



PHA Plans

Annual Plan for Fiscal Year 2011

Resolution # 4357 – Approved by the CMHA Board of Commissioners at the March 22, 2011 Board Meeting

PHA 5-Year and Annual Plan

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

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

1.0	PHA Information PHA Name: Cincinnati Metropolitan Housing Authority PHA Code: OH-004_____ 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): 07/2011				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 5293_____ Number of HCV units: 10598_____				
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: To provide quality affordable housing solutions by building partnerships with Hamilton County communities while strengthening and expanding housing opportunities for families to achieve self-sufficiency				
5.2	Goals and Objectives. Identify the PHA’s quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. Goals and Objectives: Strategic Goals <ul style="list-style-type: none"> • Develop 50 affordable housing units within Hamilton County outside the City of Cincinnati in partnership with communities. • Implement an aggressive marketing plan for CMHA. • Develop new revenue streams to help align CMHA’s business goals to improve sales execution through proven business development • Procure and implement a document imaging program throughout the agency. • Procure and implement the use of mobile computerized management hand held devices to receive, generate and complete work orders and UPCS inspections in the field via wireless or mobile communications. Annual Goals Improve Public Housing Management: (PHAS score) Continue to Improve PHAS score and maintain High Performer Status Improve Voucher Management: (SEMAP score) Continue to Improve SEMAP score and maintain High Performer Status Increase customer satisfaction: Ongoing Concentrate on efforts to improve specific management functions: <ul style="list-style-type: none"> • Train staff concerning SEMAP, PHAS, and other HUD regulations. • Review existing policies and procedures to incorporate all necessary 				

requirements and if warranted, develop written recommendations for policy revisions to the Board of Commissioners.

- Increase employee training to improve working knowledge of systems and processes.
- Develop working standards and processes that are consistent in each office.
- Procure and implement a document imaging program throughout the agency.
- Procure and implement the use of handheld inspection devices for the Housing Management Division.
- Procure and implement the use of electronic handheld work order devices for 10 percent of the maintenance staff.
- Review current delivery of services to measure their effectiveness.
- Reduce the amount of time it takes to respond and make routine repairs requested by customers.
- Achieve 98% occupancy rate in elderly communities.
- Promote resident and resident organization activities in the areas of resident organization, board training, leadership training, fire safety, child safety, and health.
- CMHA continues to provide training to staff and Board Commissioners relative to any new or revised policy or procedure mandated by HUD.
- Improve and expand our internal operations and our community outreach to attract more customers, qualified staff and additional revenue generating opportunities.

Renovate or modernize public housing units:

- Implement the Capital Fund Program schedule.
- CMHA will perform routine maintenance to assure that units are within UPCS compliance.
- CMHA will implement a sound preventive maintenance program to help extend the useful life of all systems and equipment.
- Complete 100% of scheduled fiscal year renovation projects on budget and on schedule.
- Identify staffing levels needed to address maintenance issues and PHAS Physical Management Scores through predictive and preventive preservation strategies.

CMHA Progress Report:

In 2010 CMHA accomplished the following:

- Established a consortium with local partners and submitted grant for NSP2 funds. The consortium was awarded 24 million dollars to build new Senior Housing.
- CMHA executed a Cooperative Agreement with the City of Mt. Healthy.
- HCV FSS program had 26 graduates in 2010.
- CMHA's Home Ownership program had 8 participants purchased homes in 2010.

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B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;
 Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.
For PHAs APPLYING FOR CAPITAL FUND PROGRAM (CFP) GRANTS:
 Form HUD-50070, Certification for a Drug-Free Workplace;
 Form HUD-50071, Certification of Payments to Influence Federal Transactions;
 Form SF-LLL & SF-LLLa, Disclosure of Lobbying Activities.

PHA Plan Update

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

- CMHA updated its Annual and Five Year Capital Grants.
- Financial Resources amounts have changed.
- Application date under Section 6.0(b) Designated Housing for Elderly and Disabled Families has changed.
- CHHA updated Section 7.0(b) Demolition/Disposition Activity.
- CMHA updated the Housing Needs of Families on the LIPH and HCV waiting list.

(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. **16 W Central Parkway, Cincinnati, OH 45214**

6.0

6.0(b)(1) Eligibility, Selection and Admissions policies, including Deconcentration and wait List Procedures
 See Attachment A

6.0(b)(2) Financial Resources

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2010 grants)		
a) Public Housing Operating Fund	\$32,682,058.00	
b) Public Housing Capital Fund	\$12,000,000.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	63,563,474.00	
f) Resident Opportunity and Self-Sufficiency Grants		
g) Community Development Block Grant		
h) HOME		
Other Federal Grants (list below)		
Family Self Sufficiency	\$332,780.00	Section 8 Supportive Services
NSP2	\$4,094,047.00	NSP2 development
2. Prior Year Federal Grants (unobligated funds only) (list below)		
a) Regional Opportunity Counseling	\$0	Section 8 Tenant Based Assistance
b) Family Self Sufficiency		Section 8 Supportive Services
c) Resident Opportunity and Self-sufficiency Grants	\$0	Public Housing Supportive Services
d) Capital	\$28,665,503.00	Public Housing Capital Improvements
e) HOPE VI Revitalization	\$800,000.00	
3. Public Housing Dwelling Rental Income		
a) Rental Income	\$9,253,090.00	Public Housing Operations
4. Other income (list below)		
a) Excess Utilities	\$392,030.00	Public Housing Operations
b) Non-dwelling Rental	\$78,157.00	Other

c) Interest & Other Income	\$586,099.00	Other
4. Non-federal sources (list below)		
Total resources	\$152,447,238.00	

Applicable & On Display	Supporting Document	Related Plan Component
X	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans.</i>	Standard 5 Year and Annual Plans; 5 Year Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan.	5 Year Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination and ACOP
X	Schedule of flat rents offered at each public housing development. <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination and ACOP
X	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any policies governing any Section 8 special housing types <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan:
X	Public housing grievance procedures <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures.	Annual Plan: Grievance

	<input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program (Section 19B of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
X	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional). List individually.	(Specify as needed)

6.0(b)(3) Rent Determination

CMHA's *Low Income Public Housing Admissions & Continued Occupancy Policy* contains the following policies governing rents charged for Low Income Public Housing (LIPH) dwelling units.

Low Income Public House (LIPH)

- Minimum Rent
 - \$50
- Earned Income Disregarded
 - Twenty percent of a residents earned income is disregarded.
 - Residents paying child support may receive a deduction of up to \$480 in their adjusted income for purposes of calculating rent.
 - 24-month earned income disallowance required by Section 3(d) of the Housing Act of 1937, as amended, 42 USC §1437a(d).
- Ceiling Rent
 - The ceiling rents have been set in a manner that encourages self-sufficiency and does not create disincentives for continued residency by families who are attempting to become economically self-sufficient.
- Change in Income Between Annual Reexamination
 - When combined income increases average in excess of \$100 per month

CMHA's *Housing Choice Voucher Section 8 Program Administrative Plan* contains the following policies governing rents charged for HCV dwelling units.

In accordance with HUD regulations, and at CMHA's discretion, the Voucher Payment Standard amount is set by CMHA between 90 percent and 110 percent of the HUD published FMR. This is considered the basic range. CMHA reviews the appropriateness of the Payment Standard annually when the FMR is published. In determining whether a change is needed, CMHA will ensure that the Payment Standard is always within the range of 90 percent to 110 percent of the new FMR, unless an exception payment standard has been approved by HUD.

CMHA may approve a higher payment standard within the basic range, if required as a reasonable accommodation for a family that includes a person with disabilities.

6.0(b)(4) Operation and Management

GENERAL MANAGEMENT POLICIES AND PROCEDURES

Parking Permit Procedures / Policy

Resident Screening Policy

Lease Enforcement Procedure

PHYSICAL/PROPERTY MANAGEMENT POLICIES

Requirements under Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794)

Deceased Tenant Procedure

Facilities Use Policy

Grievance Procedures

Pest Control Policy Policies for the prevention or eradication of pest infestation (including cockroach infestation)

Rent Collection Policy

Maintenance/Excess Charges Policy

Family choice Rents

Third Party Verifications

Levels of Hierarchy Verifications & Use of Verification Monitoring Procedure

Document Order of Resident File

Exigent Health and Safety Deficiencies

Inspection Procedures

Work Order Procedures

Unit Prep Procedure

ADMISSIONS POLICIES

Public Housing Admission and Continued Occupancy Policy Dwelling

Lease Agreement

Grievance Procedures

Screening Policy

Transfer Policy

Pet Policy

6.0(b)(5) Grievance Procedures

See Attachment B

6.0(b)(6) Designated Housing for Elderly and Disabled Families

In 2011, CMHA is planning to submit a Senior Designation application for Baldwin Grove, OH 004-62 and Regal Manor OH 004-047. Baldwin Grove is a newly constructed, 100 unit building, with one and two bedrooms units. The Regal Manor was constructed in 2002 and has 50 units consisting of 54 one and two bedroom units.

Development Name	Designation Type	Application Date	Approval Date	Number of units Affected
Baldwin Grove	OH 004-62	Submitting by 9/2011	N/A	100
Regal Manor	OH 004-047	Submitting by 9/2011	N/A	54

6.0(b)(7) Community Service and Self-Sufficiency

CMHA’s will continue to develop and promote strong working relationships with other social service providers so residents are identified and appropriately served.

- Promote a “we care” attitude to residents and the community so that they feel secure in bringing their concerns to us.
- Access all available federal, state, local and private foundation resources for the delivery and enhancement of needed residential services.
- Establish educational, training and employment opportunities as the principal objective in designing programs for assisting residents.
- Preserve the 501C3 Non-Profit status in order meet additional funding needs of the agency and resident services. Coordinate with local transportation companies and others to develop transportation services for working residents who are in need of transportation to and from work.

Senior/Disabled:

- Improve the quality of life for senior and disabled residents through onsite supportive services.
- Expand Senior and Disabled input on the Resident Council.
- Evaluate the need for increasing housing opportunities beyond independent living.

Family:

- Promote enrollment in progressive financial/social programs that promote self-sufficiency (FSS, Flat Rents, etc.)
- Develop a variety of growth and learning opportunities for the younger residents.
- Continue to evaluate waiting list applicants and provide services/linkages to other agencies to prevent homelessness.

6.0(b)(7)(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:

The overall goal of our Family Self Sufficiency (FSS) Program is to promote economic self-sufficiency through the coordination and delivery of existing community services.

The overall goal of the FSS Program is to achieve the following objectives:

- Introduce FSS to all families who are eligible to participate with the understanding that the commitment to change "begins from within."
- Implement a needs assessment to identify each family's strengths and the societal and individual barriers that impede their self-sufficiency.
- Establish interim goals for each family that establish a foundation for the final goal of economic self-sufficiency.

CMHA's goals for completion of the FSS Contract of Participation for each family include:

- To seek and maintain suitable employment;
- To become independent of welfare assistance and remain independent for 12 consecutive months before the FSS Contract expires; and
- To be in good standing with no current or anticipated debt to either the Housing Choice Voucher (HCV) Program or the Landlord.

The overall plan for the family participating in FSS is to achieve the following objectives:

- Begin to recognize the connection between self-perceptions and self-imposed limitations. By learning that thoughts can shape and form one's life, the prescription for success is to "begin within."
- Achieve a greater level of self-discipline, self-esteem and self-motivation by accepting responsibility for decisions and actions.
- Demonstrate commitment and accountability to the Individual Training and Services Plan in which both goals and barriers are assessed.

CMHA's FSS Coordinators must establish interagency partnerships to achieve high quality, long-term and comprehensive service delivery to all members of each FSS family. They are also required to meet with FSS participants annually to review goals and assess the accountability of the families and the agencies involved.

The entire HCV staff is encouraged to promote FSS during daily contact with families.

6.0(b)(8) Safety and Crime Prevention

6.0(b)(8)(i) A description of the need for measures to ensure the safety of public housing residents.

The CMHA has implemented multiple measures to gauge resident safety, both real and perceived.

Police calls for service, reported crime and arrest information is frequently queried against CMHA addresses to track the type of crime occurring on public housing property. Analyzing crime locations, dates and times allows us to gauge the increases or decreases in criminal activity on our property. The end result is information that allows us to tailor enforcement

programs to specific areas and ultimately work with local law enforcement, residents and employees to address the activity.

Perceived safety is of great importance and is continuously measured by staff. To better understand resident's concerns Security Operations employees regularly attend resident council meetings at various public housing properties to address security related questions and discuss proposed solutions. Resident surveys are used to gauge resident's feelings about the safety and security where they reside. These surveys provide residents with an avenue to express their opinions and share information anonymously.

6.0(b)(8)(ii) A description of any crime prevention activities conducted or to be conducted by the PHA.

A vast array of crime prevention programs, processes and activities are conducted by the CMHA Security Operations Division to address criminal activity and resident safety in public housing.

Trespass Program – The criminal trespass program is designed to address the number of non-residents loitering on public housing property to commit criminal or nuisance offenses. Non-residents that commit crime on or are arrested on CMHA public housing property are issued a trespass warning informing them that they are subject to prosecution for Criminal Trespass should they return to any CMHA property without authorization. CMHA staff and local law enforcement officers also issue trespass warnings to non-residents that are observed committing nuisance acts on CMHA property. Those issued trespass warnings are placed on the criminal trespass list and the list is updated monthly and provided to officers throughout the area for enforcement.

Trespass Sweeps – Random trespass sweeps are conducted in high crime areas to identify unauthorized persons loitering on public housing property to commit criminal offenses. This joint effort between CMHA Security Operations and local law enforcement departments not only reduces crime but also improves relationships with outside agencies and residents living in these communities.

Security Guards – Contracted unarmed uniformed security guards are assigned to monitor ingress and egress during evening and early morning hours at many CMHA's public housing hi-rise buildings. Visitors are identified and their entry and exit times are documented.

Secured Entry – Hi-rise buildings are equipped with electronic entries to regulate traffic. Resident identification cards allow them access to the buildings. Visitors are required to use an electronic call box to contact the person they are visiting. The resident is then able to activate the entry door to allow them in.

Parking Tow Services – CMHA public housing and office parking areas are monitored and regulated by a contracted tow service. Vehicles found to be in violation of CMHA's parking regulations are warned, documented and towed from the lot if necessary. This service is provided each day with a dedicated person that patrols the properties and locates violations. This program not only improves aesthetics but has also reduced the number of junk and stolen

vehicles abandoned on CMHA property.

Cameras – More than 150 cameras are used throughout public housing properties and office areas to monitor, deter and assist in the investigation of criminal and nuisance activity. Residents in hi-rise buildings can access cameras in their building through their television set. This access empowers residents and provides them with the means to report any suspicious or criminal activity they might observe taking place.

Resident Crime Prevention Training – Crime prevention and personal safety presentations are available to residents. These presentations are specific to CMHA public housing residents and the properties where they reside. Whether it is fire safety or identity theft prevention training CMHA Security Operations strives to provide interesting, relevant and useful information.

Surveillance – Local law enforcement agencies are provided with secure locations for surveillance purposes during drug investigations on and around public housing properties. Access to CMHA offices and vacant units allows them to observe activity, take enforcement action and ultimately reduce crime in the area.

Crime Mapping and Analysis – Crime analysis methods are used to map out crime data and better understand where and why crime is occurring on public housing property. The mapping aspect provides a visual reference while the analysis aspect helps us to focus on the specific areas so we can better allocate resources.

Police Detail Officers – Off duty police officers are often scheduled at public housing properties to provide additional security and prevent criminal activity. Officers working these details are proactive in enforcing the CMHA trespass policy and reducing crime through walking patrols and interaction with residents, visitors and employees.

CPTED – Crime Prevention Through Environmental Design principles are used when assessing pedestrian traffic, vehicle traffic, and property layouts. These principles are also used during construction projects and to improve current properties.

6.0(b)(8)(iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

The CMHA Security Operations Division takes pride in the relationships it has formed with local law enforcement agencies. These relationships have proven to be extremely valuable to both CMHA and the officers working in the communities. The coordination of enforcement and open sharing of information has created unique partnerships that allow us to obtain information that was once not readily available. This allows us to expedite enforcement of public housing violations to remove problematic households and improve safety in the community. Below are some of the joint programs that are in place to assist us with crime prevention.

Police Data – Many local agencies provide police calls for service, reported crime and arrest information to the Security Operations Division. This information is provided in an electronic database that allows us to compare the location of the police activity with public housing addresses. Connections between public housing addresses and residents are then further researched and forwarded to the property managers for lease enforcement.

L.E. Data Sharing Groups – Through our training and associations with local law enforcement staff have been able to take advantage of various “L.E.” only groups that share information on investigations and criminal activity taking place. The agencies involvement in these groups allows staff to assist outside agencies with their investigations in public housing and gives staff insight into the criminal activity being investigated.

Roll Call Training – Security Operations employees often attend and present information to local police officers during roll call at the beginning of their shifts. This unique opportunity allows staff to better understand what police are encountering during their daily patrols on agency property. This interaction allows us to be proactive and discuss solutions to potential problems.

Fugitive Units – Local fugitive warrant units and specialized task force units work hand in hand with CMHA Security Operations to locate wanted persons believed to be on public housing property. This coordination has led to numerous wanted subjects being located and removed from public housing, thus reducing unauthorized persons and reducing crime.

Right-of-Entry Agreements – Agreements have been put in place authorizing all law enforcement departments to enforce criminal trespass policies on public housing property.

Trespass Sweeps – Random trespass sweeps are conducted in high crime areas to identify unauthorized persons loitering on public housing property to commit criminal offenses. This joint effort between CMHA Security Operations and local law enforcement departments not only reduces crime but also improves relationships with outside agencies and residents living in these communities.

Training Locations for Specialized Units – Local specialized law enforcement units are provided access after normal business hours to CMHA offices and vacant public housing properties to perform training in the area of building searches, article location and suspect tracking. These units benefit from the use of the properties and in return provide a free-of-charge police presence on agency property.

CMHA Information – CMHA Security Operations database information is made readily available to all local law enforcement officers. This access is a beneficial tool to officers and investigators attempting to locate suspects. This collaboration also allows CMHA Security Operations to obtain information and receive additional assistance in our crime prevention efforts.

6.0(b)(9) Pets

See Attachment C

6.0(b)(10) Civil Rights Certification

See related documents in section 11.0

6.0(b)(11) Fiscal Year Audit

See Attachment D

6.0(b)(12) Asset Management

CMHA's capital management approach focuses on the best mix of investments needed to achieve the Agency's goals while minimizing risk and maximizing the cost-effectiveness and performance of its assets. CMHA strives to maximize the practical and financial value of all capital assets by appropriate strategic determinations. Through well thought-out assessments of acquisitions, allocations, operations, and dispositions in collaboration with sound financial tools, such as, capital investment processes, alternative analysis, strategic linkage, life-cycle costing, and other performance measures, the agency improves its odds to reach favorable outcomes.

This approach enables CMHA to improve coordination, management of capital assets and provides a single consolidated view of all capital investments in the Agency's portfolio. Additionally, those tools and capabilities allow CMHA to capitalize on the value of its portfolio while providing balance and the assurance of investments that meet CMHA's goals and overall mission.

6.0(b)(13) Violence Against Women Act (VAWA)

Agency Implementation of Provisions of the VAWA (LIPH)

CMHA has an on-going collaboration with caseworkers from the YWCA, which is the agency that runs the battered women's shelter in this jurisdiction. The YWCA routinely refers their clients for admission to the public housing program.

The agency policy has been featured in the newsletter that is sent to all residents. During the coming year, it will be featured again. Additionally, the staff social workers who work directly with residents who have been victims of domestic violence are well-versed on the policy and the procedures.

Each property manager and social worker receives a monthly report of all police calls for service to their assigned properties. This report is a valuable tool in alerting staff to potential domestic violence situations, and the social workers follow-up with families as a result of reviewing this information.

In the coming year, we will be working with the YWCA to explore further opportunities to possibly provide transitional housing for victims of domestic violence. Additionally, we will be working with their staff to provide a training program for all property management staff on issues and indicators of domestic violence.

Violence Against Women Act-Housing Choice Voucher Section 8 Program

The following provisions are applicable to situations involving actual or threatened domestic violence, dating violence, or stalking, as those terms are defined in Section 6(u)(3) of the United States Housing Act of 1937, as amended, (42 U.S.C. §1437d(u)(3)) and in the Violence Against Women Act (VAWA) Policy.

TERMINATION OF TENANCY

1. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking shall not constitute a serious or repeated violation of the lease by the victim of

such violence; and

2. Criminal activity directly relating to domestic violence, dating violence or stalking, engaged in by a member of the Tenant's household, a guest, or other person under the Tenant's control, shall not be cause for termination of participation or occupancy rights, if the Tenant or any member of the Tenant's family is a victim of that domestic violence, dating violence, or stalking.

Notwithstanding anything to the contrary contained in items 1 and 2 above, CMHA may terminate a tenant's tenancy under this lease if it can demonstrate an actual and imminent threat that may result to other tenants or to those employed at or providing service to the property in which the unit is located, if the Tenant's tenancy is not terminated.

Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. *Include statements related to these programs as applicable.*

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

CMHA is currently pursuing a cooperation agreement with Hamilton County. The cooperation agreement is critical to the success of the development of affordable housing in Hamilton County.

CMHA is developing an affordable housing development within Hamilton County with NSP2 funds. These activities will consist of purchasing multiple distressed properties (vacant, foreclosed and abandoned), demolishing the existing structures and replacing with a 50 +/- unit low rise senior building.

CMHA is also considering a mixed finance project located within Hamilton County. With the funds, CMHA plans to develop 100 +/- units of tax credit, public and affordable housing.

CMHA plans to pursue acquisition of 15 units for public housing. While some of the acquisitions may be rehabilitated and placed in service, these acquisitions may also consist of distressed properties, demolition of housing and in-fill with new structures.

CMHA is considering repurposing existing under-used, non-dwelling space to further resident employment. The goals of this development would be to improve outcomes for tenants and create additional revenue for CMHA.

CMHA is planning on unit conversion to 504 compliance. These units will be located throughout Hamilton County providing additional accessibility options for the families we serve.

7.0

7.0(b) Demolition and /or Disposition

Demolition/Disposition Activity Description
1a. Development name: Grandview
1b. Development (project) number: OH004-39
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: 09/2011
5. Number of units affected: Land Only
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 10/2011 b. Projected end date of activity: 6/2012 c. Disposition of the Grandview property with a planned application date of 9/2011. The disposition plan is for land only and is part of development OH004-39. The projected start date of activity is 2011 with an end date 2012.

Demolition/Disposition Activity Description

1a. Development name: 3587 Purdue

1b. Development (project) number: OH004-23 AMP208

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 12/09/2010

5. Number of units affected: 1

6. Coverage of action (select one)

Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2011
b. Projected end date of activity: 9/2012
c. Demolition of Purdue unit with a Submitted application date of 12/09/2010 and a projected end date of 6/2012. The planned activity is to demolish the unit and re-build the unit with similar amenities on vacant land currently owned by the Authority using RHF funds for construction.

Demolition/Disposition Activity Description

1a. Development name: 3544 Haven Street

1b. Development (project) number: OH004-23 AMP 208

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 12/09/2010

5. Number of units affected: 1

6. Coverage of action (select one)

Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2011
b. Projected end date of activity: 6/2012
c. Demolition of Haven unit with a Submitted application date of 12/09/2010 and a projected end date of 6/2012. The planned activity is to demolish the unit and re-build the unit with similar amenities on vacant land currently owned by the Authority using RHF funds for construction.

Demolition/Disposition Activity Description

1a. Development name: MILLVALE OH-06

1b. Development (project) number: OH004-06 AMP 217

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: (06/01/07)

5. Number of units affected: 44

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: Est. 04/2008
b. Projected end date of activity: Est. 06/2011
c. Demolition of 44 units with an approved demolition application. Demolition is only part of the Millvale North development. Start date of activity 4/2008 with a projected end date of 6/2011.

Demolition/Disposition Activity Description

1a. Development name: ROCKDALE

1b. Development (project) number: OH004-40 AMP 208

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 9/2011

5. Number of units affected: 12

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: Est. 09/2012
b. Projected end date of activity: Est. 09/2013
c. Disposition of the Rockdale properties with a planned application date of 9/2011. The disposition plan is for buildings and land and is part of development OH004-40. The projection start date of activity 2012 with an end date 2013. The monies obtained from the disposition sale along with RHF funds will be used to purchase 12 units with similar amenities.

Demolition/Disposition Activity Description

1a. Development name: 2821 Rosella Ave.

1b. Development (project) number: OH004-40 AMP 201

2. Activity type: Demolition

Disposition

3. Application status (select one)

Approved

Submitted, pending approval

Planned application

4. Date application approved, **submitted**, or planned for submission: 12/9/2010

5. Number of units affected: 1

6. Coverage of action (select one)

Part of the development

Total development

7. Timeline for activity:

a. Actual or projected start date of activity: 9/2011

b. Projected end date of activity: 9/2012

c. Demolition of Rosella unit with a submitted application date of 12/09/2010 and a projected end date of 9/2012. The planned activity is to demolish the unit and re-build the unit with similar amenities on the existing site using RHF funds for construction.

Demolition/Disposition Activity Description

1a. Development name: 68-70 Warren

1b. Development (project) number: OH004-59 AMP 204

2. Activity type: Demolition

Disposition

3. Application status (select one)

Approved

Submitted, pending approval

Planned application

4. Date application approved, **submitted**, or planned for submission: 12/09/2010

5. Number of units affected: 2

6. Coverage of action (select one)

Part of the development

Total development

7. Timeline for activity:

a. Actual or projected start date of activity: 9/2011

b. Projected end date of activity: 9/2012

c. Demolition of Warren unit with a submitted application date of 12/2010 and a projected end date of 9/2012. The planned activity is to demolish the unit and re-build the unit with similar amenities on vacant land currently owned by the Authority using RHF funds for construction.

