

1.0	PHA Information PHA Name: Wyoming Housing Commission PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 04/2011 PHA Code: M1115					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 195 Number of HCV units: 1122					
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
		Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
						PH HCV
		PHA 1:				
		PHA 2:				
		PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The WHC's mission is to provide safe, decent and sanitary housing conditions for very low-income families and to manage resources efficiently. The WHC is to promote personal, economic and social upward mobility to provide families the opportunity to make the transition from subsidized to non-subsidized housing.					

5.2	<p>Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p>The goals and objectives in the last five year plan and what was accomplished follows:</p> <ol style="list-style-type: none"> 1. Implement a Public Housing Homeownership Program. <i>The PH plan was approved by HUD on March 16, 2006. The Wyoming Housing Commission has sold one home through this program.</i> 2. Implement a Section 8 Homeownership Program. <i>The HCV Homeownership Program was approved by HUD on November 16, 2005. The WHC currently has two families receiving homeownership subsidy and possibly three more. Thirty-six 36 families working toward homeownership.</i> 3. Improve the SEMAP from 82% to 90% or better. <i>SEMAP scores improved: 2005 – 89%; 2006 – 83%; 2007 – 100%; 2008 – 100% and 2009- 97% and 2010 100 % was accomplished.</i> 4. Improve the PHAS status from Troubled 58% to 80% or better within one year and improve to 90% or better within five years. <i>2005 – 87%; 2006 – NA; 2007 – 88%; 2008 & 2009 – Not scored advisory.</i> 5. Use the PH Housing reserves for property betterment, including windows, furnaces and converting/developing three units to meet the ADA requirements. <i>The Wyoming Housing Commission uses its reserves and CFP funds for operation and property betterment. We have replaced furnaces and boilers over the past five years. Our funding is inadequate to have converted three units to ADA compliant. Estimated costs were around \$170,000. The WHC has applied for a supplemental grant specifically targeted to unit conversion.</i> 6. Use the Section 8 Reserves toward initiating the Homeownership Program and to provide adequate staffing and training. <i>The Administrative Fees Reserve has been used to pay for staff, staff training and assist with the homeownership program. The Wyoming Housing Commission operates homeownership programs in both the Public Housing and Section 8 Programs.</i> 7. Increase the number of families participating in the Family Self-Sufficiency Program. <i>In 2005, the WHC had 17 families participating; 2006 – 14; 2007 – 21; 2008 – 25; 2009 – 76. The mandatory slots are now at 125.</i> <p>Goals and Objectives for the next five years:</p> <ol style="list-style-type: none"> 1. Achieve/Maintain standard performer for SEMAP and PHAS or higher. 2. Maintain public housing vacancy at 3% or less. 3. Complete 100% of emergency work orders within 24 hours. 4. Utilize the 98% of the voucher allocation or budget authority. 5. Apply for any additional vouchers, which may become available. 6. Increase public housing unit inventory to the extent possible (upon funding & property availability) 7. Support families in their goal to obtain homeownership by having a minimum of five combined closings in both homeownership programs. 8. Increase the number of FSS participants to 125. 9. Incorporate office renovation and/or reconfigure office work space to accommodate expanding WHC staff, along with office equipment.
6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p>There have been no revisions to the PHA plan since its last submission. The Administrative Plan and Admissions & Continued Occupancy Plan have had no major revisions since the last submission of the Annual Plan. However, the Wyoming Housing Commission intends to update both the Admissions and Continued Occupancy Plan and the Administrative Plan as statutory and regulatory changes occur.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>The PHA plan is located at the PHA's Administrative Offices and on the City of Wyoming's Website under the Housing Department at www.wyomingmi.gov.</p>

