing, the Annual Plan and attachments were made available for review by the residents and the public at the Housing Authority's main office. The Annual Plan has been reviewed by the County to certify compliance with Pasco County's Comprehensive Plan.

The Executive Director asked for public comment. There was no public comment; the Public Hearing was adjourned at 10:08 a.m.