Demolition/Disposition Activity Description

1a. Development name: 518 Rosemont

1b. Development (project) number: OH004-59 AMP 205

2. Activity type: Demolition

Disposition

3. Application status (select one)

Approved

Submitted, pending approval

Planned application

4. Date application approved, submitted, or planned for submission: 12/09/2010

5. Number of units affected: 2

6. Coverage of action (select one)

Part of the development

Total development

7. Timeline for activity:

a. Actual or projected start date of activity: 9/2011

b. Projected end date of activity: 9/2012

c. Demolition of Rosemont unit with a Submitted application date of 12/09/2010 and a projected end date of 9 /2012. The planned activity is to demolish the unit and re-build the unit with similar amenities on vacant land currently owned by the Authority using RHF funds for construction.

Demolition/Disposition Activity Description

1a. Development name: 1341 Crotty Ct

1b. Development (project) number: OH004-51 AMP 202

2. Activity type: Demolition

Disposition

3. Application status (select one)

Approved

Submitted, pending approval

Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 2

6. Coverage of action (select one)

Part of the development

Total development

7. Timeline for activity:

a. Actual or projected start date of activity: 9/2011

b. Projected end date of activity: 9/2012

c. Reduction of bedroom size in two units. Reduce two units from 3 bedrooms to 2bedrooms

Demolition/Disposition Activity Description

1a. Development name: Millvale OH-06
1b. Development (project) number: OH004-06 AMP 217

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 18

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to demolish the units and re-build units off site with vacant land currently owned by the Authority using RHF funds for construction.

Demolition/Disposition Activity Description

1a. Development name: Millvale OH-05
1b. Development (project) number: OH004-05 AMP 217

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 24

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to demolish the units and re-build units off site with vacant land currently owned by the Authority using RHF funds for construction.

Demolition/Disposition Activity Description

1a. Development name: 211 E. Broadway

1b. Development (project) number: OH004-58 AMP 207

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1 Linden

1b. Development (project) number: OH004-45 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1754 Catalina

1b. Development (project) number: OH004-30 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 2329 Glenside

1b. Development (project) number: OH004-45 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 3639 Besuden

1b. Development (project) number: OH004-43 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 8115 Camner

1b. Development (project) number: OH004-51 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1421 Larry Joe
1b. Development (project) number: OH004-51 AMP 202

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 6729 Pecos
1b. Development (project) number: OH004-46 AMP 202

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 7004 Valley

1b. Development (project) number: OH004-44 AMP 202

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 7110 Monongahela

1b. Development (project) number: OH004-44 AMP 202

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 7125 Monongahela
1b. Development (project) number: OH004-44 AMP 202

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 3337 Cardiff
1b. Development (project) number: OH004-40 AMP 203

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 3633 Columbia
1b. Development (project) number: OH004-30 AMP 203

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 3711 Carlton
1b. Development (project) number: OH004-44 AMP 203

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 4000 Eileen

1b. Development (project) number: OH004-30 AMP 203

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1005 Tuscarora

1b. Development (project) number: OH004-45 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1220 Sunrise

1b. Development (project) number: OH004-44 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)

Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1600 Hunt Rd

1b. Development (project) number: OH004- AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)

Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 4198 Klugler Mill

1b. Development (project) number: OH004-51 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 4556 Cooper

1b. Development (project) number: OH004-51 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 533 Park Avenue

1b. Development (project) number: OH004-45 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 540 Maple

1b. Development (project) number: OH004-51 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 619 Maple
1b. Development (project) number: OH004-51 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 723 McLaren
1b. Development (project) number: OH004-44 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 807 Marbea

1b. Development (project) number: OH004-46 AMP 204

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 338 E State Rd

1b. Development (project) number: OH004-44 AMP 205

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 8 Miami

1b. Development (project) number: OH004-58 AMP 205

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 211 E. Broadway

1b. Development (project) number: OH004-58 AMP 207

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 212 Whitewater
1b. Development (project) number: OH004-44 AMP 207

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 303 Weathervane
1b. Development (project) number: OH004-51 AMP 207

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 307 Weathervane

1b. Development (project) number: OH004-44 AMP 207

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 522 Harrison Avenue

1b. Development (project) number: OH004-51 AMP 207

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 2

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 97 Whippoorwill Drive

1b. Development (project) number: OH004-44 AMP 207

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1708 Race Street

1b. Development (project) number: OH004-39 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 7

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1714 Race Street

1b. Development (project) number: OH004-43 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 2

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1716 Race Street

1b. Development (project) number: OH004-39 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 7

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 1726 Race Street

1b. Development (project) number: OH004-39 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 7

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 122 E McMicken

1b. Development (project) number: OH004-40 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 2

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 130 E McMicken

1b. Development (project) number: OH004-40 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 3

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 7 E McMillian

1b. Development (project) number: OH004-40 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 4

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 2254 Flora

1b. Development (project) number: OH004-40 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 2308 Victor Street

1b. Development (project) number: OH004-40 AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

Demolition/Disposition Activity Description

1a. Development name: 2310 Victor Street

1b. Development (project) number: OH004- AMP 201

2. Activity type: Demolition
Disposition

3. Application status (select one)
Approved
Submitted, pending approval
Planned application

4. Date application approved, submitted, or planned for submission: 09/2011

5. Number of units affected: 1

6. Coverage of action (select one)
 Part of the development
 Total development

7. Timeline for activity:
a. Actual or projected start date of activity: 9/2012
b. Projected end date of activity: 6/2013
c. The planned activity is to sell the building and use funds to purchase multi family properties to improve economies of scale.

7.0(c) Conversion of Public Housing

Not Applicable

7.0(d) Homeownership

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

The HCV Homeownership Program permits eligible participants in the HCV Program the option of purchasing a home with their HCV assistance. In accordance with the HCV Homeownership Program regulations published in 24 CFR 982 and CMHA's plans to promote self-sufficiency, asset development, and economic security for assisted households, CMHA established a HCV Homeownership Program in April 2002. Since inception, staff has assisted in 42 homeownership closing, and there are currently 34 participants who are still using voucher assistance to help pay their mortgage.

The policies governing the program are reevaluated at least annually as part of CMHA's Annual Plan.

Participation in the Homeownership Program is voluntary. Each participant must meet the general requirements for participation in the HCV Program. Participation is open to all families, including elderly and disabled

families. An attempt will be made to have a mix of Family Self-Sufficiency (FSS), elderly, and disabled families participate in the program. Eligible applicants (including participants with portable vouchers) must be under lease in the HCV Program. CMHA may waive this requirement for a disabled family who requires reasonable accommodation for their housing and is eligible for admission to the HCV Program. Applicants must be in good standing with CMHA; must be in full compliance with their lease and HCV Program Family Obligations; and must meet HCV Homeownership Program family eligibility requirements.

To be eligible to participate in the HCV Homeownership Program, families must meet all the following initial eligibility requirements:

- Be a first-time home buyer
- Meet minimum income requirements as defined in CMHA's

Administrative Plan

- Meet employment requirements as defined in CMHA's Administrative Plan
- Be in good standing with CMHA
- Meet minimum savings requirements as defined in CMHA's Administrative Plan

CMHA intends to apply for a homeownership program for Public Housing.

7.0(e) Project-based Vouchers

CMHA currently has approximately 2% of its Vouchers invested in Project-Based Vouchers (PBVs) throughout Hamilton County. The goal over the next 5 years is to increase that number up to 10%. CMHA will use the conversion of HCV to PBV to meet the housing needs of special-needs populations through financially supporting the collaboration of private and non-profit partnerships that result in specific and comprehensive housing and service provisions. The additional PBV's will provide avenues for partnership with the City of Cincinnati and/or Hamilton County to support the preservation of vital housing communities that are pivotal to the local jurisdictional area and/or the submarket of the community's locality.

Further, this transition to PBV's could have a decidedly positive impact on the deconcentration of very, very low-income housing (incomes less than 30% of AMFI) in Hamilton County. Such households comprise more than half of housing units in seven City of Cincinnati neighborhoods. The expansion of PBV's will continue to promote the expansion of quality affordable housing opportunities for low and moderate-income families.

8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. See Attachment E
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See Attachment F
8.3	Capital Fund Financing Program (CFFP). <input checked="" 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. CMHA already has a CFFP program and has pledged 1,536,699 of this grant period's funds for debt services on this CFFP loan.

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

**Housing Needs of Families in the Jurisdiction
by Family Type**

Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	30,294	5	5	2	5	4	5
Income >30% but <=50% of AMI	16,931	5	5	2	5	4	5
Income >50% but <80% of AMI	19,897	5	5	2	5	4	5
Elderly	14,215	5	5	2	5	4	5
Families with Disabilities	25,416	5	5	2	5	4	5
Race/Black (<=80AMI)	35,680	5	5	2	5	4	5
Race/White (<=80AMI)	28,085	5	3	2	3	3	1
Race/Asian P.I. (<=80AMI)	1175	5	5	2	5	4	5
Race/Am. Indian (<=80AMI)	200	5	5	2	5	4	5
Hispanic (<=80AMI)	850	5	5	2	5	4	5

Sources of information used to conduct the Housing Needs Analysis:

City of Cincinnati Consolidate Plan 2010-2014

Consolidated Plan of the Jurisdiction 2010-2014

U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) 2000

9.0

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.

Housing Needs of Families on the PHA's Waiting Lists

Waiting list type: (select one)

- Section 8 tenant-based assistance
 - Public Housing
 - Combined Section 8 and Public Housing
 - Public Housing Site-Based or sub-jurisdictional waiting list (optional)
- If used, identify which development/subjurisdiction

	# of families	% of total families	Annual Turnover
Waiting list total	1639		1183
Extremely low income <=30% AMI	1526	93.11%	
Very low income (>30% but <=50% AMI)	97	5.92%	
Low income (>50% but <80% AMI)	16	.97%	
Families with children	1273	77.67%	
Elderly families	25	1.53%	
Families with Disabilities	78	4.73%	
Race/ethnicity: White	250	15.25%	
Race/ethnicity: Black	1376	83.95%	
Race/ethnicity: Native American	4	.24%	
Race/ethnicity: Asian	9	.55%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	443	27.03	
2 BR	919	56.07	
3 BR	191	11.65	
4 BR	65	3.97	
5 BR	16	.98	
5+ BR	5	.31	

Is the waiting list closed (select one)? No Yes

If yes:

HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)? 2

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes (e.g., specific bedroom sizes may be left open)

9.1

Housing Needs of Families on the PHA's Waiting Lists

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)
 If used, identify which development/subjurisdiction

	# of families	% of total families	Annual Turnover
Waiting list total	(a) 2503		
Extremely low income <=30% AMI	2069	82.66%	
Very low income (>30% but <=50% AMI)	353	14.10%	
Low income (>50% but <80% AMI)	73	^(b) 2.92%	
Families with children	1895	75.71%	
Elderly families	9	.36%	
Families with Disabilities	32	1.28%	
Race/ethnicity: White	96	3.84%	
Race/ethnicity: Black	2400	95.88%	
Race/ethnicity: Native American	2	.08%	
Race/ethnicity: Asian	2	.08%	
Race/ethnicity: Other or Not Available	3	.12%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

(a) As of April 8, 2011, CMHA has added 13,000 families to its 2011 Wait List, in addition to the 2,503 noted above.

(b) The percentages will not total 100% because applicants on the waiting list with income that exceeds 80% of AMI are not represented. An applicant's income is not verified until the family is screened for eligibility.

Is the waiting list closed (select one)? No Yes

If yes:

HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)? 2

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes

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.

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

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

"Significant Amendment" is defined as follows:

A significant amendment or modification to the annual plan is a change in the major strategies to address Housing Needs or changes in Admissions & Occupancy. The following are not considered significant amendments:

1. Changes in Public Housing Admissions & Occupancy Policies or the Section 8 Administrative Plan that are not inconsistent with the Annual Plan.
2. Changes in Public Housing Admissions & Occupancy Policies or the Section 8 Administrative Plan that are required by federal, state, or local authorities, including laws and regulations.
3. A minor change in the planned uses of financial resources (e.g., small shifts within or between different funding categories).
4. Changes in the plan resulting from consultation with Consolidated Plan authorities including the City of Cincinnati and Hamilton County, Ohio.
5. Changes that are the result of the loss of anticipated funding to support a specific proposed activity or program.
6. Changes that are due to factors outside of CMHA's control such as natural or man-made disasters that require the redirection of resources to address emerging issues.
7. Technical amendments to correct grammar and spelling mistakes; to adjust the language in the plan document to match the intended board policy as documented by board resolutions and minutes that inadvertently omitted or misstated in the existing plan document; or

to update the plan to provide more accurate information that does not impact policies such as corrections to reports on past activities and statistics on housing and population characteristics.

“Substantial Deviation” is defined as follows:

Additions of non-emergency work items (items not included in the Annual statement or 5-year Action plan) or change in use of replacement reserve funds under Capital Fund.

Any change with regard to demolition or disposition, designation, homeowner programs or conversion activities

Fundamental alteration of the goals, mission or objectives of CMHA

- 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. See Attachment G
- (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)
 - (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
 - (g) Challenged Elements
- See Attachment G** for (A, B, C, D, E,F,G)
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)



CINCINNATI METROPOLITAN HOUSING AUTHORITY

FIVE YEAR PLAN 2011-2015

ANNUAL PLAN FY 2011

ATTACHMENT A

ELIGIBILITY, SELECTION and ADMISSIONS POLICIES, including
DECONCENTRATION and WAIT LIST PROCEDURES

CMHA's Low Income Public Housing Admissions & Continued Occupancy Plan contains the following policies governing eligibility, selection and admission to all LIPH programs administered by CMHA.

Affirmative Marketing

1. CMHA will conduct outreach as needed to maintain an adequate application pool representative of the eligible population in the area. Outreach efforts will consider the level of vacancy in the CMHA's units, availability of units through turnover, and waiting list characteristics. CMHA will periodically assess these factors in order to determine the need for and scope of any marketing efforts. All marketing efforts will include outreach to those least likely to apply.
2. **Marketing and informational materials will be subject to the following:**
 - a. Marketing materials will comply with Fair Housing Act requirements on wording, logo, size of type, etc.;
 - b. Marketing will describe the housing units, application process, waiting list and preference structure accurately;
 - c. Marketing will use clear and easy to understand terms and will use more than strictly English-language print media;
 - d. Agencies that serve and advocate for potentially qualified applicants least likely to apply (e.g. the disabled) will be contacted to ensure that accessible/adaptable units are offered to applicants who need their features;
 - e. Marketing materials will make clear who is eligible: low income individuals and families; working and non-working people; and people with both physical and mental disabilities; and
 - f. CMHA will be clear about its responsibility to provide reasonable accommodations to people with disabilities.

Qualification for Admission

1. It is CMHA's policy to only admit qualified applicants¹.
2. **An applicant is qualified if he or she meets all of the following criteria:**
 - a. Is a family as defined in Section XII of this policy;
 - b. Meets the HUD requirements on citizenship or immigration status;
 - c. Has an Annual Income (as defined in Section XI of this document) at the time of admission that does not exceed the income limits (maximum incomes by family size established by HUD) posted in CMHA offices.

¹ The term "qualified" refers to applicants who meet the applicant selection standards. Eligibility is a term having specific meaning under the Housing Act of 1937. In order to be eligible, a family must meet four tests: (1) they must meet HA's definition of family; (2) have an Annual Income at or below program guidelines; (3) each family member, age 6 or older, must have a social security number or certify that he/she has no number; and (4) each family member receiving assistance must be a citizen or non-citizen with eligible immigration status.

- d. Provides documentation of Social Security numbers for all family members, age 6 or older, or certifies that they do not have Social Security numbers; and
- e. Meets or exceeds the Applicant Selection Criteria set forth in Section II. F. of these policies, including attending and successfully completing a CMHA-approved pre-occupancy orientation session;
- f. Has the legal capacity to execute a lease.

Waiting List Management

1. It is the policy of CMHA to administer its waiting list as required by the regulations. (24CFR §§5.4, 5.5, 5.6, 960.201 - 960.215).

2. Opening and Closing Waiting Lists

- a. CMHA, at its discretion, may restrict application intake, suspend application intake, and close waiting lists in whole or in part. CMHA may open or close the list for persons with a high preference category, or by unit size or type available. See (c) below.
- b. For any unit size or type, if CMHA's highest waiting list preference category has sufficient applications to fill anticipated vacancies for the coming 12 months, CMHA may elect to: (a) close the waiting list completely; (b) close the list during certain times of the year; or (c) restrict intake by preference, type of project, or by size and type of dwelling unit.
- c. Decisions about closing the waiting list will be based on the number of applications available for a particular size and type of unit, the number of applicants who qualify for a preference, and the ability of CMHA to house an applicant in an appropriate unit within a reasonable period of time (between twelve and eighteen months). A decision to close the waiting lists, restricting intake, or opening the waiting lists will be publicly announced.
- d. During the period when the waiting list is closed, CMHA will not maintain a list of individuals who wish to be notified when the waiting list is re-opened.

3. Determining if the Waiting List may be Closed

CMHA may stop accepting applications for a specific wait list site, unit type or unit size, if there are enough applications to fill anticipated vacancies for the next 12 months. The wait list may not be closed if it would have a discriminatory effect inconsistent with applicable civil rights laws.

Upon the reopening of the waiting list, CMHA will advertise through public notice.

4. Updating the Waiting List

CMHA will update each waiting list at least once a year by contacting all applicants in writing². If, after two written attempts³ no response is received, or if mail is returned without a forwarding address, CMHA will withdraw the names of applicants from the waiting list. At the time of initial intake, CMHA will advise families of their responsibility to notify CMHA when their income, mailing address, phone numbers, or family composition changes.

CMHA will not remove an applicant's name from the waiting list except in accordance with the procedures as stated herein.

5. Change in Preference Status While on the Waiting List

² Applicants with disabilities may be contacted by an alternate method as requested.

³ Written communications will be sent by first class mail.

- a) Families on the waiting list who did not qualify for a local or ranking preference when they applied may experience a change in circumstances that qualifies them for a preference. In such instances, it will be the family's duty to contact CMHA so that their status may be recertified or, depending on application processing status, re-verified. Applicants whose preference status changes while they are on the waiting list will retain their original date and time of application.
- b) To the extent that CMHA determines that the family does now qualify for a preference, they will be moved up on the waiting list in accordance with their preference(s) and their date and time of application. They will then be informed in writing of how the change in status has affected their place on the waiting list.

Processing Applications for Admission

1. CMHA will accept and process applications in accordance with applicable HUD Regulations and CMHA's Admissions and Continued Occupancy Policy. CMHA will work on the assumption that the facts certified to by the applicant in the preliminary application are correct, although all those facts will be subject to verification later in the application process.
2. Interviews and Verification Process: As applicants approach the top of the waiting list, they will be contacted and requested to come to CMHA's Leasing Office for an interview to complete their applicant file. Applicants who fail to attend their scheduled interview or who cannot be contacted to schedule an interview will have their applications withdrawn, subject to reasonable accommodations for people with disabilities.
 - a. The following items will be verified according to CMHA's *Procedure on Verification*, to determine qualification for admission to CMHA's housing:
 - (1) Family composition and type (Elderly/Disabled/near-elderly /non-elderly)
 - (2) Employment History
 - (3) Annual Income
 - (4) Assets and Asset Income
 - (5) Deductions from Income
 - (6) Preferences
 - (7) Social Security Numbers of all Family Members age 6 and above
 - (8) Information used in applicant selection
 - (9) Citizenship or eligible immigration status
 - b. Third party written verification is the preferred form of documentation to substantiate applicant or resident claims. CMHA may also use: (1) up-front verifications (UIV) which may include obtaining computerized information from an independent agency; (2) phone verifications with the results recorded in the file, dated, and signed by CMHA staff; (3) review of documentation, and, if no other form of verification is available, (4) applicant self-certification. Applicants must cooperate fully in obtaining or providing the necessary verifications.
 - c. Verification of eligible immigration status shall be carried out pursuant to 24 CFR § 5.5. Citizens are permitted to certify to their status.
3. Applicants reporting zero income will be asked to complete a family expense form. This form will be the first completed in the interview process. CMHA requires applicants to document how much they spend on: food, transportation, health care, childcare, debts, household items, etc. and to specify the

source(s) of income used to pay for these expenses. Applicants must also report the status of any pending application and/or benefits received through TANF or other similar programs. If a *zero income* family is admitted, re-determinations of income may be performed every 60 days. (Ref. *Periodic Recertifications*, Section 3.C of this policy.)

4. CMHA's applicant admission records shall indicate the date and time the application was received; the applicant's race and ethnicity; CMHA's determination of eligibility/ineligibility of the applicant; when the applicant was made eligible; the unit size(s) for which the applicant was made eligible; preference(s), if any; the date, location, identification, and circumstances for each housing offer made; and a record of the acceptance or rejection of each offer.

The Preference System

1. Qualifying for a preference does not guarantee admission. Preferences are used to establish the order of placement on the waiting list. Every applicant must still meet CMHA's *Resident Selection Criteria* (described later in this policy) before being offered a unit. Preferences will be granted to applicants who are otherwise qualified and who, at the time of the unit offer (prior to execution of a lease) meet the criteria for the preferences described below.
2. Before applying preferences, CMHA will first match the characteristics of the available unit to the eligible applicants on the waiting list. Factors such as unit size, accessibility features, and type of housing may limit the admission of families to those households whose characteristics most closely match the characteristics and features of the available unit.
3. By matching unit and family characteristics, it is possible that families lower on the waiting list may receive an offer of housing ahead of families with an earlier date and time of application, or ahead of families with a higher preference (e.g. the next unit available is an accessible unit and the only applicant family needing such features is in the non-preference grouping).
4. When selecting a family for a unit with accessible features, CMHA will give a preference to applicant families with disabilities who can benefit most from the unit's features. First preference will be given to current resident families needing a transfer to an accessible unit, and second preference will be given to applicant families. If no family needing accessible features can be found for a unit with accessible features, CMHA will house a family that does not need the unit features. This housing offer is subject to the requirement in the Tenant Selection and Assignment Plan, under which a non-disabled family in an accessible unit can be required to move so that a family needing the unit features can be housed.
5. When selecting a family for a unit in housing designated for elderly families, CMHA will give a priority to elderly and near elderly families as described later in this section.
6. When selecting a family for a unit in a mixed population community (a property that houses both elderly and disabled families), CMHA will give a priority to elderly families and disabled families as described later in this section.
7. For a mixed population community, elderly, disabled and displaced single persons have priority over singles that are not elderly, disabled or displaced, regardless of preferences. Single applicants who are not elderly, disabled or displaced can only be admitted after all elderly, disabled and single displaced persons have been offered units.
8. Police officers and their families who may not otherwise be eligible for occupancy in public housing may be admitted in order to increase the presence of security for residents in a CMHA community.
9. Notwithstanding any other provision of this Admissions and Continued Occupancy Policy, each tenant living in a property at the time CMHA takes legal title to the property will have the right to remain in the property and become a public housing tenant in the dwelling unit the tenant occupies on the date CMHA takes legal

title, provided (1) the tenant family income is within the income limits for admission to the public housing program on the day the tenant family signs the public housing lease; and (2) the tenant family is determined to be eligible based on other CMHA admission criteria.

10. Preferences will be granted to applicants who are otherwise qualified and who, at the time of the unit offer (prior to execution of a lease) meet the definitions of the preferences described below.

F. Local Preference

There is one local preference in effect based on ranges of income. Applicants will be grouped as follows:

Tier I: Families with incomes between 0% and 30% of Area Median Income. This group must constitute at least 40% of all admissions in any year.

Tier II: Families with incomes between 31% and 80% of Area Median Income. This group will be equal to or less than 60% of all admissions in any year.

1. Ranking Preference

A **Working Family Preference** is the only ranking preference in effect: (Ref. Section I.E.7XII for definition). CMHA's *Procedure on Unit Offers and Applicant Placement* will be used to order the Waiting List and make unit offers.

Families that do not qualify for the Working Family preference will be categorized as no-preference families.

2. Mixed Population Buildings Local Preference

In addition to the Income Tier preference, which applies to all CMHA's communities, CMHA elects to retain the former Federally mandated priority for single persons who are either elderly, persons with disabilities, or persons displaced by governmental action over all other single persons when filling vacancies in its Mixed Population buildings.

3. Method of Applying Preferences

To ensure that CMHA admits 40% of applicants with incomes in Tier I each year, and at the same time does not create concentrations of families by income at any of its properties, CMHA will rank applicants within both income tiers as Natural Disaster, Upward Mobility or no-preference. Four out of every ten applicants admitted will be from Tier I. If there are insufficient applications among the Tier I Natural Disaster preference holders, Tier I Upward Mobility preference holders will be selected. If there are insufficient Upward Mobility preference holders, staff will make offers to the No-preference applicants in Tier I. Within each of the ranking preference categories, offers will be made by oldest application. The remaining six out of every ten applicants admitted will be from Tier I or II, subject to the same ranking preferences and sorted by application date and time.

CMHA will house applicants from Tiers I and II on the waiting list by selecting first from the Working Family applicants, then by selecting from the No-preference applicants within each Tier.

CMHA will also offer units to existing residents on the transfer list. Some types of transfers are processed before new admissions and some types of transfers are processed with new admissions, using a ratio set forth in the *Tenant Selection and Assignment Plan* (reference Section III). Transfers do not count toward the 40% Tier I requirement.

CMHA will neither hold units vacant for prospective applicants with preferences, nor will it relax eligibility or screening criteria to admit otherwise unqualified applicants with preferences.

4. Definition of Working Family Preference

The *Working Family Preference* is given to households that meet the following criteria:

First Preference—Head or Co-Head of Household is currently employed full-time (avg. at least 30 hours/week), and has been continuously employed for at least 12 months. Elderly and Disabled families, regardless of employment status, qualify for this First Preference.