7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>Not applicable.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>Please see obligated and expenditure reports for all opened Capital Fund grants.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>Please see enclosure.</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p>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.</p> <p>The Wyoming Housing Commission maintains a separate Public Housing and Section 8 Waiting List. The Public Housing total of applicants on the is 617. A total of 509 (82%) applicants are extremely low income; 95 (15%) applicants are very low income; and, 12 (2%) applicants are low income. The racial make-up of the applicants includes: 117 (19%) White, 457 (75%) Black, 0 (0%) American Indian/Alaska Native and 46 (7%) Hispanic. are 140 families with disabilities. The Public Housing waiting lists remains closed.</p> <p>The (HCV)Section 8 total of applicants on the is 202. A total of 202 (64%) applicants are extremely low income; 111 (35%) applicants are very low income; and, 5 (2%) applicants are low income. The racial make-up of the applicants includes: 79 (25%) White, 207 (65%) Black, 2 (1%) American Indian/Alaska Native and 31 (10%) Hispanic. There are 108 families with disabilities. The Section 8 waiting list opened in September 2010 for a two week period.</p> <p>The WHC used the Consolidated Plan of the City of Wyoming in formulating its own plan and also provides input to the City when it develops its Consolidated Plan.</p>
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>The Wyoming Housing Commission's strategy for addressing housing needs includes:</p> <ul style="list-style-type: none"> • Reducing unit turnover time in Public Housing. • Increase Section 8 lease-up rates by utilizing payment standards that will enable families to find suitable housing in the jurisdiction. • Employ an admission preference in public housing that targets working families. • Affirmatively market to local non-profit agencies that assist families with disabilities. • Counsel Section 8 residents as to location of units outside of areas of poverty of minority concentration and assist them to locate those units. • Encourage all Section 8 voucher holders to participate in the Family-Self Sufficiency Program • Apply for any vouchers that WHC may be eligible. • Expand our inventory in public housing as the budget and availability permits.

10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. See 5.2</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><i>Substantial Deviation from the 5-Year Plan</i> The Wyoming Housing Commission's (WHC) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> • changes to rent or admissions policies or organization of the waiting list; • additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and • any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. <p><i>Significant Amendment or Modification to the Annual Plan</i> The Wyoming Housing Commission's (WHC) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> • changes to rent or admissions policies or organization of the waiting list; • additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and • any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.
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11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

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

Part I: Summary		FFY of Grant: 2011 FFY of Grant Approval:	
PHA Name: Wyoming Housing Commission (MI115)		Grant Type and Number Capital Fund Program Grant No: MI33P11550111 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant	<input type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending:	<input type="checkbox"/> Revised Annual Statement (revision no:)	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Obligated
		Revised ²	Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	100,000	
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs	10,000	
8	1440 Site Acquisition		
9	1450 Site Improvement	40,000	
10	1460 Dwelling Structures	35,000	
11	1465.1 Dwelling Equipment—Nonexpendable	10,000	
12	1470 Non-dwelling Structures	50,000	
13	1475 Non-dwelling Equipment	20,000	
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities ⁴		

¹ To be completed for the Performance and Evaluation Report.

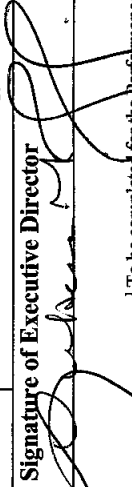

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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
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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

Part I: Summary		FFY of Grant: 2011	
PHA Name: Wyoming Housing Commission (MI115)	Grant Type and Number Capital Fund Program Grant No: M33P1150111 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	
Type of Grant	<input checked="" type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Revised Annual Statement (revision no:)	
	<input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Obligated Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)	265,000	
20	Amount of Annual Grant:: (sum of lines 2 - 19)		
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
			
Date		Date	
12-21-10			

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 CFFP Grants for operations.
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 Office of Public and Indian Housing
 OMB No. 2577-0226
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Part II: Supporting Pages		Federal FFY of Grant: 2011						
PHA Name: Wyoming Housing Commission (MI115)		Grant Type and Number Capital Fund Program Grant No: MI33P11550111 CEFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide	Operations	1406	100,000					
HA Wide	Fees/Costs	1430	10,000					
HA Wide	Site Improvement Asphalt/Concrete R&R	1450	35,000					
HA Wide	Site Improvement Landscaping	1450	5,000					
HA Wide	Building Envelope Items (Exterior)	1460	10,000					
HA Wide	Plumbing R & R	1460	10,000					
HA Wide	Dwelling Structure Flooring, Walls, & Ceiling	1460	5,000					
HA Wide	Heating Equipment	1460	10,000					
HA Wide	Appliances, screens, & other	1465	10,000					
HA Wide	Non-Dwelling Renovation of Office, Maintenance & Community Room	1470	50,000					
HA Wide	Office, Maintenance & Community Room Equipment	1475	15,000					
HA Wide	Upgrade Security System	1475	5,000					

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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Part II: Supporting Pages		Federal FFY of Grant: 2011						
PHA Name: Wyoming Housing Commission (M1115)		Grant Type and Number Capital Fund Program Grant No: MI33P11550111 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Federal FFY of Grant: 2011					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	

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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Part III: Implementation Schedule for Capital Fund Financing Program					Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates¹		
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	09/14/2012				

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.



Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary					
PHA Name/Number Wyoming Housing Commission		Wyoming, MI			
Development Number and Name	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
A. HA-Wide					
B. Physical Improvements Subtotal	Annual Statement	\$158,000.00	\$158,000.00	\$158,000.00	\$165,000.00
C. Management Improvements					
D. PHA-Wide Non-dwelling Structures and Equipment		\$7000.00	\$7000.00	\$7000.00	\$50,000.00
E. Administration					
F. Other – Fees & Cost, Site Acquisition		\$10,000	\$10,000	\$10,000	\$11,000
G. Operations		\$100,000.00	\$100,000.00	\$100,000.00	\$100,000.00
H. Demolition					4,000.00
I. Development					
J. Capital Fund Financing – Debt Service					
K. Total CFP Funds		\$275,000	\$275,000	\$275,000	\$265,000
L. Total Non-CFP Funds					
M. Grand Total		\$275,000	\$275,000	\$275,000	\$265,000

Capital Fund Program—Five-Year Action Plan

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

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012			Work Statement for Year 3 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	HA Wide 1406 Operations		\$100,000.00	HA Wide 1406 Operations		\$100,000.00
	HA Wide 1430 A/E Services		\$10,000.00	HA Wide 1430 A/E Services		\$10,000.00
	HA Wide 1450 Site Improvement Asphalt and concrete R&R		\$17,000.00	HA Wide 1450 Site Improvement Asphalt and concrete R&R		\$17,000.00
	HA Wide 1450 Site Improvement Landscape Improvement		\$5000.00	HA Wide 1450 Site Improvement Landscape Improvement		\$5000.00
	HA Wide 1460 Dwelling Structure Prepare Homes to Sell		\$4,000.00	HA Wide 1460 Dwelling Structure Prepare Homes to Sell		\$4,000.00
	HA Wide 1460 Building Envelope Items (Exterior)		\$60,000.00	HA Wide 1460 Building Envelope Items (Exterior)		\$60,000.00
	HA Wide 1460 Plumbing R&R		\$25,000.00	HA Wide 1460 Plumbing R&R		\$25,000.00
	HA Wide 1460 Dwelling Structure Flooring R&R		\$17,000.00	HA Wide 1460 Dwelling Structure Flooring R&R		\$17,000.00
	HA Wide 1465.1 Closet Doors		\$10,000.00	HA Wide 1465.1 Closet Doors		\$10,000.00
	HA Wide 1465.1 Heating Equipment R&R		\$20,000.00	HA Wide 1465.1 Heating Equipment R&R		\$20,000.00

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014			Work Statement for Year 5 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
Site	HA Wide 1406 Operations		\$100,000.00	HA Wide 1406 Operations		\$100,000.00
Annual	HA Wide 1430 A/E Services		\$10,000.00	HA Wide 1430 A/E Services		\$10,000.00
Statement	HA Wide 1440 Site Acquisition		\$1,000.00	HA Wide 1440 Site Acquisition		\$1,000.00
	1450 Site Improvement Asphalt and concrete R&R		\$17,000.00	HA Wide 1450 Site Improvement Asphalt and concrete R&R		\$17,000.00
	HA Wide 1450 Site Improvement Landscape Improvement		\$5000.00	HA Wide 1450 Site Improvement Landscape Improvement		\$5000.00
	HA Wide 1460 Dwelling Structure Prepare Homes to Sell		\$4,000.00	HA Wide 1460 Dwelling Structure Prepare Homes to Sell		\$4,000.00
	HA Wide 1460 Building Envelope Items (Exterior)		\$60,000.00	HA Wide 1460 Building Envelope Items (Exterior)		\$50,000.00
	HA Wide 1460 Plumbing R&R		\$25,000.00	HA Wide 1460 Plumbing R&R		\$25,000.00
	HA Wide 1460 Dwelling Structure Flooring R&R		\$17,000.00	HA Wide 1460 Dwelling Structure Flooring R&R		\$17,000.00
	HA Wide 1465.1 Closet Doors		\$10,000.00	HA Wide 1465.1 Closet Doors		\$10,000.00
	HA Wide 1465.1 Heating Equipment R&R		\$20,000.00	HA Wide 1465.1 Heating Equipment R&R		\$15,000.00