Second Preference—Head or Co-Head of Household has been continuously employed full-time (avg. at least 30 hours/week) for at least six months.

The Working Family Preference applies to both new admissions and current residents seeking an Incentive Transfer.

5. Withholding Preferences

As required by law, CMHA will withhold a preference from an applicant if any member of the applicant family has been evicted from assisted housing (as defined in the 1937 Housing Act) during the past three years because of drug-related or criminal activity that threatens the health, safety or peaceful enjoyment of other residents or staff. CMHA will not grant an admission preference within three years of eviction to any family when the reason for eviction is related to drug trafficking, drug manufacture or possession of drug paraphernalia. CMHA may, at its sole discretion, grant admission preference in any of the following cases:

If CMHA determines that the evicted person has successfully completed a rehabilitation program that is directly relevant to the reason(s) for the eviction;

If CMHA determines that the evicted person clearly did not participate in or know about the drug-related or criminal activity; or

If CMHA determines that the evicted person no longer participates in any drug-related or criminal activity that threatens the health, safety or right to peaceful enjoyment of other tenants or staff.

6. Designated Housing

The preference system described above will work in combination with requirements to match the characteristics of the family to the type of unit available, including communities with HUD-approved designated populations, if any. When such matching is required or permitted by current law, CMHA will give preference to the families eligible for the designated housing, as described below. The ability to provide preferences for some family types will depend on unit size available.

Communities designated for the elderly: Elderly families will receive a priority for admission to units or buildings covered by a HUD-approved Designation Plan. When there are insufficient elderly families on the waiting list, near-elderly families (head or spouse/co-head ages 50 to 61) will receive a priority for this type of unit.

Communities designated for disabled families: Disabled families will receive a priority for admission to units or buildings that are covered by a HUD-approved Designation Plan.

Mixed Population Communities: Elderly families, disabled families and families displaced by governmental action will receive equal priority for admission to such units.

All elderly, disabled or displaced applicants who are single persons shall be admitted before single persons who are not elderly, disabled nor displaced.

General Occupancy Communities: The priority for elderly and disabled families and displaced persons over single persons does not apply at General Occupancy Properties.

7. Administration of the Preferences

Depending on the time an applicant may have to remain on the waiting list, CMHA will either verify preferences at the time of application (when there is no waiting list or the waiting list is very short) or require that applicants certify to their qualification for a preference at the time of pre-application (when the wait for admission exceeds four months). Preference verifications shall be no more than 120 days old at the time of certification.

At the time of pre-application, CMHA may use a pre-application to obtain the family's certification that it qualifies for a preference. Between pre-application and the application interview, the family will be advised to notify CMHA of any change that may affect their ability to qualify for a preference.

Applicants that are otherwise eligible and self-certified as qualifying for a preference will be placed on the waiting list in the appropriate applicant pool.

Applicants that self-certify to a preference at the time of pre-application and cannot verify current preference status at the time of certification will lose their preference status and their standing on the waiting list.

Families that cannot qualify for any of the preferences will be moved into the No-preference category, and to a lower position on the waiting list based on date and time of application.

Families that claim a preference at the time of the pre-application, but do not qualify for a preference at the time of application interview, will be notified in writing and advised of their right to an informal meeting as described below. If otherwise qualified, the family's application will then be placed on the waiting list in the appropriate No-preference category.

8. Notice and Opportunity for a Meeting

If an applicant claims but does not qualify for a preference, the applicant can request a meeting:

CMHA will provide a written notice if an applicant does not qualify for a preference. This notice shall contain a brief statement of the reason(s) for the determination, and notice that the applicant has the right to meet with CMHA's designee to review the determination.

If the applicant requests the meeting, CMHA shall designate an employee or other agency designee to conduct the meeting. A written summary of this meeting shall be made and retained in the applicant's file.

The applicant will be advised that s/he may exercise other rights if the applicant believes that illegal discrimination, based on race, color, national origin, religion, age, disability, or familial status has contributed to CMHA's decision to deny the preference.

Applicant Selection Criteria

1. Required Denial of Admission

In accordance with 24 CFR § 960.204 CMHA will deny admission for:

- a. Persons previously evicted from government-subsidized housing for drug-related criminal activity⁴;
- b. Persons engaging in illegal use of a drug;
- c. Persons convicted of methamphetamine production; or
- d. Persons subject to a lifetime sex offender registration requirement;

⁴ The definition of drug-related criminal activity includes possession of drug paraphernalia.

2. It is CMHA's policy that all applicants shall be screened in accordance with HUD's regulations and CMHA's *Applicant Screening Procedures*. During screening, CMHA will require applicants to demonstrate their ability to comply with essential provisions of the lease as summarized below:
- a. pay rent and other charges (e.g. utility bills) in a timely manner;
 - b. care for and avoid damaging the unit and common areas;
 - c. use facilities and equipment in a reasonable way;
 - d. create no health or safety hazards;
 - e. report maintenance needs in a timely manner;
 - f. not interfere with the rights and peaceful enjoyment of others, and to avoid damaging the property of others;
 - g. not to engage in any activity that threatens the health, safety or right to peaceful enjoyment of other residents or staff;
 - h. not to engage in any drug-related activity; and
 - i. to comply with necessary and reasonable rules and program requirements of HUD and CMHA.

No applicant for public housing who has been a victim of domestic violence, dating violence, or stalking shall be denied admission into the program if they are otherwise qualified.

3. CMHA will check ability to comply with essential lease requirements:
- a. Applicant ability and willingness to comply with the essential lease requirements will be checked and documented in accordance with CMHA's *Applicant Screening Procedure*. Information to be considered in completing applicant screening shall be reasonably related to assessing the conduct of the applicant and other family members listed on the application, in present and prior housing.
 - b. The history of applicant conduct and behavior must demonstrate that the applicant family can reasonably be expected **not to**:
 - (1) Interfere with other residents in such a manner as to diminish their peaceful enjoyment of the premises by adversely affecting their health, safety, or welfare;
 - (2) Adversely affect the physical environment or financial stability of the project;
 - (3) Violate the terms and conditions of the lease;
 - (4) Require services from CMHA staff that would alter the fundamental nature of CMHA's program.
 - c. CMHA will conduct a detailed interview of all applicants. Answers will be subject to third party verification.
 - d. CMHA will complete a credit check and rental history check on all applicants. CMHA may reject an applicant for an unsatisfactory rental history with a current or former landlord. Unsatisfactory rental history includes, but is not limited to, outstanding balances owed to a landlord, late rental payments, evictions, lease violations, poor housekeeping, etc.

- e. Payment of funds owed to CMHA, any other housing authority or any other government-funded housing program is part of the screening evaluation. Payment of outstanding balances is an opportunity for the applicant to demonstrate an improved track record. CMHA will reject an applicant for unpaid balances owed CMHA by the applicant for any program that CMHA operates. CMHA expects these balances to be paid in full (either in a lump sum or over time) before initiating the full screening process. CMHA will not admit families who owe back balances. Payment of an outstanding balance will not guarantee selection for housing.
- f. CMHA will complete a national and local criminal background check on all adult applicants, and will consider juvenile records for any household member for whom criminal records are available.
- g. CMHA may complete a home visit on applicants. The purpose of the Home Visit is to obtain information to be used in determining the applicant's compliance with Applicant Screening Criteria.

As part of the home visit, CMHA will determine whether the applicant's housekeeping would contribute to health or sanitation problems. CMHA staff completing the home visit will consider whether the conditions they observe are the result of the applicant's treatment of the unit or whether they are caused by the unit's overall substandard condition.

Housekeeping criteria shall include, but not be limited to conditions in the living room, kitchen, bathroom, bedrooms, entrance-ways, halls, and yard, cleanliness in each room; and general care of appliances, fixtures, windows, doors and cabinets. Other CMHA lease compliance criteria will also be checked, such as evidence of destruction of property, unauthorized occupants, evidence of criminal activity, and conditions inconsistent with application information.

(1) All applicants shall have at least two days' advance written notice of Home Visits.

- h. All eligible applicants are required to attend and complete CMHA's Orientation prior to leasing.
- i. Applicants for selected scattered site housing will also be required to attend and successfully complete CMHA's Good Neighbor Housing Program.
- j. CMHA's examination of relevant information with respect to past and current habits or practices will include, but is not limited to, an assessment of:
 - (1) The applicant's past performance in meeting financial obligations, especially rent and utility bills.
 - (2) A record of disturbance of neighbors, destruction of property, or living or housekeeping habits at present or prior residences that may adversely affect the health, safety, or welfare of other tenants or neighbors.
 - (3) Any history of criminal activity on the part of any applicant family member involving crimes of physical violence to persons or property and other criminal acts including drug-related criminal activity that would adversely affect the health, safety, or welfare of other residents or staff with respect to criminal activity.
 - (4) Applicants will be determined ineligible for admission if CMHA determines that there is reasonable cause to believe that the applicant and/or any family member's pattern of abuse of an illegal drug and/or alcohol may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents. CMHA may waive this

requirement if the person demonstrates to CMHA's satisfaction that the person is no longer engaging in abuse of alcohol and/or drugs and:

- (a) Has successfully completed a supervised drug rehabilitation program satisfactory to CMHA;
 - (b) Has otherwise been rehabilitated successfully (third-party verification required); or
 - (c) Is participating in a supervised drug or alcohol rehabilitation program satisfactory to CMHA.
- (5) A record of eviction from housing or involuntary termination from residential programs (taking into account date and circumstances).
- (6) An applicant's ability and willingness to comply with the terms of CMHA's lease.
- k. An applicant's intentional misrepresentation of any information related to eligibility, award of preference for admission, housing history, allowances, family composition, income or rent will result in rejection. Unintentional mistakes that do not confer any advantage to the applicant will not be considered misrepresentations.
- l. By the time of admission applicants must be able to demonstrate the ability and willingness to comply with the terms of CMHA's lease, either alone or with assistance.⁵ Availability of assistance and/or the ability to comply with lease terms are subject to verification by CMHA.

4. Screening applicants who claim mitigating circumstances

- a. If negative information is received about an applicant, CMHA shall consider the time, nature, and extent of the applicant's conduct and factors that might indicate a reasonable probability of favorable future conduct. To be considered in CMHA's screening assessment of the applicant, mitigating circumstances must be verifiable.
- b. Mitigating circumstances⁶ are facts relating to the applicant's record of unsuitable rental history or behavior, which, when verified, indicate both: (1) the reason for the unsuitable rental history and/or behavior; and (2) that the reason for the unsuitable rental history and behavior is no longer in effect or is under control, and the applicant's prospect for lease compliance is an acceptable one, justifying admission. Mitigating circumstances may outweigh information already gathered in the screening process.
- c. If the applicant asserts that the mitigating circumstances relate to a change in disability, medical condition or course of treatment, CMHA shall have the right to refer such information to persons qualified to evaluate the evidence and verify the mitigating circumstance. CMHA shall also have the right to request further information reasonably needed to verify the mitigating circumstance, even if such information is of a medically confidential nature. Such inquiries will be limited to the information necessary to verify the mitigating circumstances or, in the case of a person with disabilities, to verify the need for a reasonable accommodation.
- d. Examples of mitigating circumstances might include:

⁵ Applicants whose landlord, financial, criminal and other references demonstrate that they are already willing and able to comply with lease terms in their existing housing will be considered to have met this criterion, whether or not they are disabled. Applicants whose housing situations make it difficult for CMHA to determine whether or not they are able and willing to comply with lease terms (e.g. because they are homeless, are living with friends or relatives, or have other non-traditional housing circumstances) will have to demonstrate ability and willingness to comply with lease terms whether or not they are disabled.

⁶ Mitigating circumstance is applicable to all applicants.

- (1) Evidence of successful rehabilitation;
 - (2) Evidence of the applicant family's participation in social service or other appropriate counseling service; or
 - (3) Evidence of successful and sustained modification of previous disqualifying behavior.
- e. Consideration of mitigating circumstances does not guarantee that the applicant will qualify for admission. CMHA will consider such circumstances in light of:
- (1) the applicant's ability to verify the claim of mitigating circumstances and his/her prospects for improved future behavior;
 - (2) the applicant's overall performance with respect to all the screening requirements; and
 - (3) the nature and seriousness of any criminal activity, especially drug related criminal activity that appears in the applicant's record.

5. Qualified and Unqualified Applicants

- a. Verified information will be analyzed and a determination made with respect to:
 - (1) Eligibility of the applicant as a family;
 - (2) Eligibility of the applicant with respect to income limits for admission;
 - (3) Eligibility of the applicant with respect to citizenship or eligible immigration status;
 - (4) Unit size required for and selected by the family;
 - (5) Preference category (if any) to which the family is entitled; and
 - (6) Qualification of the applicant with respect to the *Applicant Selection Criteria*.
- b. Families determined to be qualified will be notified by CMHA of the projected date of occupancy insofar as that date can be reasonably determined. The projected date is just an estimate and does not mean that applicants should necessarily expect to be housed by that date. The availability of a suitable unit to offer a family is contingent upon many factors CMHA does not control, such as turnover rates, and market demands as they affect available bedroom sizes and location.
- c. Applicants determined unqualified for admission will be promptly notified. These applicants will receive a *Notice of Rejection* from CMHA, stating the basis for such determination. CMHA shall provide an opportunity for informal review of the determination as described in *Procedure for Informal Hearing for Rejected Applicants*. Rejected applicants may request an informal hearing within 15 business days of the date of the Notice of Rejection. Applicants are not entitled to use the resident grievance process.
- d. Applicants known to have a disability that are determined eligible but fail to meet the *Applicant Selection Criteria* will be offered an opportunity to have their cases examined by a Housing Panel, as set forth in CMHA's Leasing Department's Social Service Referral Procedures, to determine whether mitigating circumstances or reasonable accommodations will make it possible for them to be housed in accordance with the screening procedures.

H. **Occupancy Guidelines**

- 1. Units shall be assigned and occupied by families based on the appropriate bedroom size that complies with HUD rules related to Occupancy Standards. for Minimum and Maximum-Number-of-Persons-Per Unit

Number of Bedrooms	Minimum Number of Persons/Unit	Maximum Number of Persons/Unit ⁷
0	1	1
1	1	2
2	2	4
3	3	6
4	4	8
5	5	10
6	6	12

The following principles govern the size of unit for which a family will qualify. Generally, two people are expected to share each bedroom, except that units will be assigned so that:

- a. It will not be necessary for persons of different generations or opposite sex, other than husband and wife, to occupy the same bedroom, although they may do so at the request of the family.
 - b. Exceptions to the largest permissible unit size may be made as needed in cases of reasonable accommodation for a person with disabilities.
 - c. Two children of the opposite sex will not be required to share a bedroom, although they may do so at the request of the family.
 - d. An unborn child may or may not be counted as a person in determining unit size, at CMHA's discretion.
 - e. Foster children will be included in determining unit size only if they will be in the unit for more than six months.
 - f. A child who is temporarily away from the home because the child has been placed in foster care, kinship care, or is away at school will be counted when determining unit size; however, family members not listed on the lease, such as those in the military, shall not be counted in determining unit size.
 - g. A single head of household parent shall not be required to share a bedroom with his/her child, although they may do so at the request of the family.
 - h. A Live-in Aide may be assigned a bedroom.
2. The local housing code standard of two persons per bedroom will be used as the standard for the smallest unit a family may be offered. Individual housing units with very small or very large bedrooms, or other specific situations that inhibit or encourage lower or higher levels of occupancy, may be permitted to establish lower or higher occupancy levels. CMHA will consider the size of the unit as well as the size and the number of bedrooms. Assignment of units by bedroom size may not have the effect of discriminating on the basis of familial status.

⁷ When determining the maximum number of people allowed in a unit, the Occupancy Specialist may also take into account the actual size of the bedrooms in the unit, which may vary significantly from property to property.

3. The largest unit size that a family may be offered would provide no more than one bedroom per family member, taking into account family size and composition.
4. When a general occupancy family applies for housing, and each year when the waiting list is updated, some families will qualify for more than one unit size. Based on the family's choice, CMHA will place the family on one wait list for any of the unit sizes for which that family chooses. A family that chooses to occupy the minimum size unit must agree not to request a transfer until their family size changes.
5. When a family is actually offered a unit, if they no longer qualify for the unit size, they will be moved to the appropriate sub-list, retaining their preferences and date and time of application. This may mean that they may have to wait longer for a unit offer.
6. The unit size standards shall be discussed with each applicant family that qualifies for more than one unit size. Families will also be informed about their status and movement on the various waiting lists and sub-lists maintained by CMHA. Families shall be asked to declare, in writing, the waiting list(s) on which they wish to be placed. If a family requests a smaller unit size than would normally be assigned under the largest unit size standard, the family will be required to sign a statement agreeing to the unit assignment until their family size or circumstances change. At the family's request, CMHA shall change the family's site preference on the waiting sub-lists at any time while the family is on the waiting list.

Tenant Selection and Assignment Plan

A. Organization of the Waiting List

1. Community-Wide Waiting List

Each applicant shall be assigned his/her appropriate place on the site-based waiting list(s) selected by the applicant in sequence based upon:

- a. type and size of unit needed and selected by the family (e.g. general occupancy building, accessible or non-accessible unit, number of bedrooms);
- b. applicant preference or priority, if any; and
- c. date and time the application is received.

2. CMHA will maintain its waiting list in the form that records the type and size of unit needed, each applicant's priority/preference status and the date and time of application. All current applicants for the communities selected for Site-based Waiting Lists will be given an opportunity to list up to three communities where they would accept a unit offer or to opt for the "first available" unit offer. An applicant may be on three different waiting lists. All applicants will be informed of the length of each list and may change their site selection as needed.

B. Unit Offers to Applicants

1. To assure equal opportunity and nondiscrimination on grounds of race, color, sex, religion, national origin, disability or familial status the first qualified applicant in sequence on the site-based waiting list is made one offer of a unit of appropriate size and type at a site he/she has selected. The applicant must accept the vacancy offered or be dropped from the waiting list for that site. Applicants may be removed from the waiting list for refusing a unit offer without good cause.
2. CMHA will first match the characteristics of the unit available with the highest ranking applicant for a unit of that size, type and special features (if any), taking into account any limitations on admission, i.e. designated housing (if applicable). Preferences, if any, are then applied to determine the order of

applicant selection from the waiting list. If two applicants need the same type and size of unit and have the same preference status, the applicant with the earlier date and time of application will receive the first offer.

3. For an available unit with accessible features, CMHA will give first preference to families that include a person with disabilities who can benefit from the unit features.
4. When a unit with accessible features is ready and no applicant in the targeted preference group requires the features of the unit, CMHA will make an offer to an applicant who does not qualify for the preference. Certain types of transfers will also be processed with new admissions. See Section F. for the ratio of transfers to new admissions.
5. The applicant must accept the vacancy offered within 3 working days of the date the offer is communicated (by phone or mail). If the applicant does not accept the unit within this timeframe the unit will be offered to the next applicant.
6. If more than one unit of the appropriate size and type is available, the first unit to be offered will be the unit that is ready or will be ready for occupancy the soonest.

C. Due Process Rights for Applicants

It is the responsibility of each applicant to keep CMHA apprised of any changes in address, phone number, family income or other family circumstances. No applicant on the waiting list shall be removed from the waiting list except when one of the following situations occurs:

1. The applicant receives and accepts an offer of housing;
2. The applicant requests that his/her name be removed from the waiting list;
3. The applicant is rejected; or
4. The application is withdrawn because CMHA attempted to contact the applicant for an annual waiting list update, to schedule a meeting or interview, to offer or show a unit, or for some other reason, and was unable to contact the applicant. In attempting to contact an applicant, the following methods shall be undertaken before an application may be withdrawn:
 - a. The applicant will be sent a letter by first class mail to the applicant's last known address, asking the applicant to contact CMHA⁸ either by returning the update postcard or in person within the specified time;
 - b. If an applicant contacts CMHA, as required, within any of the deadlines stated above, he/she shall be reinstated at the former waiting list position.
 - c. When CMHA is unable to contact an applicant by first class mail to schedule a meeting, or interview or to make an offer, CMHA shall suspend processing of that application until the applicant is either withdrawn (no contact by the applicant) or reinstated (contact by the applicant within the stated deadlines). While an application is suspended, applicants next in sequence will be processed.
5. Applicants who fail to respond to CMHA's attempts to contact them because of circumstances related to a disability shall be entitled to reasonable accommodation, provided that the circumstances are verified to be related to a disability. In such circumstances CMHA shall reinstate the applicants to their former waiting list positions.

⁸ Except that CMHA shall contact persons with disabilities according to the methods such individuals have previously designated. Such methods of contact could include verbal or in-person contact or contacting relatives, friends or advocates rather than the person with disabilities.

6. Families whose applications are withdrawn or rejected as described above must reapply for housing at a time the waiting list is open and will be assigned a new date and time of application.

D. Good Cause for Applicant Refusal to Lease

If an applicant is willing to accept the unit offered but is unable to move at the time of the offer, and presents to the satisfaction of CMHA, clear evidence (“good cause”) that acceptance of the offer will result in undue hardship not related to considerations of race, color, sex, religion or national origin, the applicant will not be dropped to the bottom of the list.

1. Examples of “good cause” for refusing an offer of housing include, but are not limited to:
 - a. The unit is not ready for occupancy at the time the offer of housing is made. “Ready for occupancy” means the unit has no physical inspection deficiencies.
 - b. The unit offered is inaccessible to source of employment, education or job training, children’s day care, or educational program for children with disabilities⁹, so that accepting the unit offer would require the adult household member to quit a job, drop out of an educational institution or job training program, or take a child out of day care or an educational program for children with disabilities;
 - c. The family demonstrates, to CMHA’s satisfaction, that accepting the offer will place a family member’s life, health or safety in jeopardy. The family must offer specific and compelling documentation such as restraining orders, other court orders, or risk assessments related to witness protection from a law enforcement agency. Reasons offered must be specific to the family. Refusals due to location alone do not qualify for this good cause exemption;
 - d. A health professional verifies temporary hospitalization or recovery from illness of the principal household member, other household members (each as listed on final application) or live-in aide necessary to the care of the principal household member;
 - e. The unit is inappropriate for the applicant’s disabilities, or the family does not need the accessible features in the unit offered and does not want to be subject to a 30 day notice to move;
 - f. An elderly or disabled family makes the decision not to occupy or accept occupancy in designated housing; or
 - g. The applicant is willing to move to the unit offered, but is unable to move in a timely fashion, because the applicant must give notice to a current landlord.
2. The applicant must be able to document that the hardship claimed is good cause for refusing an offer of housing. Where good cause is verified, the refusal of the offer shall not require that the applicant be dropped to the bottom of the waiting list or otherwise affect the family’s position on the waiting list. (In effect, the family’s application will remain at the top of the waiting list until the family receives an offer for which they have no good cause for refusal.)
3. CMHA will maintain a record of units offered, including location, date, and circumstances of each offer, and each acceptance or refusal, including the reason for the refusal.

E. Dwelling Units with Accessible/Adaptable Features

1. Before offering a vacant accessible unit to a non-disabled applicant, CMHA will offer such unit:

⁹ This only applies when the applicant has a child participating in such a program.

- a. First, to a current occupant of another unit of the same community, or other public housing communities under CMHA's control, having a disability that requires the special features of the vacant unit (in effect, a transfer of the occupant with disabilities from a non-adapted unit to the vacant accessible/adapted unit).
 - b. Second, to an eligible qualified applicant on the waiting list having a disability that requires the special features of the vacant unit.
2. When offering an accessible/adaptable unit to a non-disabled applicant, CMHA will require the applicant to sign an agreement to move to an available non-accessible unit within 30 days when either a current resident or an applicant with a disability needs the unit. This requirement is also reflected in the lease agreement signed with the applicant.

F. Leasing and Occupancy of Dwelling Units

Applications for admission and incentive transfers will be processed centrally. Initial intake, waiting list management and screening will also be handled from the central leasing office. Offers may be made in person, in writing or by phone from either the central leasing office or from the applicable property management office.

G. Transfers

CMHA has five types of transfer: Emergency, Administrative (Category 1, Category 2 and Category 3), and Incentive transfers. The definition of each type of transfer is found in the Transfer section of this policy.

1. Emergency transfers, Category 1 and 2 Administrative transfers and Incentive transfers all take priority over general admissions. Category 3 Administrative transfers will be processed at the rate of four general admissions for each Category 3 Administrative transfer.
2. To the greatest degree possible, except for Incentive transfers, transfers will be made at the location where the family currently resides. If an appropriate size or type of unit is not available in the family's current location, the family will be made another housing offer of a vacant, ready unit that is the right size and type.
3. Except for Emergency transfers, tenants on the transfer list may refuse transfer offers for the "good cause" reasons cited in Section C above without losing their position on the transfer list.
4. Tenants who refuse a final transfer offer without good cause may be removed from the transfer list. Tenants whose transfers are mandatory and who refuse a final transfer offer without good cause are subject to lease termination.
5. Tenants are entitled to use the CMHA Grievance Procedure if they are refused the right to transfer or if CMHA requires them to transfer and they do not believe the required transfer falls within the reasons as specified in this policy. Emergency transfers must proceed, and may be grieved after the fact.

Deconcentration Policy for Covered Developments

Development Name	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]
OH 4-5 Millvale South	270		Contained in Admissions and Continued Occupancy Policy
OH 4-6	297		Contained in Admissions and

Millvale North			Continued Occupancy Policy
OH 4-8 Liberty Apartments (formerly Laurel Homes)	130		Contained in Admissions and Continued Occupancy Policy
OH 4-17 Stanley Rowe	64		Contained in Admissions and Continued Occupancy Policy
OH 4-23 N/C-City/67	26		Contained in Admissions and Continued Occupancy Policy
OH 4-28 Webman Court/Dixie	12		Contained in Admissions and Continued Occupancy Policy
OH 4-29 Quebec Road/Clinton	76		Contained in Admissions and Continued Occupancy Policy
OH 4-30 A/R-City/68	53		Contained in Admissions and Continued Occupancy Policy
OH 4-36 Horizon Hills	32		Contained in Admissions and Continued Occupancy Policy
OH 4-38 NC-City/79	38		Contained in Admissions and Continued Occupancy Policy
OH 4-40 APT A/R-City/79	186		Contained in Admissions and Continued Occupancy Policy
OH 4-42 A/R-County/86	39		Contained in Admissions and Continued Occupancy Policy
OH 4-43 A/R-City/86	47		Contained in Admissions and Continued Occupancy Policy
OH 4-44 A/R-County/88	50		Contained in Admissions and Continued Occupancy Policy
OH 4-45 A/R-City/88	44		Contained in Admissions and Continued Occupancy Policy
OH 4-46 A/R-County2/88	50		Contained in Admissions and Continued Occupancy Policy
OH 4-51	100		Contained in Admissions and Continued Occupancy Policy
OH 4-53	3		Contained in Admissions and Continued Occupancy Policy

LOW INCOME PUBLIC HOUSING WAITING LIST

Site Based Waiting List				
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
BW-BEECHWOOD, OH 4-07, CINCINNATI	July 2004	94.5% minority	95.33% minority	+ .83 percentage points
EV-EVANSTON OH 4-41, CINCINNATI	July 2004	92.0% minority	97.02% minority	+7.02 percentage points
MM-MARQUETTE MANOR, OH 4-11, CINCINNATI	July 2004	77.9% minority	92.75% minority	+ 14.85 percentage points
MPT-MAPLE TOWER, OH 4-19, CINCINNATI	July 2004	98.3% minority	97.60% minority	-.70 percentage points
PC-PINECREST, OH 4-26, CINCINNATI	July 2004	23.5% minority	38.61% minority	+ 15.11 percentage points
PE-PARK EDEN, OH 4-22, CINCINNATI	July 2004	96.7% minority	94.28% minority	-2.42 percentage points
PR-PRESIDENT, OH 4-21, CINCINNATI	July 2004	92.5% minority	92.63% minority	+ .13 percentage points
RED-REDDING, OH 4-20, CINCINNATI	July 2004	94.8% minority	98.03% minority	+3.23 percentage points
RV-RIVERVIEW, OH 4-25, CINCINNATI	July 2004	91.7% minority	85.58% minority	- 6.12 percentage points
SM-SAN MARCO, OH 4-36, CINCINNATI	July 2004	96.6% minority	93.33% minority	-3.27 percentage points
SRT-STANLEY ROWE TOWERS, OH 4-17, CINCINNATI	July 2004	98.9% minority	97.18% minority	- 1.72 percentage points
CLS-CLINTON SPRINGS, OH 4-29, CINCINNATI	July 2004	100.0% minority	97.50% minority	- 2.50 percentage points
ECI-SS EAST CITY, MULTIPOLE PROJECT #'S, CINCINNATI	July 2004	87.4% minority	90.95% minority	+ 3.45 percentage points
ECO-SSEAST COUNTY, MULTIPLE PROJECT #'S, HAMILTON COUNTY	July 2004	78.7% minority	87.65% minority	+ 8.95 percentage points
LA-LIBERTY STREET APARTMENTS	July 2004	100.0% minority	100% minority	0 percentage points
MAT-MARIANNA TERRACE	July 2004	97.2% minority	96.35% minority	- .85 percentage points
WCI-SS WEST CITY, MULTIPLE PROJECT #'S, CINCINNATI	July 2004	98.3% minority	90.32% minority	-7.98 percentage points
WCO, SS WEST COUNTY, MULTIPLE PROJECT #'S, HAMILTON COUNTY	July 2004	85.4% minority	79.34% minority	- 6.06 percentage points
SK-SETTY KUHN	July 2004	100.0% minority	95.48% minority	-4.52 percentage points
EW-ENGLISH WOODS AND SUTTER VIEW, OH 4-02, OH 4-14, CINCINNATI	July 2004	94.8% minority	99.02% minority	+4.22 percentage points
FG-FINDLATER GARDENS, OH4-10, OH 4-13, CINCINNATI	July 2004	96.1% minority	95.55% minority	-.55 percentage points

Housing Choice Voucher Section 8 Program

CHAPTER 3

ESTABLISHING PREFERENCES AND MAINTAINING THE WAITING LIST

[24 CFR Part 5, Subpart D; 982.54(d)(1), 982.204, 982.205, 982.206]

INTRODUCTION

It is CMHA's objective to ensure that families are placed in the proper order on the waiting list and selected from the waiting list for admissions in accordance with the policies in this Administrative Plan. By maintaining an accurate waiting list, CMHA will be able to perform the activities which ensure that an adequate pool of qualified applicants will be available so that program funds are used in a timely manner.

A. WAITING LIST [24 CFR 982.204]

CMHA uses a waiting list for admission to its Housing Choice Voucher Program tenant-based assistance program. CMHA also maintains a wait list for each Project Based Voucher Contract.

Except for Special Admissions, Ports and applicants for Project-Based Vouchers, applicants will be selected from the CMHA HCV Waiting List in accordance with policies and preferences and income targeting requirements defined in this Administrative Plan. For Special Admissions, each agency that is authorized to refer families for the vouchers for their program will determine the preference among their pool of applicants.

CMHA will maintain information that permits proper selection from the waiting list.

The waiting list contains the following information for each applicant listed:

Applicant name

Family unit size (number of bedrooms family qualifies for under CMHA subsidy standards)

Date and time of application

Qualification for any local preference

Racial or ethnic designation of the head of household

Annual (gross) family income

Number of persons in family

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B. LOCAL PREFERENCES [24 CFR 982.207]

CMHA will offer public notice when changing its preference system and the notice will be publicized using the same guidelines as those for opening and closing the waiting list.

Except for Special Admissions, applicants for Housing Choice Voucher Program assistance will be taken from the Housing Choice Voucher Program waiting list in order of the following local preferences:

- Families with a head, co-head or spouse who is elderly (62 or over) or disabled will be given a preference.
- Single person households who are elderly (62 or over) or disabled will be given a preference.
- Families that have been designated as eligible for assistance under HUD's Disaster Housing Assistance Program (DHAP).
- Referrals of elderly or non-elderly disabled persons referred by Living Arrangements for the Developmentally Disabled (LADD) up to 25 vouchers.
- Referrals of elderly or non-elderly disabled persons referred by the Center for Independent Living Options (CILO) up to 25 vouchers.
- Referrals of Homeless Veterans by the Cincinnati Department of Veteran Affairs Medical Center up to 33 vouchers.
- FUP Voucher Youth maximizing out of FUP.

CMHA will admit families who qualify under the Extremely Low Income limit to meet the income targeting requirement, regardless of preference.

C. SPECIAL ADMISSIONS [24 CFR 982.54(d)(e), 982.203]

CMHA admits a limited number of families under a Special Admissions procedure.

Special admissions families will be admitted outside of the regular waiting list process. They do not have to qualify for any preferences, nor are they required to be on the program waiting list. CMHA maintains separate records of these admissions.

The following are examples of types of program funding that may be designated by HUD for families living in a specified unit:

- A family displaced because of demolition or disposition of a public or housing project;
- A family residing in a multifamily rental housing project when HUD sells, forecloses or demolishes the project;

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For housing covered by the Low Income Housing Preservation and Resident Home-ownership Act of 1990;

A family residing in a project covered by a Project-based Housing Choice Voucher Program HAP Contract at the end of the initial HAP Lease/Contract term; and

A non-purchasing family residing in a HOPE 1 or HOPE 2 project.

Special Admissions Programs, subject to funding availability, are:

HUD VASH Homeless;

Homeless VASH;

Moderate Rehabilitation (MOD);

Families that have been designated as eligible for assistance under HUD's Disaster Assistance Program (DHAP);

Family Unification Program (FUP);

If specifically funded by HUD, Non Elderly Disabled Households;

If specifically funded by HUD, Non Elderly Households with a disability transitioning from nursing homes or other health care institutions into the community.

D. **INCOME TARGETING**

In accordance with the Quality Housing and Work Responsibility Act of 1998, each fiscal year CMHA will reserve a minimum of 75 percent of its Housing Choice Voucher Program new admissions for families whose income does not exceed 30 percent of the area median income. HUD refers to these families as "extremely low-income families." CMHA will admit families who qualify under the Extremely Low Income limit to meet the income-targeting requirement, regardless of preference.

CMHA's income targeting requirement does not apply to low income families continuously assisted as provided for under the 1937 Housing Act.

CMHA is also exempted from this requirement where it is providing assistance to low income or moderate-income families entitled to preservation assistance under the tenant-based program as a result of a mortgage prepayment or opt out.

E. **PREFERENCE AND INCOME TARGETING ELIGIBILITY [24 CFR 982.207]**

Change in Circumstances

Changes in an applicant's circumstances while on the waiting list may affect the family's entitlement to a preference. Applicants are required to notify CMHA in writing when their circumstances change.

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F. ORDER OF SELECTION [24 CFR 982.207(e)]

CMHA's method for selecting applicants from a preference category leaves a clear audit trail that can be used to verify that each applicant has been selected in accordance with the method specified in the Administrative Plan.

Local Preferences

Local preferences will be used to select families from the waiting list. Households may qualify for more than one preference and will receive the points for each. CMHA has selected the following system to apply local preferences:

- Families with a head, co-head or spouse who is disabled will be given a preference. 30 points
- Families who are elderly will be given a preference. 30 points
- Families that have been designated as eligible for assistance under HUD's Disaster Housing Assistance Program (DHAP). 40 points
- Referrals of disabled persons referred by Living Arrangements for the Developmentally Disabled (LADD) up to 25 vouchers.** 35 points
- Referrals of disabled persons referred by the Center for Independent Living Options (CILO) up to 15 vouchers.** 35 points
- FUP Voucher Youth maximizing out of FUP. ** 35 points

**** Referrals will be accepted from CMHA Special Admissions, FUP Voucher Youths maximizing out of FUP, LADD and CILO regardless of whether a family is on the PHA regular voucher wait list, regardless of whether the regular PHA voucher wait list is open or closed, consistent with 24 CFR 982.206 (c).**

G. FINAL VERIFICATION OF PREFERENCES [24 CFR 982.207]

CMHA will verify that a family claiming an applicant preference qualifies for the preference based on the family's current circumstances.

The family must also qualify for the preference at the time of pull from the wait list.

If verification results in a change of preference status, the applicant will be notified and placed back on the waiting list in the appropriate order.

Chapter 3

H. **REMOVAL FROM WAITING LIST AND PURGING [24 CFR 982.204(c)]**

The Waiting List will be purged at least every 12 months by a mailing to all applicants to ensure that the waiting list is current and accurate. The mailing will ask for confirmation of continued interest.

Any mailings to the applicant which require a response will state a deadline for response. Failure to respond by the deadline will result in the applicant's name being removed from the waiting list.

An extension of 30 days to respond will be granted, if requested and needed as a reasonable accommodation for a person with a disability.

If a letter is returned by the Post Office without a forwarding address, the applicant will be removed from the wait list without further notice, and the returned envelope and letter will be maintained in the file.

If a letter is returned with a forwarding address, it will be re-mailed one time to the forwarding address. If it is returned again, with a new or without a forwarding address, the applicant will be removed from the waiting list without further notice.

If an applicant is removed from the waiting list for failure to respond or returned mail, the applicant will not be entitled to reinstatement unless the Program Manager determines there were circumstances beyond the person's control to respond timely.

CHAPTER 4

APPLYING FOR ADMISSION AND BRIEFINGS

[24 CFR 982.204]

INTRODUCTION

The policy of CMHA is to ensure that all families who express an interest in housing assistance are given an equal opportunity to apply, and are treated in a fair and consistent manner. This chapter describes the policies and procedures for completing an initial application for assistance, placement and denial of placement on the waiting list and limitations on who may apply. The primary purpose of the intake function is to gather information about the family, but CMHA will also utilize this process to provide information to the family so that an accurate and timely decision of eligibility can be made. Applicants will be placed on the waiting list in accordance with this Plan.

Upon pulling participants from the waiting list, CMHA will conduct a mandatory briefing to ensure that families know how the program works. The briefing will provide a broad description of owner and family responsibilities, CMHA procedures, and how to lease a unit. The family will also receive a briefing packet which provides more detailed information about the program including the benefits of moving outside areas of poverty and minority concentration. This chapter describes how briefings will be conducted and the information that will be provided to families.

A. OVERVIEW OF THE APPLICATION TAKING PROCESS

The purpose of taking applications is to permit CMHA to gather information and determine placement on the waiting list. The application will contain questions designed to obtain pertinent program information.

Families who wish to apply for any one of CMHA's programs must complete an application when application taking is open. Applications will be made available in an accessible format upon request from a person with a disability.

When the waiting list is open, any family asking to be placed on the waiting list for Housing Choice Voucher Program rental assistance will be given the opportunity to complete an application.

The application process will involve two phases. The first is the "initial" application for assistance (referred to as a pre-application). This first phase results in the family's placement on the waiting list.

The pre-applications will be dated and time-stamped.

The second phase is the "final determination of eligibility" (referred to as the full application). The second phase takes place when the family reaches the top of the waiting list. It is during this final application phase that CMHA verifies all

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HUD and CMHA eligibility factors in order to determine the family's eligibility for the issuance of a voucher.

B. OPENING/CLOSING OF APPLICATION TAKING [24 CFR 982.206, 982.54(d)(1)]

When CMHA opens the waiting list, CMHA will advertise through public notice in the local media outlets including minority publications and media entities, with the location(s), and program(s) for which applications are being accepted:

The notice will contain:

- The date and time when the waiting list will open.

- The process by which families may apply.

- The program(s) for which applications will be taken.

- A brief description of the program(s).

- Notice that public housing residents must submit a separate application to apply.

- Limitations, if any, on who may apply.

The notices will be made in an accessible format if requested. They will provide potential applicants with information that includes CMHA address and telephone number, how to submit an application, information on eligibility requirements, and the availability of local preferences.

Upon request from a person with a disability, additional time will be given as an accommodation for submission of an application after the closing deadline. This accommodation is to allow persons with disabilities the opportunity to submit an application in cases when a social service organization provides inaccurate or untimely information about the closing date.

When the waiting list is open, CMHA will accept applications from eligible families unless there is good cause for not accepting the application, such as denial of assistance because of action or inaction by members of the family for the grounds stated in the "Denial or Termination of Assistance" chapter of this Administrative Plan. [24 CFR 982.206(b)(2)]

Closing the Waiting List

CMHA may stop applications if there are enough applicants to fill anticipated openings for the next 12 months. The waiting list may not be closed if it would have a discriminatory effect inconsistent with applicable civil rights laws.

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The open period shall be long enough to achieve a waiting list adequate to cover projected turnover and new allocations over the next 12 months or longer. When the period for accepting applications is over, CMHA will add those new applicants to the waiting list in accordance with the procedure detailed in the chapter of this Administrative Plan titled "Establishing Preferences and Maintaining the Waiting List."

Referrals will be accepted from CMHA Special Admissions, FUP Voucher Youths maximizing out of FUP, LADD and CILO regardless of whether a family is on the PHA regular voucher wait list, regardless of whether the regular PHA voucher wait list is open or closed, consistent with 24 CFR 982.206 (c).

Limits on Who May Apply

When the waiting list is open:

Any family asking to be placed on the waiting list for Housing Choice Voucher Program rental assistance will be given the opportunity to complete an application.

C. "INITIAL" APPLICATION PROCEDURES [24 CFR 982.204(b)]

CMHA will utilize a pre-application. The information is to be filled out by the applicant whenever possible. To provide specific accommodation for persons with disabilities, the information may be completed by a staff person over the telephone. It may also be mailed to the applicant and, if requested, it will be mailed in an accessible format.

The purpose of the pre-application is to determine preliminary rank on the waiting list. The pre-application will contain at least the following information:

Applicant name

Family Unit Size (number of bedrooms the family qualifies for under CMHA subsidy standards)

Date and time of application

Qualification for any local preference

Racial and ethnic designation of the head of household

Annual (gross) family income

Social Security Number

Birth date

Pre-applications will not require an interview. The information on the pre-application will not be verified until the applicant has been selected for final

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eligibility determination. Final eligibility will be determined when the full application process is completed and all information is verified.

D. **APPLICANT STATUS WHILE ON WAITING LIST [CFR 982.204]**

Applicants are required to inform CMHA in writing of changes in address. Applicants are also required to respond to requests from CMHA to update information on their application. Failure to respond by the specified deadline will result in withdrawal of the application.

If after a review of the pre-application the family is determined to be preliminarily eligible, they will be notified in writing or in an accessible format upon request, as a reasonable accommodation.

The notice will contain the approximate time interval that assistance may be offered, and will further explain that the estimated date is subject to factors such as turnover and available funding.

This written notification of preliminary eligibility may be mailed to the applicant by first class mail, via electronic transmission or distributed to the applicant in the manner requested as a reasonable accommodation.

If a family has a bad debt or previous balance due to CMHA, they are eligible to apply for the waiting list. When the applicant family is pulled from the waiting list, they will be given 180 calendar days to pay that debt in full. Upon payment of the debt, the family will be replaced back on the waiting list with their same date and sequence time. If the balance is not paid in full in 180 calendar days, the application will be withdrawn.

If the family is determined to be preliminarily ineligible or the pre-application is late and/or incomplete based on the information provided in the pre-application, CMHA will notify the family in writing (in an accessible format upon request as a reasonable accommodation), state the reason(s), and inform them of their right to an informal review. Persons with disabilities may request to have an advocate attend the informal review as an accommodation. See "Complaints and Appeals" chapter.

If a family is terminated from CMHA's Public Housing, Mod Rehab, PBA, PBV or other Special Admissions programs, they will be withdrawn from the HCV waiting list as well. The family must wait until the waiting list is reopened to reapply.

Families that obtain vouchers through methods other than CMHA's traditional HCV Admissions Process will be removed from the waiting list. Examples of this include families porting in, those receiving vouchers through an Opt-Out program and by other means not listed.

Chapter 4

E. **PULLING FROM THE WAITING LIST [24 CFR 982.204]**

CMHA will utilize a lottery system to accept a limited number of applications submitted during the opening of the wait list. CMHA will utilize a random system in ordering the names on the wait list. The random number serves as a date and time of application and is used as a tiebreaker in cases where families hold equal preference points. When funding is available, families will be selected from the waiting list in the determined sequence and subject to income targeting requirements. In order to meet the income targeting requirement, CMHA will admit families who are “extremely low-income” regardless of preference in accordance with *Chapter 3 Section D* of the HCV Administrative plan.

Families will be notified in writing that they have reached the top of the waiting list. At this time, they will be asked to provide information on their income and family composition to verify their eligibility for the program. Prospective tenants will be given an opportunity to respond to the request. Once eligibility is established, they will be invited to an upcoming briefing.

Once an Applicant is pulled from the waiting list, applicants owing a balance to CMHA must pay off the balance within 180 days of the pulled date or they will be withdrawn from the waiting list. CMHA may enter into a repayment agreement with special and/or targeted populations.

When there is insufficient funding available for the family at the top of the list, CMHA will not admit any other applicant until funding is available for the first applicant.

Based on CMHA's turnover and the availability of funding, groups of families will be selected from the waiting list to begin the verification process.

Families who are active or recent tenants of CMHA may reach the top of the waiting list and be called in for a briefing with a balance due to CMHA. These families will be given 30 days to pay that balance in full. These clients may have repayment agreements in effect; however, the total balance must be paid in full to continue to be eligible for the Housing Choice Voucher Program. If the balance is not paid in full before the specified deadline, the application is withdrawn from the waiting list and the applicant must wait to reapply when the waiting list is next opened.

F. **COMPLETION OF A FULL APPLICATION**

When CMHA is ready to select applicants, applicants will be required to complete a full application and sign it, unless assistance is needed or a request for accommodation is made by a person with a disability.

G. **ASSISTANCE TO FAMILIES WHO CLAIM DISCRIMINATION**

CMHA will give participants a copy of HUD Form 903 to file a complaint.

Chapter 4**H. VERIFICATION [24 CFR 982.201(e)]**

Information provided by the applicant will be confirmed in accordance with the procedures detailed in the "Verification Procedures" chapter. Family composition, income, allowances and deductions, assets, full-time student status, eligibility and rent calculation factors, and other pertinent information will be verified. The verifications may not be more than 60 days old at the time of issuance of the Voucher.



CINCINNATI METROPOLITAN HOUSING AUTHORITY

FIVE YEAR PLAN 2011-2015

ANNUAL PLAN FY 2011

ATTACHMENT B

GRIEVANCE PROCEDURES

LOW INCOME PUBLIC HOUSING GRIEVANCE PROCEDURES

I. PURPOSE

The Cincinnati Metropolitan Housing Authority ("CMHA") Grievance Procedure (the "Grievance Procedure") has been adopted to provide a forum and procedures for tenants to seek the just, effective, and efficient settlement of Grievances against CMHA.

Except as described in Section X, the Grievance Procedure is only available to *current tenants* in the public housing program.

II. APPLICABILITY

A. The Grievance Procedure shall be applicable to all individual Grievances (as defined below) between a tenant and CMHA, except as provided in Article II.B and C. below.

B. 1. The U.S. Department of Housing and Urban Development ("HUD") has issued a due process determination that the laws of the State of Ohio require that a tenant be given the opportunity for a hearing in a court that provides the basic Elements of Due Process (as defined below) before eviction from a dwelling unit. Therefore CMHA has elected to exclude from the Grievance Procedure any Grievance concerning a termination of tenancy or eviction that involves:

(i) any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises of other residents or employees of CMHA; or

(ii) any Drug-Related Criminal Activity (as defined below) on or off such premises.

2. Since HUD has issued a due process determination, CMHA shall evict the occupants of the dwelling unit through the judicial eviction procedures that are the subject of the due process determination. In these cases, CMHA shall not provide the opportunity for a hearing under the Grievance Procedure.

C. The Grievance Procedure shall not be applicable to disputes between tenants not involving CMHA, or to class Grievances. The Grievance Procedure is not a forum for initiating or negotiating policy changes between a group or groups of tenants and CMHA. Accordingly, the Hearing Officer appointed to hear any individual Grievance will have no authority to change any provision of the lease agreement, the Grievance Procedure or any other policy or procedure of CMHA, or the application of any law or HUD regulation.

III. REQUIREMENTS

This Grievance Procedure shall be incorporated by reference in all lease agreements entered into by and between CMHA and individual tenants whether or not so specifically provided in such leases. CMHA shall furnish each tenant and resident organization with a copy of the Grievance Procedure.

IV. DEFINITIONS

A. **GRIEVANCE**: Any dispute which a tenant may have with respect to the CMHA action or failure to act in accordance with the individual tenant's lease agreement or CMHA rules and regulations which adversely affect the individual tenant's rights, duties, welfare or status.

- B. **GRIEVANT**: Any tenant whose Grievance is presented to a CMHA Property Management Office in accordance with Sections V and VI of the Grievance Procedure.
- C. **DRUG-RELATED CRIMINAL ACTIVITY**: The illegal manufacture, sale, distribution, use or possession with intent to manufacture, sell, distribute, or use a controlled substance as defined in section 102 of the Controlled Substances Act (21 U.S.C. section 802).
- D. **ELEMENTS OF DUE PROCESS**: An eviction action or a termination of tenancy in a state or local court in which the following procedural safeguards are required:
1. Adequate notice to the tenant of the grounds for terminating the tenancy and for eviction;
 2. Right of the tenant to be represented by counsel;
 3. Opportunity for the tenant to refute the evidence presented by CMHA including the right to confront and cross-examine witnesses and to present any affirmative legal or equitable defense which the tenant may have; and
 4. A written decision on the merits.
- E. **HEARING OFFICER**: A person selected in accordance with Section VI of this Grievance Procedure to hear Grievances and render a decision.
- F. **TENANT**: The adult person (or persons) (other than a live-in aide):
1. who resides in the unit, and who executed the lease with CMHA as lessee of the dwelling unit, or, if no such person now resides in the unit,
 2. who resides in the unit, and who is the remaining head of household of the tenant family residing in the dwelling unit.
- G. **RESIDENT ORGANIZATION**: Includes a resident management corporation.

V. INFORMAL SETTLEMENT OF GRIEVANCE

Any Grievance shall be personally presented, in writing, to CMHA at the CMHA Property Management Office where the tenant resides, within ten (10) days following the action or failure to act about which the tenant is complaining. Under no circumstances shall CMHA refuse to accept Grievance forms when presented by a tenant or a tenant's representative. Grievance and hearing request forms shall be available at CMHA's Central Housing Management Office and at all CMHA Property Management Offices. Upon presentation of any written Grievance, CMHA office personnel shall date stamp the written Grievance and the manager shall arrange an informal conference with the tenant to discuss the Grievance and attempt to settle it without a hearing. A summary of the discussions during such conference shall be prepared within twenty (20) days following the date of the conference, and one copy shall be given to the tenant, one shall be given to the tenant's representative, if any, and one copy retained in CMHA's tenant file. The summary shall specify the names of the participants, the date of the conference, the nature of the proposed disposition of the Grievance and the specific reasons for the manager's decision, and shall specify the procedures by which a hearing under Section VI may be obtained if the Grievant is not satisfied.