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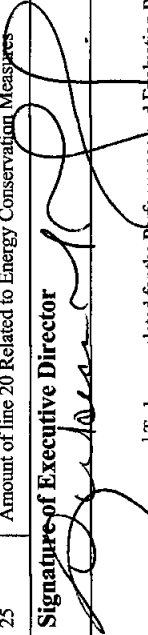
U.S. Department of Housing and Urban Development
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 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary		Grant Type and Number		FFY of Grant: 2010	
PHA Name: Wyoming Housing Commission (MI115)		Capital Fund Program Grant No: MI33P11550110		FFY of Grant Approval: \$262,599	
Date of CFFP:		Replacement Housing Factor Grant No:			
Type of Grant	Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:2)		
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Final Performance and Evaluation Report		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:			<input type="checkbox"/> Total Estimated Cost		
Line	Summary by Development Account	Original	Revised ²	Obligated	Total Actual Cost ¹
1	Total non-CFF Funds				Expended
2	1406 Operations (may not exceed 20% of line 21) ³	\$100,000	\$100,000	\$100,000	\$100,000
3	1408 Management Improvements	500	199	0	0
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000	25,000	0	0
8	1440 Site Acquisition	100	1,000	0	0
9	1450 Site Improvement	25,000	5,000	0	0
10	1460 Dwelling Structures	103,500	20,000	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	35,000	5,000	0	0
12	1470 Non-dwelling Structures	400	80,200	0	0
13	1475 Non-dwelling Equipment	500	16,200	0	0
14	1485 Demolition	0	10,000		
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

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Part I: Summary		FFY of Grant: 2010	
PHA Name: Wyoming Housing Commission (MI115)	Grant Type and Number Capital Fund Program Grant No: MI33P11550110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: \$262,599	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Revised ² Obligated Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$275,000	0
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
		Date 12.21.10	

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.
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Part II: Supporting Pages		Federal FFY of Grant: 2010						
PHA Name: Wyoming Housing Commission (MI15)		Grant Type and Number Capital Fund Program Grant No: MI33P11550110 CFFP (Yes/No): Yes Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide	Operations	1406		100,000	100,000	100,000	100,000	completed
HA Wide	Management Improvement	1408		500	199			
HA Wide	Fee/Costs	1430		10,000	25,000			
HA Wide	Site Acquisition	1440		100	1,000			
HA Wide	Asphalt/Concrete R & R	1450		25,000	3,000			
HA Wide	Building Envelope Items: Sidings, Roofs, Windows, Doors	1460		58,500	6,000			
HA Wide	Flooring R & R	1460		20,000	4,000			
HA Wide	Wall & Ceiling R & R	1460		10,000	3,000			
HA Wide	Plumbing R & R	1460		15,000	4,000			
HA Wide	Heating Equipment R & R	1460		20,000	3,000			
HA Wide	Closet Doors	1465.1		9,000	2,000			
HA Wide	Appliances R & R	1465.1		6,000	3,000			
HA Wide	Non-Dwelling Renovation of Office, Maintenance & Community Room	1470		0	80,000			
HA Wide	Sheds R & R	1470		400	200			
HA Wide	Tools	1475		500	200			
HA Wide	Office, Maintenance & Community Room Equipment	1475		0	16,000			
HA Wide	Landscaping/WHC Sign	1450		0	2,000			
HA Wide	Demolition	1485		0	10,000			

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

² To be completed for the Performance and Evaluation Report.

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

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

Part III: Implementation Schedule for Capital Fund Financing Program					Federal FFY of Grant: 2010	
PHA Name: Wyoming Housing Commission (M1115)						
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
HA Wide	9/14/2012	07/14/2012				

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.