VI. PROCEDURES TO OBTAIN A HEARING

- A. **REQUEST FOR HEARING:** The Grievant shall submit a written request for a formal hearing to CMHA at the CMHA Property Management Office where the tenant resides or at CMHA's Central Housing Management Office within ten (10) days following receipt of the written summary of discussion pursuant to Section V, or if no such written summary was delivered, within thirty (30) days after the filing of a Grievance. The written request shall specify (1) the reasons for the Grievance, and (2) the action or relief sought.
- B. **SELECTION OF HEARING OFFICER:** A Grievance hearing shall be conducted by an impartial person appointed by CMHA other than the person who made or approved the CMHA action under review or a subordinate of such person.
1. The permanent appointments of persons who shall serve as Hearing Officers shall be governed by the following procedures:
 - (a) CMHA shall nominate a slate of persons to sit as permanent Hearing Officers. These persons may include, but may not necessarily be limited to CMHA staff members, tenants or other responsible persons in the community who are familiar with HUD regulations and CMHA policies and procedures.
 - (b) The slate of potential appointees shall be submitted to all CMHA resident organizations for written comments. Written comments from the resident organizations shall be considered by CMHA before appointments are made final. Objections to the appointment of a person as a Hearing Officer must be considered but do not disqualify the person from being appointed.
 - (c) On final appointment, the persons appointed and resident organizations shall be informed in writing of the appointments. A list of all qualified Hearing Officers will be kept at the CMHA Central Housing Management Office and be made available for public inspection at any time during normal business hours.
 2. The designation of Hearing Officers for particular Grievance hearings shall be governed by the following provisions:
 - (a) All hearings will be held before a single Hearing Officer.
 - (b) Appointments to serve as a Hearing Officer with respect to a particular Grievance shall be made by CMHA.
 - (c) No member of the CMHA staff may be appointed as a Hearing Officer in connection with a Grievance contesting an action which was either made or approved by the proposed appointee, or which was made or approved by a person under whom the proposed appointee works or serves as a subordinate.
 - (d) No person shall accept an appointment, or retain an appointment, once selected as a Hearing Officer, if it becomes apparent that such person is not fully capable of impartiality. Persons who are designated to serve as Hearing Officers must disqualify themselves from hearing Grievances that involve personal friends, relatives, persons with whom they have any business relationship, or Grievances in which they have some

personal interest. Further, such persons are expected to disqualify themselves if the circumstances are such that a significant perception of partiality exists. If a Grievant fails to object to the designation of the Hearing Officer on the grounds of partiality at the beginning of or before the hearing, such objection is deemed to be waived and may not be made later. In the event that a Hearing Officer fails to disqualify himself or herself as required in this Grievance Procedure, CMHA will remove the Hearing Officer from the list of persons appointed for such purposes, invalidate the results of the Grievance hearing in which such person should have, but did not disqualify himself or herself, and schedule a new hearing with a new Hearing Officer.

- C. **FAILURE TO REQUEST A HEARING:** If the Grievant fails to request a hearing in accordance with this Section, then CMHA's disposition of the Grievance under Section V shall become final. The failure to request a hearing shall not constitute a waiver by the Grievant of his or her right thereafter to contest CMHA's action in disposing of the Grievance in an appropriate judicial proceeding.
- D. **HEARING PREREQUISITE:** All Grievances must have been personally presented in writing pursuant to the informal Grievance procedure described in Section V as a condition of proceeding to a hearing under this section. If the Grievant shall show good cause to the Hearing Officer why he or she failed to proceed in accordance with Section V Hearing Officer, the provisions of this subsection may be waived by the Hearing Officer.
- E. **SCHEDULING OF HEARINGS:** Upon Grievant's compliance with subsections A, D and E of this section, a hearing shall be scheduled by the Central Housing Management Office for a time and place reasonably convenient to the Hearing Officer, the Grievant and the CMHA Property Management representative. A written notification specifying the time, place and procedures governing the hearing shall be delivered to Grievant and Grievant's representative (if CMHA has been notified that the Grievant will have a representative at the hearing), and the appropriate CMHA officials. The hearing shall take place not later than ninety (90) days after presentation of the written request for the formal hearing. If the hearing is not conducted within such ninety (90) day period, or by such later date as may be requested by the Grievant in writing, then the Grievance shall be resolved in accordance with the position stated by the Grievant in the written request for hearing. Any Grievance resolved in the Grievant's favor as a result of CMHA's failure to schedule a hearing in accordance with this paragraph shall be final and binding upon CMHA, and no appeal will be permitted.

VII. PROCEDURES GOVERNING THE HEARING

- A. The hearing shall be held before a Hearing Officer.
- B. The Grievant shall be afforded a fair hearing that shall include:
 - 1. The opportunity to examine before the Grievance hearing any CMHA documents, including records and regulations that are directly relevant to the hearing. The Grievant shall be allowed to copy any such document at the Grievant's expense. If CMHA does not make the document available for examination upon request by the Grievant, CMHA may not rely on such document at the Grievance hearing.
 - 2. The right to be represented by counsel or other person chosen as the Grievant's representative, and to have such person make statements on the Grievant's behalf.
 - 3. The right to a private hearing unless the Grievant requests a public hearing.

4. The right to present evidence and arguments in support of the Grievant's Grievance, to oppose evidence relied upon by CMHA and to cross-examine all witnesses upon whose testimony or information CMHA relies; and
 5. A decision based solely and exclusively upon the facts presented at the hearing.
- C. The Hearing Officer may render a decision without proceeding with the hearing if the Hearing Officer determines that the issue has been previously decided in another proceeding.
 - D. If the Grievant or CMHA fails to appear at a scheduled hearing, the Hearing Officer may make a determination to postpone the hearing for a period not to exceed five (5) business days or may make a determination that the missing party has waived its right to a hearing. Both the Grievant and CMHA shall be notified of the determination by the Hearing Officer. A determination that the Grievant has waived his or her right to a hearing shall not constitute a waiver of any right the Grievant may have to contest CMHA's disposition of the Grievance in an appropriate judicial proceeding.
 - E. At the hearing, the Grievant must first make a showing of an entitlement to the relief sought and thereafter CMHA must sustain the burden of justifying CMHA's action or failure to act against that which the Grievance is directed.
 - F. The hearing shall be conducted informally by the Hearing Officer. Both verbal and/or documentary evidence pertinent to the facts and issues raised by the Grievance may be received without regard to admissibility under the rules of evidence applicable to judicial proceedings. The Hearing Officer shall require CMHA, the Grievant, legal counsel and other participants or spectators to conduct themselves in an orderly fashion. Failure to comply with the directions of the Hearing Officer to obtain order may result in exclusion from the proceedings or in a decision adverse to the interests of the disorderly party and granting or denial of the relief sought, as appropriate, in the sole and absolute discretion of the Hearing Officer.
 - G. The Grievant or CMHA may arrange, in advance and at the expense of the party making the arrangement, for a transcript of the hearing. Any interested party may purchase a copy of such transcript.
 - H. If the Grievant has given CMHA advance notice of the Grievant's need for accommodation as a person having disabilities, CMHA shall provide reasonable accommodation for such person so as to permit that person to participate in the hearing. Reasonable accommodation shall include, but shall not be limited to, qualified sign language interpreters, readers, accessible locations, or attendants. If the Grievant is visually impaired, and has given advance notice to CMHA of such impairment, any notice to Grievant that is required under this Grievance Procedure shall be in an accessible format.

VIII. DECISION OF THE HEARING OFFICER

- A. The Hearing Officer shall prepare a written decision, together with the reasons for the decision, within thirty (30) days after the hearing unless such time is extended by agreement of the Grievant and CMHA. A copy of the decision shall be sent to the Grievant and CMHA. CMHA shall retain a copy of the decision in the Grievant's folder. A copy of such decision, with all names and identifying references deleted, shall also be maintained on file by CMHA and made available for inspection by a prospective Grievant, his or her representative, or Hearing Officer. In the event the Hearing Officer shall not prepare a written decision within thirty (30) days as required by this paragraph, the Grievant

may, at his election, be afforded a new hearing before a new Hearing Officer, or serve written notice upon CMHA that a written decision has not been issued in accordance with the provisions of this paragraph. If the Grievant elects to invoke his right to a new hearing, CMHA shall schedule such hearing within ten (10) days. CMHA's failure to schedule a hearing within such ten (10) day period shall result in a disposition of the Grievance in favor of the Grievant in accordance with the Grievant's written request for hearing. If Grievant elects to give written notice of the Hearing Officer's failure to prepare a written decision, and such failure is not corrected within ten (10) days of the receipt by CMHA of such written notice, then the Grievant's Grievance shall be resolved in favor of the Grievant as stated in the Grievant's written request for hearing.

- B. The decision of the Hearing Officer shall be binding on CMHA which shall take all actions, or refrain from any actions, necessary to carry out the decision, within forty-five (45) days from the date of the decision unless CMHA's Board of Commissioners determines and notifies the Grievant within the forty-five (45) day period of its determination, that:
1. The Grievance does not concern CMHA action or failure to act in accordance with or involving the Grievant's lease or CMHA rules and regulations, which adversely affect the Grievant's rights, duties, welfare or status; or
 2. The decision of the Hearing Officer is contrary to applicable federal, state or local law, HUD regulations or requirements of the Annual Contributions Contract between HUD and CMHA or exceeds the authority granted to Hearing Officers under Section II. C. of this Grievance Procedure.
- C. A decision by the Hearing Officer or CMHA Board of Commissioners in favor of CMHA or which denies the relief requested by the Grievant in whole or in part shall not constitute a waiver of, nor affect in any manner whatever, any rights the Grievant may have to a trial de novo or judicial review in any judicial proceedings, which may thereafter be brought in the matter.

IX. RESPONSIBILITY FOR RENT PAYMENTS AND OTHER CHARGES

Before a hearing is scheduled in any grievance involving the amount of rent as defined in 966.4(b) that CMHA claims is due, the Grievant must pay an escrow deposit to CMHA. When a family is required to make an escrow deposit, the amount is the amount of rent that CMHA states is due and payable as of the first of the month preceding the month in which the Grievant's act or failure to act took place. After the first deposit, the Grievant must deposit the same amount monthly until the Grievant's complaint is resolved by decision of the Hearing Officer.

Unless CMHA waives the requirement due to financial hardship (as prescribed in Section 5.630 or Section 5.615 of the regulations, the Grievant's failure to make the escrow deposit will terminate the grievance procedure. A Grievant's failure to pay the escrow deposit does not waive the family's right to contest in any appropriate judicial proceeding CMHA's disposition of the grievance.

X. BAD DEBT GRIEVANCE HEARINGS FOR FORMER TENANTS

This section of the grievance procedure only applies to former tenants who are notified after move-out, upon receipt of the Security Deposit Disposition, that they owe money to the public housing program.

To dispute move-out charges, a former tenant must file a Bad Debt Grievance Hearing Request. The tenant shall have thirty days following the date of issue for the Security Deposit Disposition to dispute the move-out charges.

The grievance request shall be expedited, and scheduled with the Hearing Officer. All sections of the Grievance Procedure pertaining to the Hearing Officer and the decision making process apply to the Bad Debt Grievance Procedure.

Failure to request this grievance waives any right of the former tenant to request a bad debt hearing when re-applying for admission to the public housing program.

Attachment A: Tenant Grievance Form
Attachment B: Bad Debt Grievance Request



TENANT GRIEVANCE

Date:	Date:
Tenant Name:	Tenant Representative:
Address:	Agency:
Client No./Unit No.:	Address:
Telephone No.:	Telephone No.:
<u>Tenant's Complaint</u> (be specific as to names, dates and places):	
Date Rcvd. By Property Mgr:	Tenant's Signature:
<u>Property Manager's Reply:</u>	
Date:	Property Mgr.'s Signature:

Note to Complainant (Tenant): If you are dissatisfied with this reply to your complaint, you have the right to file a request for hearing provided you do so within ten (10) days of the date of this answer. To be timely, your request for hearing must be received by _____. **DISTRIBUTION:** Original –Director, Housing Management Pink–Property Manager Yellow–Tenant



BAD DEBT GRIEVANCE HEARING REQUEST

RETURN THIS COMPLETED FORM WITHIN 30 CALENDAR DAYS FOLLOWING THE DATE ON YOUR SECURITY DEPOSIT DISPOSITION. MAIL OR FAX TO:

CMHA DEPARTMENT OF HOUSING MANAGEMENT
1044 W. LIBERTY ST.
CINCINNATI, OHIO 45214

PHONE: (513) 977-5750

FAX: (513) 665-3155

Name _____

Address _____

CITY _____ STATE _____ ZIP CODE _____

DAYTIME PHONE No. _____ CELL PHONE No. _____

Please explain why you believe the charges to your account are incorrect. Any documentation supporting your position should be attached to this Grievance Hearing Request.

SIGNATURE _____ DATE _____

HOUSING CHOICE VOUCHER SECTION 8 GREIVANCE PROCEDURE

CMHA's *Housing Choice Voucher Section 8 Program Administrative Plan* contains the following informal hearing and review procedures available to HCV residents and applicants.

HCV Informal Review Procedures

Informal Reviews are provided for applicants who are denied assistance before the effective date of the HAP Contract. When CMHA determines that an applicant is ineligible for the program, the family must be notified of their ineligibility in writing. The notice contains:

- The reason(s) they are ineligible,
- The procedure for requesting an informal review if the applicant does not agree with the decision, and
- The time limit for requesting an informal review.

When denying admission for criminal activity as shown by a criminal record, CMHA will provide the subject of the record and the applicant with a copy of the criminal record upon which the decision to deny was based.

CMHA must provide applicants with the opportunity for an informal review of decisions to:

- Deny issuance of a voucher
- Deny participation in the program
- Deny assistance under portability procedures
- Terminate a family's FSS contract or withhold supportive services.

Informal reviews are not required for established policies and procedures and CMHA determinations such as:

- Discretionary administrative determinations by CMHA
- General policy issues or class grievances
- A determination of the family unit size under CMHA subsidy standards
- Refusal to extend or suspend a voucher
- CMHA determination not to grant approval of the tenancy
- Determination that unit is not in compliance with HQS
- Determination that unit is not in accordance with HQS due to family size or composition
- Procedure for Review

A request for an informal review must be received in writing by the close of the business day, no later than 10 calendar days from the date of CMHA's notification of denial of assistance. The informal review will be scheduled within 30 calendar days of the date the request is received.

The informal review may not be conducted by the person who made or approved the decision under review, nor a subordinate of such person. The review may be conducted by:

- A CMHA staff person who is not directly involved in the decision to approve or deny
- An individual who is not a CMHA employee

The applicant will be given the option of presenting oral and/or written objections to the decision. Both CMHA and the family may present evidence and witnesses. The family may use one designee, e.g. an attorney or other representative, to assist them at their own expense.

A notice of the findings will be provided in writing to the applicant within 15 business days after the review. It will include the decision of the Hearing Officer, and an explanation of the decision.

HCV Informal Hearing Procedures

CMHA will give a participant family an opportunity for an informal hearing to consider whether the following decisions relating to the individual circumstances of a participant family are in accordance with the law, HUD regulations, and CMHA policies:

- Determination of the family's annual or adjusted income and the computation of the housing assistance payment
- Appropriate utility allowance used from schedule
- Family unit size determination under CMHA subsidy standards
- Determination to terminate assistance for any reason

CMHA must always provide the opportunity for an informal hearing before termination assistance.

Informal hearings are not required for established policies and procedures and CMHA determinations such as:

- Discretionary administrative determinations by CMHA
- General policy issues or class grievances
- Establishment of the CMHA schedule of utility allowances for families in the program
- CMHA determination not to approve an extension or suspension of a voucher term
- CMHA determination not to approve a unit or lease

- CMHA determination that an assisted unit is not in compliance with HQS (CMHA must provide hearing for family breach of HQS because that is a family obligation determination)
- CMHA determination that the unit is not in accordance with HQS because of the family size

- CMHA determination to exercise or not exercise any right or remedy against the owner under a HAP Contract

When CMHA makes a decision regarding the eligibility and/or the amount of assistance, participants must be notified in writing. CMHA will give the family prompt notice of such determinations which will include:

- The proposed action or decision of CMHA
- The date the proposed action or decision will take place
- The family's right to an explanation of the basis for CMHA's decision
- The procedures for requesting a hearing if the family disputes the action or decision
- The time limit for requesting the hearing
- To whom the hearing request should be addressed



CINCINNATI METROPOLITAN HOUSING AUTHORITY

FIVE YEAR PLAN 2011-2015

ANNUAL PLAN FY 2011

ATTACHMENT C

PET POLICY

CMHA PET POLICY

This policy sets forth requirements for residents who wish to keep common household pets such as dogs and cats in their CMHA dwelling units. All residents who desire to keep a pet must obtain the *prior* approval of the Property Manager, in accordance with the procedures set forth in this Pet Policy.

As a reasonable accommodation for individuals with disabilities, this Pet Policy does not apply to animals that are verified to be medically necessary as an assistive or companion animal needed by persons with disabilities. The need for such an animal must be verified by a qualified medical practitioner.

When verification of need for an assistive or companion animal is obtained, the person with disabilities will be exempt from the pet deposit and, for assistive animals, the size limitations of this policy.

Persons with disabilities will still be required to document that their animals are healthy and have received all legally required inoculations. In addition, persons with disabilities must be able to care for their animals and keep them and their units in safe and healthy condition. Owners of medically necessary companion or assistive animals must meet this requirement on their own, or as part of a reasonable accommodation, with assistance from some source other than CMHA. Elderly residents who are not disabled are also permitted to have pets, but if they are not persons with disabilities they must comply fully with this policy, including paying the pet deposit.

Pet ownership by CMHA residents is subject to reasonable requirements and limitations as described in this policy. It is the resident's responsibility to read and follow the rules and regulations contained in this policy. Repeated or serious violations of this policy will be cause for termination of the Lease.

Ownership of household pets is restricted in three (3) ways: by building type; by type or breed of animal; and by size, weight or other factors particular to the type of pet.

- Dog breeds commonly used for attack or defense purposes including, but not limited to Rottweilers, Pit Bull Terriers, Doberman Pinchers and German Shepherds, are not eligible for ownership and are not allowed on CMHA property under any circumstances.
- Any aggressive cat or dog, with a known or suspected propensity, tendency or disposition to unprovoked attacks, is also not allowed.
- Exotic animals are excluded from CMHA property, (e.g. snakes, lizards, iguanas, wild animals such as wolves and big cats, etc.).
- Certain types of birds, e.g. hawks, eagles, condors, falcons, pigeons, etc. are not allowed.

There are no exceptions.

A Tenant wishing to have a pet in their unit must first complete the *Application for Pet Registration* form (attached), which, if approved by the Property Manager, then becomes an Addendum to the Lease.

Documentation necessary at the time of *Application for Pet Registration*:

A photograph and description of the pet;

A certificate signed by a licensed veterinarian verifying that the pet has received all inoculations required by state and local law, that the pet has no communicable diseases, and is pest-free.

The name, address and telephone number of one or more responsible parties who will care for the pet if the pet owner dies or is otherwise unable to care for the pet.

Documentation that cats or dogs have been spayed or neutered. All female dogs over six month of age and all female cats over five months of age must be spayed. All male dogs over eight months of age and all male cats over ten months of age must be neutered. If health problems prevent spaying or neutering, a veterinarian's certificate will be necessary to allow the pet to be registered. CMHA may permit exceptions.

For dog owners, a copy of the current license, issued by Hamilton County.

The name of the adult household member with primary responsibility for pet care.

The *Application for Pet Registration* must be renewed and will be coordinated with each resident's annual recertification. When the completed *Application for Pet Registration* is received, it is reviewed by the Property Manager. Authorization to have a pet can only be approved if the household is lease compliant. Once the pet application is approved by management, the resident shall pay the required pet deposit, if applicable. A receipt shall be given to the resident and a copy kept in the resident's file.

Birds: A maximum of two caged birds, each weighing no more than two pounds, is allowed. The *Application for Pet Registration* must be completed and approved, but no deposit is required.

Fish: No deposit or registration is required for a fish bowl holding less than one gallon of water. An aquarium may not hold more than 30 gallons of water, and must have a secure cover to prevent moisture from escaping. A household may have only one aquarium. For an aquarium, the *Application for Pet Registration* must be completed and approved, but no deposit is required.

Cats: Resident shall pay a refundable pet deposit of \$50 if residing in a unit that is not carpeted, and \$100 if residing in a unit that is carpeted.

Dogs: Resident shall pay a refundable pet deposit of \$150 if residing in a unit that is not carpeted, and \$250 if residing in a unit that is carpeted.

The resident shall have the following options to pay the pet deposit:

The entire deposit is paid at the time the Lease is signed or pet approval for the resident is granted; or 50% of the deposit is paid at the time the Lease is signed or pet approval for the resident is granted and the remaining 50% paid in two (2) equal installments. Each installment is due the first of the month for the two months immediately following the signing of the Lease or when the pet approval for the unit is granted.

A household may have either one cat or one dog, but not both. A household may have one fish aquarium and a maximum of two birds in any one unit. Dogs are limited to in size to a maximum of 25 pounds and 20 inches in height at the shoulders. Every dog and cat must wear a valid rabies tag. All pets must also wear a tag bearing the owner's name, address and phone number.

At the time of annual re-examination, every pet must be registered with the Property Manager. Registering a dog or cat requires proof of up-to-date inoculations, identification tag, and verification that the pet has been spayed/neutered, or a letter from a veterinarian giving medical reason why procedure was not performed.

Pets shall be quartered in the resident's unit. Animals may not be chained up outside the unit.

No doghouses are allowed on the premises. Food and water dishes will be located within the owner's unit. Food and/or table scraps will not be deposited on the owner's porch or yard.

Residents will not feed or water stray animals or wild animals.

Pets will not be allowed on specified common areas (under clothes lines, in community rooms, offices, maintenance space, playgrounds, etc.).

Every pet owner will be responsible for proper disposal of fecal waste of his or her pet. The excrement of any animal curbed on CMHA property must be removed and disposed of immediately. Failure of the pet owner to remove and dispose of pet waste may invoke a \$15 charge for management to remove pet waste. Continued violation of this requirement will be cause for termination of tenancy.

Owners are required to make sure their pets do not make noise that interferes with their neighbors' peaceful enjoyment of their units.

Pet owners are liable for any damage caused by their pet, including the cost of exterminating for fleas or other pet-borne pests.

Pets are not permitted in common areas, i.e., laundry rooms, recreation rooms, TV lounges, etc. Lobby areas are available to pets for ingress and egress only. Assistive animals for persons with disabilities are exempt from this restriction.

A pet owner must be capable of taking care of a pet. A pet owner is required to maintain a current notarized statement from a person who will assume immediate responsibility for the pet in case of the pet owner's illness/emergency, or extended absence from the dwelling unit.

While pets are outside of the unit and in CMHA building common areas (e.g. elevators, hallways, lobby, etc.), they must be kept on a leash, carried in the resident's arms or in an appropriate animal cab. While outside the unit, dogs, excluding assistive animals, must be kept on a leash and tightly reined.

A pet that bites or attacks a resident or CMHA employee shall be prohibited from remaining on the property. The pet's owner shall be required to get rid of the animal to avoid lease termination.

Visitors (non-residents) on CMHA property are not allowed to have any animal on the property. Required assistive animals are exempt from this restriction.

The following shall be general guidelines for pet ownership in different types of housing:

High-Rise Buildings: Cats, birds and fish are allowed.

No dogs are allowed. Residents in these buildings who have a dog registered prior to the July 1, 2005 effective date of this policy will be permitted to keep the dog. No new dogs will be permitted.

Single Family Homes, Duplexes, Walk-Ups, Townhouses, and Scattered Sites: All pets specified in this policy are permitted.

Persons with Disabilities: A person with a disability shall be allowed to have an assistive or companion animal, regardless of the building type of the person's dwelling unit. A third-party verification from a qualified medical practitioner that verifies the need for the animal and the type of animal needed shall be required.

Violation of this Pet Policy or Pet Rules two (2) times within a twelve (12) month period will be grounds for termination of the Lease.

Notice of Pet Rule Violation: When CMHA determines that a Tenant has violated one or more of these rules governing the owning or keeping of pets, CMHA will serve a written notice of the pet rule violation(s) on the Tenant.

The notice of pet rule violation must contain a brief statement of the factual basis for the determination and the pet rule(s) alleged to have been violated.

The notice must state that the Tenant has ten (10) calendar days from the date of the notice to correct the violation (including, in appropriate circumstances, removal of the pet).

The notice must state that the Tenant's failure to correct the violation, to request a meeting, or to appear at a requested meeting may result in initiation of procedures to terminate the Tenant's lease.

The Administrative Grievance Procedure will apply for any proposed termination of the Lease because of Pet Policy violations.

Notice of Pet Removal: If CMHA determines that the pet owner has failed to correct the pet rule violation CMHA will send the resident a notice requiring the pet owner to remove the pet. This notice must:

Contain a brief statement of the factual basis for the determination and the pet rule or rules that have been violated;

State that the pet owner must remove the pet within ten (10) calendar days of the effective date of the notice;

State the failure to remove the pet may result in termination of the lease.

If the health or safety of a pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet, then CMHA may:

Contact the responsible party listed in the registration form and ask that they assume responsibility for the pet;

If the responsible party is unwilling or unable to care for the pet, then CMHA may contact the appropriate Animal Control Authority, Humane Society or other designated agent of CMHA and request the removal of the pet.

Nothing in this policy prohibits CMHA or the appropriate Animal Control Authority from requiring the removal of any pet from the property if the pet's conduct or condition is duly determined to constitute a nuisance or a threat to the health or safety of other occupants of the property or of other persons in the community.

Pet owners will be responsible and liable for any and all bodily harm to other residents or individuals caused by their pet.

Destruction of personal property belonging to others caused by an owner's pet will be the financial obligation of the pet owner.



CINCINNATI METROPOLITAN HOUSING AUTHORITY

ATTACHMENT D

FISCAL AUDIT

CINCINNATI METROPOLITAN HOUSING AUTHORITY

AUDIT REPORT

FOR THE FISCAL YEAR ENDED JUNE 30, 2009

James G. Zupka, CPA, Inc.
Certified Public Accountants

CINCINNATI METROPOLITAN HOUSING AUTHORITY
AUDIT REPORT
FOR THE FISCAL YEAR ENDED JUNE 30, 2009

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JAMES G. ZUPKA, C.P.A., INC.
Certified Public Accountants
5240 East 98th Street
Garfield Hts., Ohio 44125

Member American Institute of Certified Public Accountants

(216) 475 - 6136

Ohio Society of Certified Public Accountants

INDEPENDENT AUDITOR'S REPORT

Board of Commissioners
Cincinnati Metropolitan Housing Authority
Cincinnati, Ohio

Regional Inspector General of Audit
Department of Housing and Urban
Development

We have audited the accompanying financial statements of the Cincinnati Metropolitan Housing Authority, Ohio, as of and for the year ended June 30, 2009, which collectively comprise the Authority's basic financial statements as listed in the table of contents. These financial statements are the responsibility of the Cincinnati Metropolitan Housing Authority, Ohio's management. Our responsibility is to express opinions on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and the significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinions.

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the Cincinnati Metropolitan Housing Authority, Ohio, as of June 30, 2009, and the respective changes in financial position, and cash flows, where applicable, thereof for the year then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued a report dated December 9, 2009, on our consideration of the Cincinnati Metropolitan Housing Authority, Ohio's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

The Management's Discussion and Analysis on pages 3 through 7 is not a required part of the basic financial statements but is supplementary information required by accounting principles generally accepted in the United States of America. We have applied certain limited procedures, which consisted principally of inquiries of management regarding the methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the Cincinnati Metropolitan Housing Authority, Ohio's basic financial statements. The accompanying Schedule of Expenditures of Federal Awards is presented for purposes of additional analysis as required by U. S. Office of Management and Budget Circular A-133, *Audits of States, Local Government and Non-Profit Organizations*, and is also not a required part of the basic financial statements of the Cincinnati Metropolitan Housing Authority, Ohio. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly presented in all material respects in relation to the basic financial statements taken as a whole.

James G. Zupka, CPA, Inc.
Certified Public Accountants

December 9, 2009

CINCINNATI METROPOLITAN HOUSING AUTHORITY
Management's Discussion and Analysis
June 30, 2009

This discussion and analysis provides the reader with a narrative overview and financial analysis of Cincinnati Metropolitan Housing Authority's (CMHA) financial activities and performance for the year ended June 30, 2009. This section should be read in conjunction with the audited financial statements and accompanying notes.

Financial Highlights

- CMHA's total assets and liabilities were \$289,536,981 and \$38,686,369, respectively; therefore, net assets were \$250,850,612 as of June 30, 2009.
- Total revenues, including capital contributions and total expenses, were \$115,038,293 and \$112,477,612, respectively, resulting in a \$2,560,681 change in net assets for fiscal year 2009.
- Fiscal year 2009 resulted in a net decrease in cash and cash equivalents of \$1,916,186, a decrease in investments of \$2,766,799, and an increase of \$544,201 in capital assets, which includes Construction in Progress.

Overview of the Financial Statements

Management's Discussion and Analysis - The Management's Discussion and Analysis is intended to serve as an introduction to the Authority-wide financial statements. The Authority-wide financial statements and Notes to Financial Statements included in the Audit Report were prepared in accordance with GAAP applicable to governmental entities in the United States of America for Proprietary Fund types and in compliance with the regulations set forth in GASB Statement No. 34.

Authority-wide Financial Statements - The Authority-wide financial statements are designed to provide readers with a broad overview of CMHA's finances in a manner similar to a private-sector business. The statements consist of the Statement of Net Assets, the Statement of Revenues, Expenses, and Changes in Net Assets, and the Statement of Cash Flows.

Notes to Financial Statements - The Notes to Financial Statements provide additional information that is essential to a full understanding of the data provided in the Authority-wide financial statements.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
Management's Discussion and Analysis
June 30, 2009
(Continued)

Overview of the Financial Statements

CMHA has many programs that are consolidated into a single enterprise fund. The major programs consist of the following:

Conventional Public Housing - Under the Conventional or Low Rent Housing Program, CMHA rents units that it owns to low income households. The Conventional Public Housing Program is operated under an Annual Contributions Contract (ACC) with the U.S. Department of Housing and Urban Development (HUD), and HUD provides Operating Subsidy and Capital Grant Funding to enable CMHA to provide the housing at a rent that is based upon approximately 30 percent of household income.

Capital Fund Program - The Conventional Public Housing Program also includes the Capital Fund Program, which is the primary funding source for physical and management improvements to CMHA's properties. The formula funding methodology used is based upon the number of units, including the bedroom sizes and the age of the buildings/units.

Housing Choice Voucher Program - Under the Housing Choice Voucher Program, CMHA administers contracts with independent landlords that own the property. CMHA subsidizes the participants' rent through the Housing Assistance Payment made to the landlord. The program is administered under an Annual Contributions Contract (ACC) with HUD. HUD provides Annual Contributions Funding to enable CMHA to structure a lease that sets the participants' rent at approximately 30 percent of household income.

HOPE VI Grant - The HOPE VI grants are programs funded by HUD for redevelopment of CMHA's properties. It is a mixed financing and mixed-use development with homeownership opportunities for public housing residents.

Overview of CMHA's Financial Position and Operations

Net Assets

CMHA's total assets decreased by \$3.1 million during fiscal year 2009. The combination of cash and cash equivalents and investments decreased by \$4.7 million over fiscal year 2008. The decrease in cash and equivalents resulted from the drawing down of escrow funds used for Capital Fund financing activities. This net change is represented within the Business Activities Program.

Total liabilities decreased in fiscal year 2009 by \$5.6 million. This was primarily due to the payment of long term debt and the timing of the disbursement of payables.

The change in invested capital assets and net of related debt reflects a reclassification of equity to restricted net assets from the prior year.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
Management's Discussion and Analysis
June 30, 2009
(Continued)

Statement of Net Assets (in Millions)			
(Condensed)			
	2009	2008	Change
<u>ASSETS</u>			
Current Assets	\$ 40.7	\$ 49.6	\$ (8.9)
Other Assets	38.5	33.3	5.2
Capital Assets	210.3	209.7	0.6
TOTAL ASSETS	289.5	292.6	(3.1)
<u>LIABILITIES AND NET ASSETS</u>			
<u>Liabilities</u>			
Current Liabilities	9.7	13.0	(3.3)
Long-term Liabilities	29.0	31.3	(2.3)
Total Liabilities	38.7	44.3	(5.6)
<u>Net Assets</u>			
Invested in Capital Assets, Net of Related Debt	178.8	174.7	4.1
Restricted Net Assets	15.9	16.6	(0.7)
Unrestricted Net Assets	56.1	57.0	(0.9)
Total Net Assets	250.8	248.3	2.5
TOTAL LIABILITIES AND NET ASSETS	\$ 289.5	\$ 292.6	\$ (3.1)

Revenues, Expenses, and Changes in Net Assets

CMHA's operational income for fiscal year 2009 increased by \$4.3 million on a consolidated basis. This is largely due to an increase in Governmental Grants revenue. As a result of funding shortfalls from HUD, CMHA was forced to implement a reduction in staffing agency-wide. The direct result was a reduction in salaries and benefits. During fiscal year 2009, CMHA completed the demolition of English Woods, which resulted in a reduction of depreciable assets from the prior year.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
Management's Discussion and Analysis
June 30, 2009
(Continued)

Statement of Revenues, Expenses, and Changes in Net Assets (in Millions)			
(Condensed)			
	2009	2008	Change
<u>Operating Revenues</u>			
Operating/Other Revenues	\$ 13.1	\$ 14.1	\$ (1.0)
Governmental Revenues	99.9	96.6	3.3
Total Operating Revenues	113.0	110.7	2.3
<u>Operating Expenses</u>			
Operating Expenses	103.3	103.1	0.2
Depreciation Expense	8.0	11.0	(3.0)
Total Operating Expenses	111.3	114.1	(2.8)
Net Operating Income	1.7	(3.4)	5.1
Total Non-Operating Revenues/Expenses	0.8	1.6	(0.8)
Change in Net Assets	2.5	(1.8)	4.3
Net Assets, Beginning of Year	248.3	250.9	(2.6)
Prior Year Adjustment	0.0	(0.4)	0.4
Adjusted Net Assets, Beginning of Year	248.3	250.5	(2.2)
Equity Transfers for Development	0.0	(0.4)	0.4
Net Assets, End of Year	\$ 250.8	\$ 248.3	\$ 2.5

Budgetary Highlights

For the year ended June 30, 2009, individual program or grant budgets were prepared by CMHA and were approved by the Board of Commissioners. The budgets were primarily used as a management tool and have no legal stature. The budgets were prepared in accordance with accounting procedures prescribed by the applicable funding agency.

The greatest budgetary challenges faced by CMHA involved the reduction of operating funds due to the pro-ration factors used in the funding calculations by HUD.

Capital Assets and Debt Administration

As of June 30, 2009, CMHA's investment in capital assets for its Proprietary Fund was \$210,277,275 (net of accumulated depreciation). This represents an increase of \$0.6 million from fiscal year 2008.

Major capital assets purchased increased \$9.1 million during fiscal year 2009. The increase pertained to new construction and construction in progress as it relates to CMHA's Capital Fund and HOPE VI programs.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
Management's Discussion and Analysis
June 30, 2009
(Continued)

CMHA's long-term portion of debt as of June 30, 2009 was \$27,017,224. The long-term debt decreased \$1.4 million from fiscal year 2008. This reduction in long-term debt was primarily due to payments on existing debt and CMHA refraining from incurring additional long-term debt.

Economic Factors

The following factors were considered in preparing CMHA's budget for the fiscal year 2010:

- Anticipated the banking environment having an adverse impact on interest revenue and bank fees associated with the economic downturn.
- Higher occupancy and utilization, as well as lower tenant rental contributions in association with the economic downturn.
- Planning for increasing reserve levels in anticipation of significant decreases in Operating Subsidy for Low Income Public Housing with the end of the frozen rolling base as part of an energy savings contract set to expire in 2013.
- Change in funding methods, levels, and pro-ratio factors for Housing Choice Voucher, Low Income Public Housing, Capital Fund, and Replacement Housing Factor programs.
- Anticipated cost increases within the Housing Choice Voucher Program and reductions in revenue were projected.
- Inflationary and weather condition factors which affect utility rates and cost of operational materials and supplies.

Contacting CMHA

Questions concerning any of the information provided in this report or requests for additional information should be addressed to Richard Rust, Executive Director, Cincinnati Metropolitan Housing Authority, 16 West Central Parkway, Cincinnati, Ohio 45202.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
STATEMENT OF NET ASSETS
JUNE 30, 2009

ASSETS

Current Assets

Cash and Cash Equivalents - Unrestricted	\$ 11,469,418
Cash and Cash Equivalents - Restricted	15,409,638
Investments at Fair Value - Unrestricted	1,023,312
Investments at Fair Value - Restricted	4,756,986
Accounts Receivable, Net of Allowance for Doubtful Accounts	4,585,598
Due from Other Governments	2,750,351
Inventory, Net of Allowance of Obsolescence	342,641
Prepaid Expenses	357,842
Total Current Assets	<u>40,695,786</u>

Property and Equipment

Land	26,998,554
Buildings and Building Improvements	232,359,200
Furniture, Equipment, and Machinery	3,042,869
Construction in Progress	125,023,962
	<u>387,424,585</u>
Less Accumulated Depreciation	(177,147,310)
Total Property and Equipment	<u>210,277,275</u>

Other Assets

Interest Receivable	28,829,383
Insurance Deposits	9,559,314
Insurance Deposits	175,223
Total Other Assets	<u>38,563,920</u>

TOTAL ASSETS	<u>\$ 289,536,981</u>
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CINCINNATI METROPOLITAN HOUSING AUTHORITY
STATEMENT OF NET ASSETS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

LIABILITIES AND NET ASSETS

Current Liabilities

Accounts Payable	\$ 1,502,626
Accrued Wages and Taxes Payable	617,986
Accrued Compensated Absences	203,114
Other Accrued Liabilities	766,185
Due to Other Governments	1,198,889
Notes and Bonds Payable - Current Portion	4,421,652
Prepaid Rents	10,691
Payable from Restricted Assets:	
Resident Security Deposits	1,015,609
Total Current Liabilities	<u>9,736,752</u>

Noncurrent Liabilities

Notes Payable, Net of Current Portion	27,017,224
Workers' Compensation Contingency	188,405
Accrued Compensated Absences	1,074,248
Payable from Restriced Assets:	
Family Self-Sufficiency Escrows	669,740
Total Noncurrent Liabilities	<u>28,949,617</u>
Total Liabilities	<u>38,686,369</u>

Net Assets

Investment in Capital Assets, Net of Related Debt	178,838,399
Restricted Net Assets	15,947,276
Unrestricted Net Assets	56,064,937
Total Net Assets	<u>250,850,612</u>

TOTAL LIABILITIES AND NET ASSETS	<u>\$ 289,536,981</u>
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CINCINNATI METROPOLITAN HOUSING AUTHORITY
STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS
FOR THE YEAR ENDED JUNE 30, 2009

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<u>Operating Revenues</u>	
Rental Revenue	\$ 10,497,755
Governmental Revenue	92,934,972
Other Revenue	2,576,031
Total Operating Revenues	<u>106,008,758</u>
<u>Operating Expenses</u>	
Administrative	18,607,253
Tenant Services	1,183,950
Utilities	8,152,764
Ordinary Maintenance and Operations	9,347,550
Protective Services	714,186
General Expenses	2,888,852
Housing Assistance Payments	62,357,593
Depreciation	8,037,599
Total Operating Expenses	<u>111,289,747</u>
Operating Income	<u>(5,280,989)</u>
<u>Nonoperating Revenues (Expenses)</u>	
Loss on Sale of Capital Assets	(426,227)
Interest Revenue - Unrestricted	2,102,735
Interest Revenue - Restricted	368,204
Interest Expense	(1,187,865)
Total Nonoperating Revenues (Expenses)	<u>856,847</u>
Change in Net Assets before Capital Grants Revenue	<u>(4,424,142)</u>
Capital Grants Revenue	<u>6,984,823</u>
Net Change in Net Assets	2,560,681
Net Assets - Beginning of the Year as Reported	<u>248,289,931</u>
Net Assets - End of the Year	<u><u>\$ 250,850,612</u></u>

**CINCINNATI METROPOLITAN HOUSING AUTHORITY
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2009**

<u>Cash Flows from Operating Activities</u>	
Receipts from Residents and Other Deposits	\$ 9,977,798
Governmental Operating Revenues	92,798,596
Other Receipts	2,541,172
Administrative Expenses	(18,600,943)
Other Operating Expenses	(23,200,052)
Housing Assistance Payments	(62,357,593)
Net Cash Provided by Operating Activities	<u>1,158,978</u>
<u>Cash Flows from Capital and Related Financing Activities</u>	
Purchases of Capital Assets	(9,069,606)
Principal Paid on Capital Debt	(3,547,095)
Cash from Asset Sales	61,579
Interest Paid	(1,187,865)
Capital Grants	6,984,823
Net Cash Provided by Capital and Related Financing Activities	<u>(6,758,164)</u>
<u>Cash Flows from Investing Activities</u>	
Investment Proceeds	2,766,799
Investment Income	916,201
Net Cash Used in Investing Activities	<u>3,683,000</u>
Net Increase in Cash and Cash Equivalents	(1,916,186)
Cash and Cash Equivalents - Beginning of Year	<u>28,795,242</u>
Cash and Cash Equivalents - End of Year	<u>\$ 26,879,056</u>
<u>Reconciliation of Net Operating Income to Net Cash Provided by Operating Activities</u>	
Operating Income (Loss)	\$ (5,280,989)
Adjustments to Reconcile Net Operating Income to Net Cash Provided by Operating Activities	
Depreciation	8,037,599
Increase in Tenants Receivable	(525,636)
Decrease in Due To/From Other Governments	772,011
Increase in Other Assets/Receivables	(61,892)
Decrease in Inventory	60,061
Decrease in Prepaid Expenses	233,955
Decrease in Intergovernmental Payable	(908,387)
Increase in Security Deposits	27,033
Decrease in Accounts Payable	(323,611)
Decrease in Compensated Absences	(222,949)
Increase in Accrued Liabilities	156,953
Increase in Deferred Revenue	5,679
Decrease in Other Liabilities	(810,849)
Net Cash Provided by Operating Activities	<u>\$ 1,158,978</u>

**CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009**

NOTE 1: **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

A. **Organization**

The Cincinnati Metropolitan Housing Authority (CMHA) is a public body corporate and politic created under the laws of the State of Ohio and was organized for the purposes of acquiring, developing, leasing, operating, and administering low-rent housing programs for qualified individuals.

B. **Reporting Entity**

The governing body of CMHA is a Board of Commissioners, which is composed of five members. The members are appointed as follows: Two (2) by the City Manager of Cincinnati, one (1) by the Hamilton County Commissioners, one (1) by the Court of Common Pleas, and one (1) by the Probate Court. The Board appoints a Chief Executive Officer to administer the business of CMHA. CMHA is not considered a component unit of the City of Cincinnati, as the Board independently oversees CMHA's operations.

The accompanying financial statements comply with the provisions of Governmental Accounting Standards Board ("GASB") Statement No. 14, *The Financial Reporting Entity*, and Statement No. 39, *Determining Whether Certain Organizations Are Component Units*, in that financial statements include all organizations, activities, and functions for which CMHA is financially accountable. Financial accountability is defined by the component unit being fiscally dependent on CMHA. Based upon the application of these criteria, the reporting entity had no component units.

The financial statements of CMHA include Low-Rent Public Housing under Annual Contributions Contract C-984, Section 8 Housing Assistance Program under Annual Contributions Contract C-5034, Local Initiatives Programs, and the Hamilton County Affordable Housing Program.

C. **Summary of HUD Programs**

The accompanying financial statements include the activities of the Housing Programs subsidized by HUD. A summary of the most significant of these programs and the related contracts with HUD is provided below.

1. **Annual Contributions Contract – Low Rent Public Housing**

a. **Low Rent Public Housing**

This type of housing consists of apartments and single-family dwellings owned and operated by CMHA. Funding is provided by tenant rent payments and subsidies provided by HUD.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 1: **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES** (Continued)

C. **Summary of HUD Programs** (Continued)

1. **Annual Contributions Contract – Low Rent Public Housing** (Continued)

b. **Modernization and Development**

Substantially all additions to land, buildings, and equipment are accomplished through the HOPE VI Program or Capital Fund Program. These programs add to, replace, or materially upgrade deteriorated portions of CMHA's housing units. Funding is provided through programs established by HUD.

2. **Annual Contributions Contract – Housing Assistance Payments Program**

Housing Choice Vouchers and Moderate Rehabilitation

These are housing programs wherein low-income tenants lease housing units directly from private landlords rather than through CMHA. HUD contracts with private landlords to make assistance payments for the difference between the approved contract rent and the actual rent paid by low-income tenants.

D. **Basis of Presentation of Accounting**

In accordance with uniform financial reporting standards for HUD housing programs, the financial statements are prepared in accordance with U.S. generally accepted accounting principles (GAAP).

CMHA uses the proprietary fund type to report on its financial position and the results of its operations. Fund accounting is designed to demonstrate legal compliance and to aid financial management by segregating transactions related to certain government functions or activities reported in other funds. Funds are classified into three categories: governmental, proprietary, and fiduciary. CMHA uses the proprietary category for its programs.

Based on compelling reasons offered by HUD, CMHA reports under the proprietary fund type (enterprise fund), which uses the accrual basis of accounting. Proprietary funds are used to account for CMHA's ongoing activities, which are similar to those found in the private sector. The proprietary fund type which is used by CMHA is the enterprise fund.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 1: **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES** (Continued)

D. **Basis of Presentation of Accounting** (Continued)

The enterprise fund is used to account for the operations that are financed and operated in a manner similar to private business enterprises where the intent is that the costs (expenses, including depreciation) of providing goods or services to the general public on a continuing basis be financed or recovered primarily through user charges, or where it has been decided that periodic determination of revenue earned, expenses incurred, and/or net income is appropriate for capital maintenance, public policy, management control, accountability, or other purposes.

Pursuant to the election option made available by GASB Statement No. 20, *Accounting and Financial Reporting for Proprietary Funds and other Governmental Entities That Use Proprietary Fund Accounting*, CMHA has the option of following subsequent FASB guidance for their business-type and enterprise funds issued prior to December 1, 1989, to the extent that those standards do not conflict with or contradict guidance of the Government Accounting Standards Board. CMHA has elected not to apply those FASB statements and interpretations issued after November 30, 1989 to its enterprise fund.

E. **Budgets**

Budgets are prepared on an annual basis for each major operating program and are used as a management tool throughout the accounting cycle. The modernization and development budgets are adopted on a "project length" basis. Budgets are approved by the Board of the Housing Authority and submitted to HUD for approval, when applicable. Budgets are not, however, legally adopted nor required for financial statement presentation.

F. **Revenue Recognition**

Subsidies and grants received from HUD and other grantors are generally recognized during the periods to which they relate and all eligibility requirements have been satisfied. Eligibility requirements include timing requirements, which specify the year when the resources are required to be used or the year when use is first permitted; matching requirements, in which CMHA must provide local resources to be used for a specified purpose; and expenditure requirements, in which the resources are provided to CMHA on a reimbursement basis. Tenant rental revenues are recognized during the period of occupancy. Other receipts are recognized when the related expenses are incurred. Expenses are recognized as incurred.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

G. Cash Equivalents

For the purposes of the statement of cash flows, cash and cash equivalents include all highly liquid debt instruments with original maturities of three months or less.

H. Restricted Cash and Cash Equivalents

Cash and cash equivalents have been classified as restricted on the statement of net assets for Family Self-Sufficiency escrows, unused HAP income, residents' security deposits, funds escrowed within the Capital Fund Financing Program, and other HUD restricted funds that are to be used for HUD projects and development.

I. Receivables /Bad Debts

Bad debts are provided on the allowance method and are based on management's evaluation of the collectability of outstanding tenant receivable balances at year end.

J. Interprogram Receivables and Payables

During the course of normal operations, CMHA has numerous transactions between programs. Interprogram receivables/payables are all current and are the result of the use of the Central Office Cost Center bank account as the common paymaster for shared costs of CMHA. Cash settlements are made periodically and all interprogram balances net zero. Interprogram balances are eliminated for financial statement presentation.

K. Investments

Investments are recorded at fair value. Fair value generally represents quoted market prices for investments traded in the public marketplace. Investment income, including changes in the fair value of investments, is recorded as non-operating revenue in the operating statements. Investment income is recognized and recorded when earned and is allocated to programs based on monthly investment balances. Investment instruments pertaining to HUD programs consist only of items specifically approved by both HUD requirements and the requirements of the State of Ohio.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 1: **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES** (Continued)

L. **Inventories**

Inventories (consisting of materials and supplies) are valued at cost using the first in, first out (FIFO) method. CMHA establishes an allowance for obsolete inventory, to account for adjustments to cost due to damage, deterioration, or obsolescence. CMHA relies upon its periodic (annual) inventory for financial reporting purposes. In accordance with the consumption method, inventory is expensed when items are actually placed in service.

M. **Prepaid Items**

Payments made to vendors for goods or services that will benefit future periods are recorded as prepaid items.

N. **Restricted Assets**

Certain assets may be classified as restricted assets on the statement of net assets, because their use is restricted by contracts or agreements with outside third parties and lending institutions, or laws and regulations of other governments.

Net assets invested in capital assets – net of related debt consists of capital assets, net of accumulated depreciation, reduced by the outstanding balance of any borrowing used for the acquisition construction or improvement of those assets.

It is CMHA's policy to first apply restricted resources when an expense is incurred for purposes for which both restricted and unrestricted net assets are available.

O. **Use of Estimates**

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent liabilities on the date of the financial statements and reported amounts of revenues and expenditures during the reported period. Actual results could differ from those estimates.

P. **Fair Value of Financial Instrument**

The carrying of CMHA's financial instruments at June 30, 2009, including cash, investments, accounts receivable, and accounts payable closely approximate fair value.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Q. Capital Assets

Book Value

All purchased capital assets are valued at cost when historical records are available. When no historical records are available, capital assets are valued at estimated historical cost.

Land values were derived from development closeout documents.

Donated capital assets are recorded at their fair value at the time they are received.

Donor imposed restrictions are deemed to expire as the asset depreciates.

All normal expenditures of preparing an asset for use are capitalized when they meet or exceed the capitalization threshold.

Depreciation

Pursuant to the enterprise GAAP method, cost of the buildings and equipment is depreciated over the estimated useful lives of the related assets on a composite basis using the straight-line method.

Depreciation commences on modernization and development additions in the year following completion.

The useful lives of buildings and equipment for purposes of computing depreciation are as follows:

Buildings	40 years
Building Modernization	10 years
Office and Other Equipment	5 years

Maintenance and Repairs Expenditures

Maintenance and repairs expenditures are charged to operations when occurred. Betterments in excess of \$5,000 are capitalized. When buildings and equipment are sold or otherwise disposed of, the asset account and related accumulated depreciation account are relieved and any gain or loss is included in operations.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

R. Compensated Absences

In accordance with GASB Statement No. 16, *Accounting for Compensated Absences*, vacation and sick leave are accrued as liabilities when an employee's right to receive compensation is attributable to services already rendered and it is probable that the employee will be compensated through paid time off or some other means, such as cash payments at termination or retirement. Leave time that has been earned but is unavailable for use as paid time off or as some other form of compensation because the employee has not met the minimum service time requirement, is accrued to the extent that it is considered to be probable that the conditions for compensation will be met in the future.

Sick leave is accrued using the vesting method, whereby the liability is recorded on the basis of leave accumulated by employees who are eligible to receive termination payments as of year end. This is computed based on various percentages of sick time accumulated, as defined by their respective bargaining unit contracts, for employees who have completed ample service time with CMHA. These employees are expected to become eligible in the future to receive such payments.