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

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

Part I: Summary		Grant Type and Number		CFP Grant Amount \$263,486		FFY of Grant: 2009	
PHA Name: Wyoming Housing Commission (MI115)		Capital Fund Program Grant No: MI33P11550109		Replacement Housing Factor Grant No:		FFY of Grant Approval:	
Date of CFFP:		CFP Grant Amount \$263,486					
Type of Grant	Original	Revised ²	Obligated	Total Actual Cost ¹			
Line	Summary by Development Account	Original	Revised ²	Obligated			
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³	\$100,000	100,000	100,000	100,000		
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs	10,000	21,510				
8	1440 Site Acquisition						
9	1450 Site Improvement	5,000	2,000				
10	1460 Dwelling Structures	100,486	106,374.52	19,574.25	19,574.25		
11	1465.1 Dwelling Equipment—Nonexpendable	1,000	1,000	1,000	1,000		
12	1470 Non-dwelling Structures	7,000	6,440	6,440	6,440		
13	1475 Non-dwelling Equipment	40,000	26,161.48	26,161.48	26,161.48		
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities ⁴						

¹ To be completed for the Performance and Evaluation Report.

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

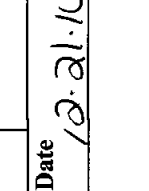
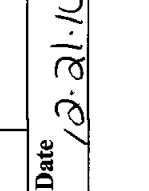
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2009	
PHA Name: Wyoming Housing Commission (MI115)	Grant Type and Number Capital Fund Program Grant No.: MI33P11550109	FFY of Grant Approval: CFP Grant Amount \$263,486	
Date of CFFP:			
Type of Grant			
<input type="checkbox"/> Original Annual Statement		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Obligated
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$263,486	153,175.73
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	7,000	6,400
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
			
Date		Date	
12.21.10		12.21.10	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: Wyoming Housing Commission (MI115)		Grant Type and Number Capital Fund Program Grant No: MI33P11550109 Grant Amount \$ 263,486 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide	Operations	1406		100,000	100,000	100,000	100,000	Completed
HA Wide	Fees/Costs	1430		10,000	21,510			Planning
HA Wide	Asphalt/Concrete	1450		5,000	2,000			Planning
HA Wide	Building Envelope Items : Siding, Roofs, Windows, Doors	1460		60,000	40,000	1,100	1,100	Planning
HA Wide	Flooring R&R	1460		5,486	10,325			Planning
HA Wide	Wall & Ceiling R&R	1460		10,000	12,000			Planning
HA Wide	Kitchen/Bathroom/Plumbing R & R	1460		15,000	34,048.52	12674.25	12,674.25	Planning
HA Wide	Heating Equipment R & R	1460		10,000	10,000	5,800	5,800	Planning
HA Wide	Appliances R & R	1465		1,000	1,000	1,000	1,000	Completed
HA Wide	Wheelchair Ramp	1470		7,000	6,440	6440	6440	Completed
HA Wide	Vehicle(s) for Maintenance	1475		40,000	26,162.48	26,162.48	26,162.48	Completed

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

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

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

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Wyoming Housing Commission (MII15)						
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
HA Wide	09/14/2011					

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

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Wyoming Housing Commission (MI115)

Program/Activity Receiving Federal Grant Funding

Public Housing

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 drug-free workplace through implementation of paragraphs a. thru f.

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

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 Gerald Snyder	Title Board Chair
Signature <i>Gerald Snyder</i>	Date 12-21-2010

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Wyoming Housing Commission (MI115)