S. Equity Transfers

Transfers presented on the accompanying combined statements represent the transfer of equity between programs for approved uses, such as the transfer of unrestricted funds, or the transfer of equity for closed programs/grants to their respective program, as required by HUD reporting guidelines.

T. Annual Contribution Contracts

Annual contribution contracts provide that HUD shall audit and examine the records of public housing authorities. Accordingly, final determination of CMHA's financing and contribution status for the annual contribution contracts is the responsibility of HUD based upon financial reports submitted by CMHA.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 2: DEPOSITS AND INVESTMENTS

The provisions of the Ohio Revised Code, CMHA's written investment policy, and HUD regulations govern the investment and deposit of CMHA monies. Only banks located in Ohio and domestic building and loan associations are eligible to hold public deposits. HUD requires authorities to invest excess HUD program funds in obligations of the United States or certificates of deposit of any other federally-insured instruments. CMHA is also generally permitted to invest its monies in certificates of deposit, savings accounts, money market accounts, the State Treasurer's investment pool (STAROhio), and obligations of certain political subdivisions of Ohio and the United States government and its agencies. These investments must mature within three years of their purchase. CMHA may also enter into repurchase agreements with any eligible depository of any eligible dealer for a period not exceeding thirty days.

Public depositories must give security for all public funds on deposit. HUD requires specific collateral on individual accounts in excess of amounts insured by the Federal Deposit Insurance Corporation (FDIC). Any public depository in which CMHA places deposits must pledge as collateral eligible securities of aggregate market value equal to the excess of deposits not insured by the Federal Deposit Insurance Corporation (FDIC). The securities pledged as collateral are pledged to a pool for each individual financial institution in amounts equal to at least 105 percent of the carrying value of all public deposits held by each institution. Obligations that may be pledged as collateral are limited to obligations of the United States and its agencies and obligations of any state, county, municipal corporation, or other authority. Obligations furnished as security must be held by CMHA or with an unaffiliated bank or trust company for the account of CMHA.

Repurchase agreements must be secured by the specific qualifying securities upon which the repurchase agreements are based. These securities must mature or be redeemable within five years of the date of the related repurchase agreement. The market value of the securities subject to a repurchase agreement must exceed the value of the principal by 2 percent and be marked to market daily. State law does not require security for public deposits and investments to be maintained in CMHA's name.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 2: **DEPOSITS AND INVESTMENTS** (Continued)

A. **Deposits**

At year end, the carrying amount of CMHA's deposits was \$26,879,056 (including \$15,409,638 of restricted funds and \$1,600 of petty cash) and the bank balance was \$27,289,732. Of the bank balance, \$27,289,732 was covered by federal depository insurance

Custodial Credit Risk: Custodial credit risk is the risk that in the event of the bank failure, CMHA's deposits may not be returned to it. CMHA does not have a custodial credit risk policy.

B. **Investments**

CMHA's investments at June 30, 2009 are summarized below:

<u>Investment</u>	<u>Maturity Year</u>	<u>Amount</u>	<u>Credit Rating Moody's/S&P</u>
Fifth Third Inst. Gov't. MMkt.		\$ 1,688,096	AAA
Fifth Third Inst. MMkt Core		1,023,312	AAA
Federal Home Loan Bank	12/23/2009	1,015,630	AAA
Federal National Mtg. Assn.	4/28/2010	1,020,310	AAA
Federal Home Loan Mtg. Corp.	11/5/2010	1,032,950	AAA
Total		<u>\$ 5,780,298</u>	

Custodial Credit Risk

Custodial credit risk of investments is the risk that, in the event of a failure of a counter-party, CMHA will not be able to recover the value of its investments or collateral securities in the possession of an outside party. CMHA employs the use of "safekeeping" accounts to hold and maintain custody of its investments as identified within this policy and as a means of mitigating this risk.

Interest Rate Risk

Interest rate risk is defined as the risk that CMHA will incur fair value losses arising from rising interest rates. Such risk is mitigated by the investment policy which limits investments to certain maximum maturities. As a rule, unless specified otherwise within the policy, investments are to have a maximum maturity of three years unless the investment is matched to a specific expenditure. The context of a specific investment purchase must be weighed in proportion to the remainder of the existing investment portfolio and the "prudent investor" rule to attempt to limit such risk.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 2: **DEPOSITS AND INVESTMENTS** (Continued)

B. **Investments** (Continued)

Interest Rate Risk (Continued)

The three credit risk categories for investments are defined as follows:

1. Insured or registered, or securities held by the government or its agent in the government's name.
2. Uninsured and unregistered, with securities held by the counter-party's trust department or agent in the government's name.
3. Uninsured and unregistered, with securities held by the counter-party, or by its trust department or agent but not in the government's name.

NOTE 3: **ACCOUNTS RECEIVABLE**

Tenants (Net of Allowance for Doubtful Accounts of \$42,399)	\$ 704,178
The Affiliates/Project Monitoring; Other Receivables	<u>3,881,420</u>
Total Accounts Receivable	<u>\$ 4,585,598</u>

NOTE 4: **INTERPROGRAM TRANSFERS**

CMHA will make cash transfers between its various programs as outlined in the federal regulations and authorized and approved by CMHA's Board of Commissioners. Interprogram balances are eliminated for financial statement presentation.

Fund	Due from Other Fund	Due to Other Fund
Local Business Initiatives	\$ 2,219,352	\$ 2,284,887
Low Rent Public Housing	2,914,467	317,752
Central Office Cost Center	761,784	48,229
Housing Choice Vouchers	48,088	140,062
Affordable Housing HOME Investment Partnership Program	0	94,160
Section 8 Moderate Rehabilitation M0002SRO001	481	615
Section 8 Moderate Rehabilitation M0004MR0002	672	860
Section 8 Moderate Rehabilitation M0004MR40004	2,906	3,716
Section 8 Moderate Rehabilitation M0004MR0005	144	184
Section 8 Moderate Rehabilitation M0002SC0002	481	615
Revitalization of Severly Distressed Public Housing	0	164,104
Resident Opportunity and Supportive Services	0	21,313
Public Housing Capital Fund	<u>1,322,071</u>	<u>4,193,949</u>
Totals	<u>\$ 7,270,446</u>	<u>\$ 7,270,446</u>

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 5: DUE FROM OTHER GOVERNMENTS

U.S. Department of Housing and Urban Development \$2,750,351

NOTE 6: NOTES RECEIVABLE

All notes receivable are the results of financing for the Lincoln Partnership, the Laurel Hope VI Partnership, and the Springdale Senior Ltd. Partnership's Revitalization projects. The majority of these receivables are to be paid 40 years from the date of the note. The first \$50,000 is forgiven at 10 percent per year over 10 years, and any amount over \$50,000 will be due on the sale of the homes or 30 years from the date of the note. No portion of the notes receivable are to be paid within the next year. The following schedule summarizes the details pertaining to the notes receivable.

Amount	Maker	Date of Note	Interest	Maturity Date
	Lincoln Court Parnership	LCI - 3/20/01 LCII - 3/20/01 LCIII - 2/28/02 LCIV - 08/26/03	AFR	40 Years
\$ 10,984,643	Laurel Home Partnership	LHI - 10/24/02 LHII - 12/15/03 LHIV - 11/22/02 LHIV - 11/01/04 LHV - 9/30/06	AFR	40 Years
14,074,942	Springdale Senior Ltd.	3/27/2007	AFR	50 Years
885,000	Partnership			
<u>2,884,798</u>	Other			
<u>\$ 28,829,383</u>				

Ground Lease

In regards to the above notes receivable, the Lincoln Court Partnership and Laurel Home Partnership entered into a 75-year ground lease in the total amount of \$837,000. Payments totaling \$297,000 were made upon execution of the agreement. The remaining \$540,000 is evidenced by notes receivable from the developer.

The terms commenced November 8, 2000, and will end November 8, 2075. In addition, each Partnership is required to pay an annual rent payment equal to 10 percent of the Project's net income. Other than real estate taxes, for which CMHA has responsibility, each Project is responsible for paying all charges associated with the property. The ground lease contains other restrictive covenants relating to the use of the property as more fully described in the agreement.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 6: **NOTES RECEIVABLE** (Continued)

Pursuant to the ground lease, the Partnerships are to make a PILOT payment each year to 10 percent of rental income, as defined in the agreement.

NOTE 7: **CAPITAL ASSETS**

	Balance				Balance
	June 30, 2008	Additions	Reclass	Deletions	June 30, 2009
Capital Assets Not Being Depreciated					
Land	\$ 26,998,554	\$ 0	\$ 0	\$ 0	\$ 26,998,554
Construction in Progress	114,862,633	9,056,728	1,104,601	0	125,023,962
Total Capital Assets Not Being Depreciated	141,861,187	9,056,728	1,104,601	0	152,022,516
Capital Assets Being Depreciated					
Buildings and Improvements	240,958,302	0	(1,104,601)	(7,494,501)	232,359,200
Furniture, Equipment, and Machinery	3,375,681	12,878	0	(345,690)	3,042,869
Subtotal Capital Assets Being Depreciated	244,333,983	12,878	(1,104,601)	(7,840,191)	235,402,069
Accumulated Depreciation -					
Buildings and Improvements	(173,632,104)	(7,948,561)	0	7,006,695	(174,573,970)
Furniture and Equipment	(2,829,992)	(89,038)	0	345,690	(2,573,340)
Subtotal Accumulated Depreciation	(176,462,096)	(8,037,599)	0	7,352,385	(177,147,310)
Depreciable Assets, Net	67,871,887	(8,024,721)	(1,104,601)	(487,806)	58,254,759
Total Capital Assets, Net	\$ 209,733,074	\$ 1,032,007	\$ 0	\$ (487,806)	\$ 210,277,275

NOTE 8: **COMPENSATED ABSENCES PAYABLE**

CMHA follows GASB Statement No.16, *Accounting for Compensated Absences* to account for compensated absences. Accrued vacation is paid upon termination. Sick leave is paid to exempt employees who have at least 10 years service and voluntarily resign, retire, or are laid off from CMHA, at the level of 50 percent of their unused leave balance up to a maximum payment of 1,000 hours less two times the amount of sick usage over the prior three (3) years.

For the AFSCME union, sick leave shall be forfeited upon the employee's separation for any reason except retirement in which the payout will be 50 percent up to a maximum of 600 hours.

For the IUOE union, sick leave shall be forfeited upon the employee's separation for any reason except retirement in which the level of payout will be a percentage of unused leave based on years of service with a maximum of 40 percent with 30 or more years of continuous service.

For the Building Trades union, sick leave shall be forfeited upon the employee's separation for any reason except for retirement, in which the level of payout will be a percentage of unused leave based on years of service with a maximum of 30 percent with 30 or more years of continuous service.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 8: COMPENSATED ABSENCES PAYABLE (Continued)

At June 30, 2009, total compensated absences liability is \$1,277,362, of which \$203,114 is current and \$1,074,248 is long-term.

Schedule of Change in Compensated Absences					
June 30, 2008					
Current	Long-Term				
Portion	Portion	Total	Additions	Reductions	June 30, 2009
\$ 286,522	\$ 1,213,789	\$ 1,500,311	\$ 175,979	\$ 398,928	\$ 1,277,362

NOTE 9: OTHER ACCRUED LIABILITIES

Accrued Workers' Compensation - Current Portion	\$ 182,398
Contract Retainages	310,855
Insurance Claims	212,255
Other	60,677
Total Other Accrued Liabilities	\$ 766,185

NOTE 10: DUE TO OTHER GOVERNMENTS

U.S. Department of Housing and Urban Development	\$ 589,766
City of Cincinnati - Payment in Lieu of Taxes (PILOT)	609,123
Total Due to Other Governments	\$ 1,198,889

NOTE 11: NOTES PAYABLE – FANNIE MAE

These notes were acquired to assist in the process of development and are comparable to a line of credit. The proceeds are drawn from Fannie Mae by CMHA and are either used to purchase property while awaiting HUD approval for funding or are re-loaned to a partner during the construction of mixed finance developments. When loaned in conjunction with the construction of mixed finance developments, interest rates and terms with the developer are approximately equal to CMHA's interest rates with Fannie Mae.

At June 30, 2009, CMHA has \$2,927,146 in an outstanding note with Fannie Mae. The note expires on December 05, 2012 and carries a maximum amount of \$10,000,000. The entire amount is considered to be current.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 12: NOTES PAYABLE

Authority Program	Principal Balance	Current Portion	Long-Term Portion	Payee	Interest Rate	Note Date
Hamilton County	\$ 1,000,000	\$ 0	\$ 1,000,000	HOME	2.00%	1/1996
Hamilton County	1,018,676	0	1,018,676	CDBG	2.00%	03/1998
Hamilton County	1,200,000	0	1,200,000	HOME	2.00%	11/1998
Hamilton County	900,000	0	900,000	HOME	2.00%	10/1999
Hamilton County	1,150,000	0	1,150,000	HOME	2.00%	06/2002
Hamilton County	1,194,574	55,900	1,138,674	Fifth Third Bank	4.95%	12/2001
Hamilton County	763,264	60,442	702,822	US Bank	5.25%	12/1998
Low Rent Public Housing	2,941,020	660,689	2,280,331	CitiCapital	5.10%	08/2001
Capital Fund Financing	18,344,196	717,475	17,626,721	Fifth Third Bank	4.55%	11/2006
Total All Programs	\$28,511,730	\$ 1,494,506	\$ 27,017,224			

Hamilton County (HOME & CDBG) Loans (Items 1-5)

Hamilton County provided HOME and CDBG funds for the development of low-rent housing units in Hamilton County. These loans (and interest of 2 percent per annum) will be forgiven at the rate of 10 percent annually commencing in the sixteenth year, provided the units are preserved as low-income housing, and has no plans to convert the units to market rate.

Bank Loans (Items 6-7)

These loans were acquired to expand the affordable housing program using locally available funds. There is no capitalized interest.

CitiCapital Loan (Item 8)

This loan is in the form of a lease-purchase agreement between CMHA and CitiCapital. Proceeds of the loan were used to purchase equipment which reduces energy cost. The savings from the conservation will exceed the cost of the loan.

Capital Fund Financing (item 9)

This loan was acquired as part of a Capital Fund Financing Program of is used to fund capital improvements to existing public housing. This loan is repaid through the use of Capital Fund grants.

The following is a summary of CMHA's future annual debt service requirements for the notes payable listed above:

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 12: NOTES PAYABLE (Continued)

Maturity Date	Principal Amount	Interest Amount	Total
2010	\$ 4,421,652	\$ 1,189,001	\$ 5,610,653
2011	1,532,302	1,151,205	2,683,507
2012	1,700,929	1,082,578	2,783,507
2013	1,772,633	1,010,874	2,783,507
2014	1,298,654	945,711	2,244,365
2015-2019	7,744,958	4,025,860	11,770,818
2020-2024	8,686,452	1,658,403	10,344,855
2025-2029	4,067,418	1,790,746	5,858,164
2030-2033	213,878	43,456	257,334
Total	\$31,438,876	\$ 12,897,834	\$ 44,336,710

NOTE 13: CHANGES IN LONG-TERM LIABILITIES

	Balance June 30, 2008			Payments	Additions	Balance June 30, 2009		
	Current	Noncurrent	Total			Total	Current	Noncurrent
Notes Payable	\$ 6,574,565	\$ 28,411,406	\$ 34,985,971	\$(4,710,095)	\$ 1,163,000	\$ 31,438,876	\$ 4,421,652	\$ 27,017,224
Workers' Comp Contingency	247,090	1,008,078	1,255,168	(884,364)	0	370,804	182,399	188,405
Compensated Absences	286,522	1,213,789	1,500,311	(398,928)	175,979	1,277,362	203,114	1,074,248
Family Self-Sufficiency Funds	0	660,916	660,916	(268,441)	277,265	669,740	0	669,740
Total	\$ 7,108,177	\$ 31,294,189	\$ 38,402,366	\$(6,261,828)	\$ 1,616,244	\$ 33,756,782	\$ 4,807,165	\$ 28,949,617

NOTE 14: DEFINED BENEFIT PENSION PLAN

Ohio Public Employees Retirement System

All full-time CMHA employees participate in the Ohio Public Employees Retirement System (OPERS). OPERS administers three separate pension plans, as described below:

- The Traditional Pension Plan (TP) - a cost-sharing, multiple-employer defined benefit pension plan;
- The Member-Directed Plan (MD) - a benefit contribution plan in which the member invests both member and employer contributions (employer contributions vest over five years at 20 percent per year). Under the Member-Directed Plan, members accumulate retirement assets equal to the value of the member and (vested) employer contributions plus any investment earnings.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 14: **DEFINED BENEFIT PENSION PLAN**

Ohio Public Employees Retirement System

- The Combined Plan (CO) - a cost-sharing, multiple-employer defined benefit pension plan. Under the Combined Plan, employer contributions are invested by the retirement system to provide a formula retirement benefit similar in nature to the Traditional Pension Plan benefit. Member contributions, the investment of which is self-directed by the members, accumulate retirement assets in a manner similar to the Member-Directed Plan.

OPERS provides retirement, disability, survivor, death benefits, and annual cost of living adjustments to members of both the Traditional Pension and the Combined plans. Members of the Member-Directed Plan do not qualify for ancillary benefits. Authority to establish and amend benefits is provided by State statute per Chapter 145 of the Ohio Revised Code. OPERS issues a stand-alone financial report. Interested parties may obtain a copy by making a written request to 277 East Town Street, Columbus, Ohio 43215-4642 or by calling (614) 222-5601 or 1-800-222-7377.

The Ohio Revised Code provides statutory authority for member and employer contributions. Plan members are required to contribute 10 percent of their annual covered salary to fund pension obligations. The employer pension contribution rate for CMHA was 14 percent of covered payroll. CMHA's required contributions to OPERS for the years ended June 30, 2009, 2008, and 2007, were \$1,877,092, \$2,075,778, and \$1,990,485.

NOTE 15: **POST-EMPLOYMENT BENEFITS**

Ohio Public Employees Retirement System

The Ohio Public Employees Retirement System (OPERS) provides post-retirement health care coverage to age and service retirees with ten or more years of qualifying Ohio service credit. Health care coverage for disability benefit recipients and primary survivor recipients is available with both the Traditional and the Combined plans; however, health care benefits are not statutorily guaranteed. Members of the Member-Directed Plan do not qualify for ancillary benefits, including post-employment health care coverage. The health care coverage provided by the retirement system is considered an Other Post-Employment Benefit (OPEB) as described in GASB Statement No. 12. A portion of each employer's contribution to OPERS is set aside for the funding of post-retirement health care. The Ohio Revised Code provides statutory authority for employer contributions. The 2008 employer contribution rate was 14.00 percent of covered payroll; 7.00 percent was the portion that was used to fund health care. Contributions to the Member-Directed Plan for CMHA's fiscal year ended June 30, 2009, were \$56,879 made by CMHA and \$40,628 made by the Plan members.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 15: **OTHER POST-EMPLOYMENT BENEFITS** (Continued)

Ohio Public Employees Retirement System (Continued)

Benefits are advance-funded using the entry age normal actuarial cost method. Significant actuarial assumptions, based on OPERS' latest actuarial review performed as of December 31, 2007, include a rate of return on investments of 6.50 percent, an annual increase in active employee total payroll of 4.00 percent compounded annually (assuming no change in the number of active employees), and an additional increase in total payroll of between .50 percent and 6.30 percent based on additional annual pay increases. Health care premiums were assumed to increase at the projected wage inflation rate plus an additional factor ranging from .50 percent to 4.00 percent annually for the next 7 years. In subsequent years (8 and beyond), health care costs were assumed to increase at 4.00 percent (the projected wage inflation rate).

All investments are carried at market. For actuarial valuation purposes, a smoothed market approach is used. Assets are adjusted to reflect 25 percent of unrealized market appreciation or depreciation on investment assets annually, not to exceed a 12 percent corridor.

As of December 31, 2008, the number of active contributing participants in the Traditional Pension and Combined plans totaled 363,503. The number of active contributing participants for both plans used in the December 31, 2007, actuarial valuation was 364,076. Actual CMHA contributions for 2009 which were used to fund post-employment benefits were \$938,546. The actual contribution and the actuarially required contribution amounts are the same. The actuarial value of OPERS' net assets available for payment of benefits at December 31, 2007 (the latest information available) was \$12.8 billion. The actuarially accrued liability and the unfunded actuarial accrued liability were \$29.8 billion and \$17.0 billion, respectively.

On September 9, 2004, the OPERS Retirement Board adopted a Health Care Preservation Plan (HCPP) with an effective date of January 1, 2007. The HCPP restructures OPERS' health care coverage to improve the financial solvency of the fund in response to increasing health care costs. Member and employer contribution rates increased as of January 1, 2006, January 1, 2007, and January 1, 2008, which allowed additional funds to be allocated to the health care plan.

NOTE 16: **RISK MANAGEMENT**

CMHA is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to employees and natural disasters. CMHA maintains comprehensive insurance coverage with private carriers for real property, building contents, and vehicles. Vehicle policies include liability coverage for bodily injury and property damage. CMHA also maintains employee major medical coverage with private carriers. Employee dental coverage is provided through self-insurance.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 16: **RISK MANAGEMENT** (Continued)

Effective December 1, 1998, CMHA entered into a joint insurance pool, Ohio Housing Authority Property and Casualty, Inc (OHAPCI), with other Ohio housing authorities. The pool covers property, general liability, law enforcement liability, automobile liability, crime liability, boiler and machinery, and public officials. The Pool is intended for the public purpose of enabling housing authorities to obtain insurance coverage, to provide methods for paying claims, and to provide for a formalized, jointly administered self-insurance fund for its members.

Effective December 2005, OHAPCI joined the Public Entity Risk Consortium (PERC), a risk consortium composed of OHAPCI and four other public entity risk pools and public entities. The other five members are: 1) the Small Housing Authority Risk Pool (SHARP), composed of 39 Ohio public housing authorities; 2) Buckeye Ohio Risk Management Association, Inc. (BORMA), composed of the cities of Bowling Green, Defiance, Huron, Napoleon, Sandusky, and Willard, Ohio; 3) Midwest Pool Risk Management Agency, Inc. (MPRMA), composed of the counties of Auglaize, Hancock, Mercer, Shelby, and Van Wert, Ohio; 4) Wayne County, Ohio and Tuscarawas County, Ohio; and 5) the City of Lorain, Ohio. Other members will be added as they are approved by the existing members.

OHAPCI is a corporation governed by a Board of Trustees, consisting of a representative appointed by each of the member housing authorities. The Board of Trustees elects the officers of the corporation, with each trustee having a single vote. The Board is responsible for its own financial matters and the corporation maintains its own book of account. Budgeting and financing of OHAPCI is subject to the approval of the Board. Currently, participating housing authorities are Cincinnati, Dayton, and Youngstown. The following is a summary of insurance coverage at year-end:

Primary Property	\$250 Million/ occurrence
Earthquake	\$5 Million
Flood	\$5 Million
Casualty/General Liability	\$2 Million/occurrence
Excess Crime	\$500,000/occurrence /\$2 Million (aggregate)
Excess Liability	\$4 million
Boiler/Machinery	\$50 Million
Pollution	\$1 Million/\$2 million (aggregate)

During the year, settled claims for CMHA did not exceed the coverage provided by OHAPCI.

CMHA also has a self-insured dental and vision plan that covers all employees electing to participate. CMHA makes payments to the Plan Administrator for claims paid during the previous operating month.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED JUNE 30, 2009
(Continued)

NOTE 17: COMMITMENTS

CMHA is engaged in modernization programs funded by HUD. CMHA has entered into construction-type contracts with approximately \$3,283,000 remaining until completion.

NOTE 18: CONTINGENCIES

CMHA is a defendant in several lawsuits arising from its normal course of business. Where possible, estimates have been made and reflected in the financial statements for the effect, if any, of such contingencies. Although the outcome of these lawsuits is not presently determinable, it is the opinion of CMHA's attorney that resolution of these matters will not have a materially adverse effect on the financial condition of CMHA.

Under the terms of Federal grants, periodic audits are required and certain costs may be questioned as not being appropriate expenses under the terms of the grants. Any disallowed claims, including amounts already collected, may constitute a liability of the applicable funds. The amount, if any, of expenses which may be disallowed by the grantor cannot be determined at this time, although CMHA expects such amounts, if any, to be immaterial.

NOTE 19: RESTRICTED NET ASSETS

Section 8 Housing Programs HAP Equity	\$ 13,433,728
CFFP Equity	2,513,548
Total Restricted Net Assets	<u>\$ 15,947,276</u>

NOTE 20: LEASING ACTIVITIES (AS LESSOR)

CMHA is the lessor of dwelling units mainly to low-income residents. The rents under the resident's income as adjusted for eligible deductions regulated by HUD, although the resident may opt for a flat rent. Leases may be cancelled by the lessee at any time. CMHA may cancel the lease only for cause.

Revenues associated with these leases are recorded in the financial statements and schedules as "rental revenue." Rental revenue per dwelling unit generally remains consistent from year to year, but is affected by general economic conditions, which impact personal income and local job availability.

**CINCINNATI METROPOLITAN HOUSING AUTHORITY
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2009**

Federal Grant or Program	Federal CFDA Number	Federal Expenditures
<u>U.S. Department of Housing and Urban Development</u>		
Section 8 Project Based Cluster:		
Section 8 Moderate Rehabilitation - Low Income Housing Assistance Program	14.856	\$ 478,363
Section 8 Moderate Rehabilitation - Single Room Occupancy	14.249	51,402
Total Section 8 Project Based Cluster		<u>529,765</u>
Low Rent Public Housing	14.850	25,998,729
Revitalization of Severely Distressed Public Housing	14.866	130,739
Section 8 Housing Choice Vouchers	14.871	65,673,683
Veterans Affairs Supportive Housing	14.871	431,960
Public Housing Capital Fund Program	14.872	6,984,823
Shelter Plus Care	14.238	62,766
Total U.S. Department of Housing and Urban Development		<u>99,812,465</u>
<u>U.S. Department of Homeland Security</u>		
Disaster Housing Assistance Grant	97.109	107,330
Total U.S. Department of Homeland Security		<u>107,330</u>
TOTAL EXPENDITURES OF FEDERAL AWARDS		<u>\$ 99,919,795</u>

CINCINNATI METROPOLITAN HOUSING AUTHORITY
NOTE TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2009

NOTE 1: **BASIS OF PRESENTATION**

The accompanying Schedule of Expenditures of Federal Awards includes the federal grant activity of the Cincinnati Metropolitan Housing Authority and is presented on the basis of accounting described in the notes to the financial statements. The information in this schedule is presented in accordance with the requirements of OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Therefore, some amounts were presented in, or used in the preparation of, the financial statements.