Program/Activity Receiving Federal Grant Funding

Public Housing - Capital Fund Grant

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

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

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

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

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

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

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

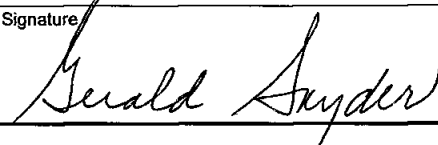
Name of Authorized Official

Gerald Snyder

Title

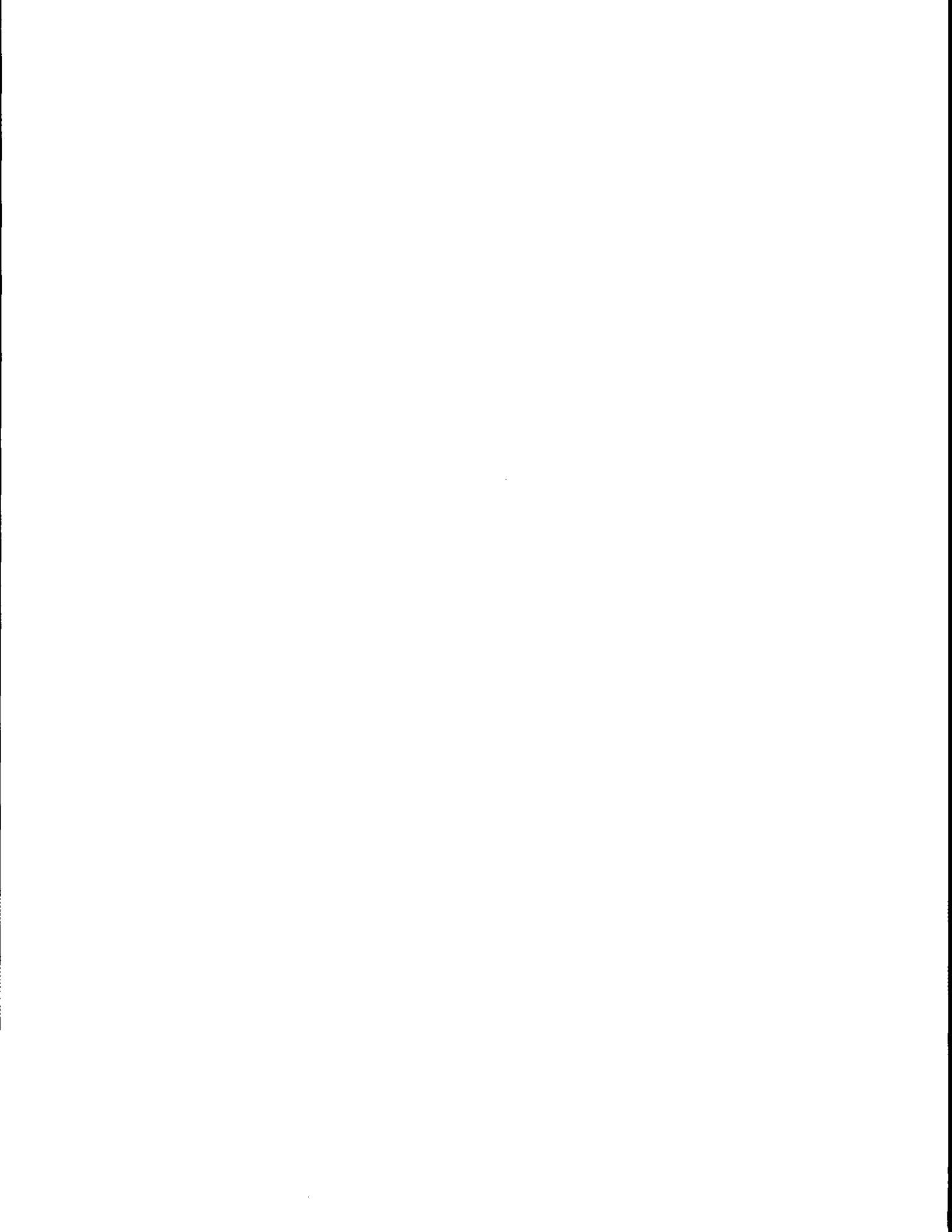
Board Chair

Signature



Date (mm/dd/yyyy)

12-21-2010



DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

Approved by OMB
0348-0046

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c 3rd	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Wyoming Housing Commission 2450 36th St SW Wyoming MI 49519 Congressional District, if known: 3rd	
6. Federal Department/Agency:	7. Federal Program Name/Description: MI33P11550109 & MI3391150110 CFDA Number, if applicable: _____	
8. Federal Action Number, if known: No Lobbying Acitivity	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Gerald Snyder</u> Print Name: <u>Gerald Snyder</u> Title: <u>Board Chair</u> Telephone No.: <u>616-534-5471</u> Date: <u>12-21-2010</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**RESIDENT ADVISORY BOARD MEETING
2450 36TH ST SW
HOUSING COMMUNITY ROOM
WEDNESDAY, SEPTEMBER 29, 2010 @ 1:00 PM
MINUTES**

Call to Order

An annual meeting of the Resident Advisory Board was held on September 29, 2010. Rebeca Geerling called the meeting to order at 1:08 PM.

Roll Call

Present: Rebeca Geerling, Charlotte Stowell, Christine Roelofs, Kim Ivy and Linda Pullian @ 1:30pm excused late arrival.

Rebeca presented the WHC 2011 Annual Plan, along with the Five-Year plan and mission of the agency. The goals and objective were discussed; Rebeca also explained the agencies Home Ownership and FSS programs for Section 8 and the benefits of community service obligations for participants in Public Housing.

Ms. Ivy had concerns of participants finding child care or locating volunteer work for the community service obligation. Ms. Ivy offered to research community service opportunities and will relay that information to Rebeca to draft a list of possible volunteer locations.

Ms. Geerling went over the agencies goals; including renovation of the administrative offices, the SEMAP score of 100% and how our agency assist those that are disable and how we meet the ADA requirements.

Ms. Pullian is a promoter of relocating or having an offsite office to relieve the high volume of traffic our agency receives from the residents that reside in our current location.

There were no questions or changes to the 2011 Annual Plan; therefore no further business was conducted.

A motion was made by, Kim Ivy and seconded by Linda Pullian.

Adjournment

The meeting was adjourned at 2:02 PM.


Rebeca M. Geerling
Digitally signed by Rebeca M. Geerling
DN: cn=Rebeca M. Geerling, ou=Wyoming Housing
Commission, ou=email=wyominghousing.com, c=US
Date: 2010.12.29 10:20:11 -0500

Rebeca Geerling
Executive Director
Wyoming Housing Commission

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year and/or Annual PHA Plan for the PHA fiscal year beginning 04-01-2011, 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 (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

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

Wyoming Housing Commission

MI115

PHA Name

PHA Number/HA Code

X _____ 5-Year PHA Plan for Fiscal Years 20¹¹ - 20¹⁵

X _____ Annual PHA Plan for Fiscal Years 20¹¹ - 20¹²

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)

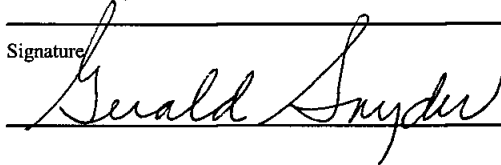
Name of Authorized Official

Gerald Snyder

Title

Board Chair

Signature



Date

12-21-2010

Civil Rights Certification

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

Civil Rights Certification**Annual Certification and Board Resolution**

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 Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency 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, and will affirmatively further fair housing.

Wyoming Housing Commission

MI115

 PHA Name

 PHA Number/HA Code

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)

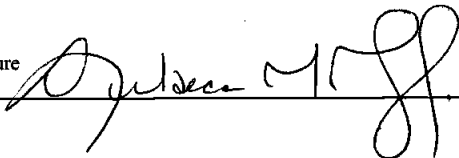
Name of Authorized Official

Rebeca M. Geerling

Title

Executive Director

Signature



Date

12-21-10

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

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

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

I, Rebecca Rynbrandt the Planning Director certify that the Five Year and
Annual PHA Plan of the Wyoming Housing Commission is consistent with the Consolidated Plan of
City of Wyoming prepared pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official

AFFIDAVIT OF PUBLICATION

ADVERTISER: Wyoming Housing Commission


REGARDS TO: Public Hearing

DATE: 11-02-11

AD SIZE: 2.00

PAPERS: Grand Valley & Southwest

I, Elizabeth Kettle, being duly sworn on her oath, as the Accounting Manager of the Advance Newspapers circulated in Kent and Ottawa Counties, public newspapers published in Jenison, Township of Georgetown, State of Michigan, in which advertisements were published in the above mentioned newspapers(s) on the date(s) and of the size as specified above.



**CITY OF WYOMING
NOTICE OF
PUBLIC HEARING**

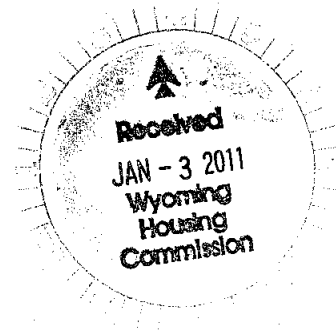
City of Wyoming, Wyoming Housing Commission (WHC). The WHC has set a public hearing for review of its 2011 annual plan for December 21, 2010 at 1:01 PM at the WHC Office, Community Room, located at 2450 36th St, RW, Wyoming, MI. The plan will be available for review from November 9, 2010 - December 20, 2010 at the office.

AM0047 m-2-10

Elizabeth Kettle
Elizabeth Kettle

Subscribed and sworn before me
January 3, 2011

Dawn L. Bogema
Dawn L. Bogema, Notary Public
Ottawa County
My commission expires November 1, 2013



**ENVIRONMENTALLY EXEMPT
HUD-FUNDED PROPOSAL
WYOMING HOUSING COMMISSION**

Project Name : Office Conversion II Project

Project Number : 201001

Project Location : 2450 36th St SW Wyoming MI 49519

Project Cost : \$110,000

Fiscal Year : July 1, 2010 to June 30, 2011

Project Description : Renovation of office facilities and reorganization and revised placement of office staff to provide groupings of staff with similar job descriptions to increase functionality and general office efficiencies. Cost estimates: HVAC - \$5,500, Doors - \$4,500, Walls - \$6,500, Paint - \$4,500, Carpet - \$5,000, Lighting - \$7,000, Windows - \$3,000, Electrical - \$4,000, Millwork - \$4,500, General items - \$2,500, IT Work - \$3,000, Bathroom upgrades - \$20,000, Office furniture - \$30,000, Contingency - \$10,000.

Responsible Entity : Wyoming Housing Commission 2450 36th St SW Wyoming MI 49519

Project Coordinator : Rebeca Geerling, Executive Director

Preparer : Patrick T. Gaffney, Community Development Coordinator
616-530-7219

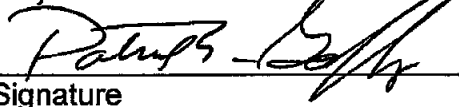
Exempt Citing : 58.35(a)(3)(ii)(A)-(C)
35 Categorical Exclusions
(a) Categorical Exclusions
(3) Rehabilitation of buildings
(ii) Multifamily
(A),(B),(C) meets all sections

Citing To Exempt, as follows:

24CFR34(a)(12)
34 Exempt activities
(a) Exempt activities...
(12) Categorical exclusions, provided that there are no circumstances which require compliance with any other Federal laws.

Project Environmental Determination Signature:

Project environmental determination made by:


Signature

6-30-2010
Date

Although this activity is determined to be exempt under 24CFR58.34, the requirements under § 58.6 may be applicable to § 58.35(b) and § 58.34 determinations. The following format is suggested to document compliance with § 58.6 in completing the environmental review process.

STATUTES and REGULATIONS listed at 24 CFR 58.6

FLOOD INSURANCE / FLOOD DISASTER PROTECTION ACT

1. Does the project involve the acquisition, construction or rehabilitation of structures, buildings or mobile homes?

No; flood insurance is not required. The review of this factor is completed.
 Yes; continue.

1. Is the structure or part of the structure located in a FEMA designated Special Flood Hazard Area?

No. Source Document (FEMA/FIRM floodplain zone designation, panel number, date): Zone X, Panel # 260111-0015 C, Dated 2/5/1992 (Factor review completed).
 Yes. Source Document (FEMA/FIRM floodplain zone designation, panel number, date): _____ (Continue review).

3. Is the community participating in the National Insurance Program (or has less than one year passed since FEMA notification of Special Flood Hazards)?

Yes - Flood Insurance under the National Flood Insurance Program must be obtained and maintained for the economic life of the project, in the amount of the total project cost. A copy of the flood insurance policy declaration must be kept in the Environmental Review Record.

No (Federal assistance may not be used in the Special Flood Hazards Area).

COASTAL BARRIERS RESOURCES ACT

1. Is the project located in a coastal barrier resource area?

No; Cite Source Documentation: Coast about 40 miles away
(This element is completed).
 Yes - Federal assistance may not be used in such an area.

AIRPORT RUNWAY CLEAR ZONES AND CLEAR ZONES DISCLOSURES

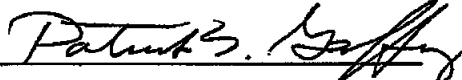
1. Does the project involve the sale or acquisition of existing property within a Civil Airport's Runway Clear Zone, Approach Protection Zone or a Military Installation's Clear Zone?

No; cite SD, page: Airport about 9 miles away
Project complies with 24 CFR 51.303(a)(3).

Yes; **Disclosure statement must be provided** to buyer and a copy of the signed disclosure statement must be maintained in this Environmental Review Record.

Preparer:

Name (print) : PATRICK T. GAFFNEY

Signature : 

Date : 6-30-2010