JAMES G. ZUPKA, C.P.A., INC.
Certified Public Accountants
5240 East 98th Street
Garfield Hts., Ohio 44125

Member American Institute of Certified Public Accountants

(216) 475 - 6136

Ohio Society of Certified Public Accountants

**REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON
COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF
FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH
GOVERNMENT AUDITING STANDARDS**

Board of Commissioners
Cincinnati Metropolitan Housing Authority
Cincinnati, Ohio

Regional Inspector General for Audit
Department of Housing and Urban
Development

We have audited the financial statements of the Cincinnati Metropolitan Housing Authority, Ohio, as of and for the year ended June 30, 2009, and have issued our report thereon dated December 9, 2009. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered the Cincinnati Metropolitan Housing Authority, Ohio's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Cincinnati Metropolitan Housing Authority, Ohio's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Cincinnati Metropolitan Housing Authority, Ohio's internal control over financial reporting.

A control deficiency exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect misstatements on a timely basis. A significant deficiency is a control deficiency, or combination of control deficiencies, that adversely affects the Cincinnati Metropolitan Housing Authority, Ohio's ability to initiate, authorize, record, process, or report financial data reliably in accordance with generally accepted accounting principles such that there is more than a remote likelihood that a misstatement of the Cincinnati Metropolitan Housing Authority, Ohio's financial statements that is more than inconsequential will not be prevented or detected by the Cincinnati Metropolitan Housing Authority, Ohio's internal control.

A material weakness is a significant deficiency, or combination of significant deficiencies, that results in more than a remote likelihood that a material misstatement of the financial statements will not be prevented or detected by the Cincinnati Metropolitan Housing Authority, Ohio's internal control.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and would not necessarily identify all deficiencies in internal control that might be significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Cincinnati Metropolitan Housing Authority, Ohio's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

This report is intended solely for the information and use of the management, the Board of Commissioners, others within the entity, and federal awarding agencies and is not intended to be and should not be used by anyone other than these specified parties.

James G. Zupka, CPA, Inc.
Certified Public Accountants

December 9, 2009

JAMES G. ZUPKA, C.P.A., INC.
Certified Public Accountants
5240 East 98th Street
Garfield Hts., Ohio 44125

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**REPORT ON COMPLIANCE WITH REQUIREMENTS APPLICABLE TO
EACH MAJOR PROGRAM AND INTERNAL CONTROL OVER COMPLIANCE
IN ACCORDANCE WITH OMB CIRCULAR A-133**

Board of Commissioners
Cincinnati Metropolitan Housing Authority
Cincinnati, Ohio

Regional Inspector General of Audit
Department of Housing and Urban
Development

Compliance

We have audited the compliance of the Cincinnati Metropolitan Housing Authority, Ohio, with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) Circular A-133 *Compliance Supplement* that are applicable to each of its major federal programs for the year ended June 30, 2009. The Cincinnati Metropolitan Housing Authority, Ohio's major federal program is identified in the Summary of Auditor's Results section of the accompanying Schedule of Findings and Questioned Costs. Compliance with the requirements of laws, regulations, contracts, and grants applicable to its major federal program is the responsibility of the Cincinnati Metropolitan Housing Authority, Ohio's management. Our responsibility is to express an opinion on the Cincinnati Metropolitan Housing Authority, Ohio's compliance based on our audit.

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Cincinnati Metropolitan Housing Authority, Ohio's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our audit provides a reasonable basis for our opinion. Our audit does not provide a legal determination of the Cincinnati Metropolitan Housing Authority, Ohio's compliance with those requirements.

In our opinion, the Cincinnati Metropolitan Housing Authority, Ohio, complied, in all material respects, with the requirements referred to above that are applicable to its major federal program for the year ended June 30, 2009.

Internal Control Over Compliance

The management of the Cincinnati Metropolitan Housing Authority, Ohio, is responsible for establishing and maintaining effective internal control over compliance with requirements of laws, regulations, contracts, and grants applicable to federal programs. In planning and performing our audit, we considered the Cincinnati Metropolitan Housing Authority, Ohio's internal control over compliance with the requirements that could have a direct and material effect on a major federal program in order to determine our auditing procedures for the purpose of expressing our opinion on compliance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Cincinnati Metropolitan Housing Authority, Ohio's internal control over compliance.

A *control deficiency* is an entity's internal control over compliance exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect noncompliance with a type of compliance requirement of a federal program on a timely basis. A *significant deficiency* is a control deficiency, or combination of control deficiencies, that adversely affects the entity's ability to administer a federal program such that there is more than a remote likelihood that noncompliance with a type of compliance requirement of a federal program that is more than inconsequential will not be prevented or detected by the entity's internal control.

A *material weakness* is a significant deficiency, or combination of significant deficiencies, that results in more than a remote likelihood that material noncompliance with a type of compliance requirement of a federal program will not be prevented or detected by the entity's internal control.

Our consideration of the internal control over compliance was for the limited purpose described in the first paragraph of this section and would not necessarily identify all deficiencies in internal control that might be significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above.

This report is intended solely for the information and use of the management, the Board of Commissioners, others within the entity, and federal awarding agencies and is not intended to be and should not be used by anyone other than these specified parties.

James G. Zupka CPA, Inc.
Certified Public Accountants

December 9, 2009

CINCINNATI METROPOLITAN HOUSING AUTHORITY
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
OMB CIRCULAR A-133 & .505
JUNE 30, 2009

1. SUMMARY OF AUDITOR'S RESULTS

2009(i)	Type of Financial Statement Opinion	Unqualified
2009(ii)	Were there any material control weaknesses reported at the financial statement level (GAGAS)?	No
2009(ii)	Were there any other significant deficiencies in internal control reported at the financial statements level (GAGAS)?	No
2009(iii)	Was there any reported material noncompliance at the financial statement level (GAGAS)?	No
2009(iv)	Were there any material internal control weaknesses reported for major federal programs?	No
2009(iv)	Were there any other significant deficiencies in internal control reported for major federal programs?	No
2009(v)	Type of Major Programs' Compliance Opinion	Unqualified
2009(vi)	Are there any reportable findings under .510?	No
2009(vii)	Major Programs (list):	
	Section 8 Housing Choice Voucher Program – CFDA #14.871	
2009(viii)	Dollar Threshold: Type A\B Programs	Type A: >\$2,997,594 Type B: all others
2009(ix)	Low Risk Auditee?	No

2. FINDINGS RELATED TO THE FINANCIAL STATEMENTS REQUIRED TO BE REPORTED IN ACCORDANCE WITH GAGAS

None.

3. FINDINGS AND QUESTIONED COSTS FOR FEDERAL AWARDS

None.

CINCINNATI METROPOLITAN HOUSING AUTHORITY
STATUS OF PRIOR YEAR AUDIT FINDINGS AND RECOMMENDATIONS
JUNE 30, 2009

The prior audit report, as of June 30, 2008, included no citations or instances of noncompliance. Management letter recommendations have been corrected, repeated, or procedures instituted to prevent occurrences in this audit period.



CINCINNATI METROPOLITAN HOUSING
AUTHORITY

FIVE YEAR PLAN 2011-2015

ANNUAL PLAN FY 2011

ATTACHMENT G

Required Submission for HUD Field Office Review

PHA Certification of Compliance with the PHA Plans and Related Regulations

Civil Rights Certification

Certification for a Drug-Free Workplace

Certification of Payments to Influence Federal Transactions

Disclosure of Lobbying Activities

Resident Advisory Board (RAB) Comments

Challenged Elements

Capital Fund Program Annual Statement/Performance and Evaluation Report

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

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Cincinnati Metropolitan Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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 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 Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

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 Federal agency 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

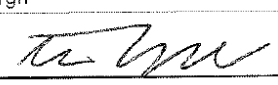
(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

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 Ted Bergh	Title Interim Executive Director
Signature X 	Date 1/18/2011

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

Cincinnati Metropolitan 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.

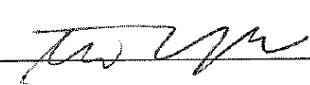
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this 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.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official Ted Bergh	Title Interim Executive Director
Signature 	Date (mm/dd/yyyy) 1/18/2011

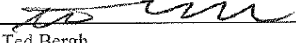
Previous edition is obsolete

form HUD 50071 (3/88)
ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

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 checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input checked="" 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	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Cincinnati Metropolitan Housing Authority (CMHA) 16 West Central Parkway Cincinnati, OH 45202 Congressional District, if known: 1st	
6. Federal Department/Agency: US Department of Housing & Urban Development	7. Federal Program Name/Description: CFDA Number, if applicable: 14.872	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
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:  Print Name: Ted Bergh Title: Interim Executive Director Telephone No.: 513/977-5660 Date: 1/18/2011	
Federal Use Only:	Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	

DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET

Approved by OMB
0348-0046

Reporting Entity: Cincinnati Metropolitan Housing Authority OH004 Page 2 of 2

No Lobbying Activities to Report

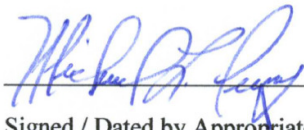
Authorized for Local Reproduction
Standard Form - LLLA

**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, Michael L. Cervay the Director of Community Development certify that the Five Year and
Annual PHA Plan of the Cincinnati Metropolitan Housing Authority is consistent with the Consolidated Plan of
City of Cincinnati, Ohio prepared pursuant to 24 CFR Part 91.



01/20/2011

Signed / Dated by Appropriate State or Local Official

**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, Susan Walsh the Director, Community Development certify that the Five Year and
Annual PHA Plan of the Cincinnati Metropolitan Housing Authority is consistent with the Consolidated Plan of
Hamilton County, Ohio prepared pursuant to 24 CFR Part 91.

Susan S. Walsh 2/10/11

Signed / Dated by Appropriate State or Local Official

April 7, 2011

Mr. Ted Bergh
Interim Executive Director
Cincinnati Metropolitan Housing Authority
16 W. Central Parkway
Cincinnati, OH 45202-7210

Mr. Lamont Taylor, Chairperson
Mr. Peter G. Witte, Vice-Chairperson
Mr. William Myles
Ms. Marisa Spears
Ms. Laura Brunner
Board of Commissioners
Cincinnati Metropolitan Housing Authority
16 West Central Parkway
Cincinnati, OH 45202-7210

Dear Mr. Bergh and members of the CMHA Board of Commissioners:

The Jurisdiction-Wide Resident Advisory Board (JRAB) writes to express its ongoing concern that CMHA is failing to engage in meaningful consultation with JRAB as required by the MOA. CMHA's most recent failure to consult has occurred in connection with the annual plan process. Therefore, JRAB objects to the CMHA's new annual plan because CMHA adopted it in violation of the MOA.

Under the MOA, CMHA had an affirmative obligation to engage in consultation with JRAB before drafting a plan for presentation to the CMHA Board for approval. The fact that the proposed plan was posted on CMHA website for a period of time before the CMHA Board meeting is beside the point. CMHA had an obligation to consult with the JRAB in advance of publishing the proposed plan for comment. In addition the opportunity to give public comment on the plan at the board meeting was clearly a meaningless process since the Board rubber-stamped the CMHA staff proposal. The MOA requires meaningful consultation at a meaningful time.

The annual plan is a key part of CMHA's operations and affects many important matters like Section 3, modernization, and many other policy matters of great interest to JRAB.

Early this year JRAB addressed you on the issue of CMHA's violations of its MOA obligations. As we said the issue was an ongoing problem and extremely serious. Unfortunately it appears that CMHA does not take the MOU seriously.

Under the circumstances, JRAB has no choice but to object to the annual plan in its entirety.

JRAB is committed to fulfilling its role as the representative of CMHA public housing residents. We urge CMHA to follow the Memorandum of Accord and include public housing residents in decision making as required by the agreement.

Sincerely,


Deloris Calhoun
President JRAB



March 29, 2011

Delorise Calhoun, President
Jurisdiction Wide Resident Advisory Board (J-RAB)
1601 Madison Road
Cincinnati, Ohio 45206

Re: Section 3 Action Plan

Dear Ms. Calhoun, Officers and Members of J-RAB:

Thank you for your participation in the development of CMHA's Section 3 Action Plan. CMHA incorporated several J-RAB recommendations. Namely, the plan incorporates a notification protocol and emphasizes Category 1 preferences for CMHA residents and CMHA resident owned businesses. CMHA will present its Section 3 Action Plan to the CMHA Board of Commissioners in April for approval. CMHA will provide a copy of the final Section 3 Action Plan to J-RAB no later than April 06, 2011.

CMHA's Section 3 Action Plan incorporates HUD's Section 3 regulations, CMHA best practices, nationwide best practices, collaborations, suggestions, and advice from J-RAB, as well as local community and governmental organizations.

CMHA's Section 3 Action Plan provides the framework needed to achieve HUD's numerical goals. Most importantly, Section 3 residents are being employed, receiving contracts, improving job skills, and increasing personal income and family sustainability.

Thank you for your effort and insightful participation. CMHA looks forward to working with J-RAB in matters that pertain to economic opportunities for Section 3 residents and business concerns.

Respectfully,

A handwritten signature in black ink that reads "Scott Hunter". The signature is written in a cursive style and is enclosed within a large, hand-drawn oval.

Scott Hunter
Section 3 Program Administrator

CMHA, 16 West Central Parkway, Cincinnati, OHIO 45202

Phone: (513) 721-4580 Fax: (513) 665-3106 TDD: (513) 977-5807 Job Line: (513) 977-5659 Website: www.cintimha.com

Equal Opportunity Employer, Equal Housing Opportunities



April 12, 2011

Delorise Calhoun
President
J-RAB
1601 Madison Road
Cincinnati, OH 45207

Dear Ms. Calhoun:

Thank you for your April 7, 2011, correspondence regarding the CMHA Annual Plan.

CMHA presented its annual plan to J-RAB for comment and discussion on August 16, 2010, December 7, 2010 and February 17, 2011. CMHA held a 45-day open comment period through March 18, 2011, to accept comments for incorporation in CMHA's Annual Plan. A public hearing was held at the March 22, 2011, CMHA Board meeting where all comments that were received by CMHA were discussed and the public had an opportunity to speak about the Annual Plan. CMHA received no written comments from J-RAB nor did any member of the J-RAB utilize the public meeting forum to voice any concerns. It is disappointing to receive the J-RAB comments more than two weeks after the public hearing.

The J-RAB letter also addresses the proposed Section 3 procedure that has not been presented to the CMHA Board and is not approved policy. Section 3 is not a component of the annual plan that was approved by the CMHA Board of Commissions on March 22, 2011; however CMHA will include your letter in the Annual Plan packet sent to HUD.

CMHA strongly opposes any suggestion that it has violated the Memorandum of Accord with J-RAB. CMHA is required by the MOA "to be advised and receive recommendations from J-RAB on matters of resident interest and concern prior to any final decision." The MOA clearly states "nothing contained herein (the MOA) shall be construed to delegate to J-RAB any statutory authority or duties of CMHA or to limit any right, power or authority of CMHA, its board, staff or agents, which may not be so delegated or limited." In compliance with the MOA, CMHA has devoted significant time to meet with J-RAB as evidenced by the meeting listed below.

09/18/10 CMHA attended a J-RAB sponsored Section 3 Training that was facilitated by Keith Swiney of Motivation, Inc.

10/05/10 CMHA & J-RAB were both present at Section 3 Training that was hosted by the City and the County and other community partners to discuss Section 3 and S3 initiatives.

CMHA, 16 West Central Parkway, Cincinnati, OHIO 45202

Phone: (513) 721-4580 Fax: (513) 665-3106 TDD: (513) 977-5807 Job Line: (513) 977-5659 Website: www.cintimha.com

Equal Opportunity Employer, Equal Housing Opportunities



11/09/10 CMHA met with J-RAB to discuss CMHA's draft action plan for comments, review and input. CMHA also revised the draft action plan with several comments that J-RAB provided in this meeting. The meeting was well attended and held at the Western Avenue auditorium. The draft plan was distributed to residents.

11/23/10 CMHA received fax from J-RAB stating they do not accept the draft Section 3 plan. J-RAB's overall objection was listed to reference "CFR 24 135.30 to develop a policy that will be in compliance with HUD's regulations as it relates to Section 3".

11/29/10 CMHA sent correspondence to J-RAB stating the Section 3 Draft Action Plan was in alignment with HUD's regulations. This correspondence also asked for more clarity in J-RAB's objection which should be communicated to the Section 3 unit for further consideration.

12/03/10 CMHA received a fax from J-RAB indicating objections with the plan as written. CMHA tried to schedule a meeting as soon as possible to discuss concerns. However, with J-RAB's schedule, it was not possible to schedule a meeting in December.

01/05/11 CMHA contacted J-RAB and tried to secure a meeting date to discuss specific areas of concern and the overall objection to CMHA's draft action plan. Due to J-RAB conflicts, this was not scheduled.

01/13/11 J-RAB sent a fax to schedule a meeting on 01/20/11. Due to CMHA conflict, this meeting was not scheduled. A new date was scheduled for 02/03/11.

02/03/11 CMHA met with J-RAB to discuss continuing concerns with CMHA's Section 3 draft plan (which had been revised based on suggestions from J-RAB). The purpose of this meeting was to discuss the objective and methods to achieve the goals included in the draft Section 3 action plan. Instead of working on CMHA's Section 3 draft plan, J-RAB presented an alternative Section 3 draft plan. As a result a longer meeting is now scheduled for 03/15/11 to discuss both plans.

02/21/2011 The Section 3 unit attended a National Section 3 Compliance Conference hosted by Motivation, Inc. J-RAB was also present.

03/15/2011 Collaborative Meeting held at J-RAB headquarters to discuss both Section 3 Plans. J-RAB stated at this meeting to notify them of the status to proceed with the CMHA Plan or the J-RAB plan by 03/29/2011.

03/29/2011 Correspondence was sent to J-RAB to notify our intent to proceed with the submission of the CMHA Draft Section 3 Policy & Plan Guideline with revisions based on the 03/15/2011 meeting.

CMHA, 16 West Central Parkway, Cincinnati, OHIO 45202

Phone: (513) 721-4580 Fax: (513) 665-3106 TDD: (513) 977-5807 Job Line: (513) 977-5659 Website: www.cintimha.com

Equal Opportunity Employer, Equal Housing Opportunities



04/06/2011 CMHA hand-delivered CMHA's Draft Section 3 Policy & Plan Guideline to J-RAB, as well as mailed out copies of CMHA's Draft Section 3 Policy and Plan to all Resident Councils.

04/08/2011 Notified J-RAB of CMHA's intent to meet and discuss the Section 3 Policy and Plan Guideline which was submitted on 04/06/11. In the communication, CMHA provided 3 alternative dates and times: {04/14, 04/18 or 04/19}.

CMHA has amended its proposed Section 3 policy to incorporate and ensure consistency with the J-RAB recommendations based on the following actions:

- Conducted reviews of numerous Section 3 programs in other cities and housing authorities to research for best practices.
- Participated in multiple Section 3 trainings from private facilitators and the Department of Housing & Urban Development
- Hired a full-time Section 3 Compliance Coordinator
- Created and modified existing Section 3 forms and notices
- Implemented self-certification process for Section 3 Business Concerns, as well as for Section 3 Residents
- Created a tracking and monitoring system for Section 3 activities
- Changed internal procedures and processes to include Section 3 representation.
- Developed a database of Section 3 Business Concerns and Section 3 Residents to share individuals and businesses with other county/city agencies for possible hiring/contracting opportunities.

CMHA produced positive Section 3 results for the year ended December 31, 2010 and for the first quarter ended March 31, 2011.

Agency Overall Standing Calendar Year Summary 2010

S3 Construction Contracts awarded to Section 3 Business Concerns	9%
S3 Non-Construction Contracts awarded to Section 3 Business Concerns	21%
S3 New Hire Opportunities for Section 3 Residents	38%

Agency Overall Standing 1st Quarter 2011

S3 Construction Contracts awarded to Section 3 Business Concerns	52%
S3 Non-Construction Contracts awarded to Section 3 Business Concerns	25%
S3 New Hire Opportunities for Section 3 Residents	51%



Letter to Delorise Calhoun

Page Four

4/12/11

CMHA appreciates your input and looks forward to cooperating with J-RAB in the successful implementation of a Section 3 plan once approved by the Board of Commissioners.

Sincerely,

A handwritten signature in black ink that reads "Ted Bergh".

Ted Bergh
Interim Executive Director

cc: CMHA Board of Commissioners

CMHA, 16 West Central Parkway, Cincinnati, OHIO 45202

Phone: (513) 721-4580 Fax: (513) 665-3106 TDD: (513) 977-5807 Job Line: (513) 977-5659 Website: www.cintimha.com

Equal Opportunity Employer, Equal Housing Opportunities

*2011 ANNUAL PLAN DISCUSSION
WITH IRAB*

Tuesday, DECEMBER 7, 2010

10:00 – 11:30 AM, Millvale Learning Center

AGENDA

10:00 AM Capital Funds – Modernization – C. Murray

11:00 AM General Annual Plan Comments – C. McNeary

11:30 AM Adjournment

**2011 ANNUAL PLAN DISCUSSION WITH JRAB
MILLVALE LEARNING CENTER
DECEMBER 7, 2010 10:00 - 11:30 A.M.**

Name

Signature

CONTINA DAVIS (LIBERTY) Contina Davis

Ms. Dorothy O'Boe EWING Ms. Dorothy O'Boe

Marsha Reese

Marsha Reese

Henry K. Winkler (Liberty St. apt) Henry K. Winkler

Deberse Calhoun SMT JRAB - Debra Calhoun

Mr. Cahney M-71 Michael Cahney

Tangy Crockett SRT-A Tangy Crockett

Victoria Bailey MAPLETOWNS PRESIDENT Victoria Bailey

Carol Brown Riverview

Carol Brown

Charlie MURPHY CMHA

Charlie Murphy

Joe Norton - Discuss capital plan with JRAB

From: Joe Norton
To: Joe Norton
Date: 8/16/10
Time: 12:00 PM - 2:00 PM
Subject: Discuss capital plan with JRAB
Place: Pinecrest Apt

Discuss capital plan with JRAB

Joe Norton - Meeting with JRAB to Discuss Annual Plan ACOP and Capital Annual and Five Year

From: Charles Murray
To: Cecil McNeary; Charles Murray; Joe Norton
Date: 12/7/10
Time: 10:00 AM - 11:30 AM
Subject: Meeting with JRAB to Discuss Annual Plan ACOP and Capital Annual and Five Year
Place: Millvale Learning Center
CC: Grace Jones; Jackie Davis; Melena Campbell

Jackie - to provide notices and transportation

Melena - to have Ken McCain set up tables and chairs for 30 to 40 participants

Part I: Summary

PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No: Date of CFFP: _____	FFY of Grant: 2011	FFY of Grant Approval: _____
--	--	------------------------------	--

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: _____ Revised annual Statement (revision no: _____)
 Summary by Development Account Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost			Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended	
1	Total non-CFF Funds	0	0	0	0	
2	1406 Operations (may not exceed 20% of line 20) ³	5,570,971	0	0	0	
3	1408 Management Improvements	0	0	0	0	
4	1410 Administration (may not exceed 10% of line 20)	3,000,174	0	0	0	
5	1411 Audit	0	0	0	0	
6	1415 Liquidated Damages	0	0	0	0	
7	1430 Fees and Costs	553,345	0	0	0	
8	1440 Site Acquisition	0	0	0	0	
9	1450 Site Improvement	2,971,097	0	0	0	
10	1450 Dwelling Structures	19,201,008	0	0	0	
11	1465.1 Dwelling Equipment - Nonexpendable	0	0	0	0	
12	1470 Non-dwelling structures	0	0	0	0	
13	1475 Non-dwelling Equipment	0	0	0	0	
14	1485 Demolition	0	0	0	0	
15	1492 Moving to Work Demonstration	0	0	0	0	
16	1495.1 Relocation Costs	255,500	0	0	0	
17	1499 Development Activities ⁴	3,000,000	0	0	0	
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0	
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	1,536,699	0	0	0	
19	1502 Contingency (may not exceed 8% of line 20)	36,088,794	0	0	0	
20	Amount of Annual Grant (sum lines 2-19)	36,088,794	0	0	0	
21	Amount of line 20 Related to LFP 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	0	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	

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 RHE funds shall be included here

Part I: Summary		FFY of Grant: 2011	
PHA Name: OH1004 Cincinnati MHIA	Grant Type and Number Capital Fund Program Grant No: OH10F00450111	Replacement Housing Factor Grant No: _____	
Date of CFP: _____	FFY of Grant Approval: _____		
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised annual Statement (revision no: _____)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____	<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
	Original	Revised ²	Obligated
			Expended

Signature of Executive Director <i>[Signature]</i>	Signature of Public Housing Director
Date 6-14-11	Date

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

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:			CFEP (Yes/No):		Federal FFY 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	Funds	
				Original	Revised ¹			Obligated ²	Expended ²
AMP 201 Scattered Sites Central	Operations/ Routine Maintenance	1406		302,568.00					
	Fees and service	1430		28,103.00					
	Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls	1450		204,130.00					

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:			CFEP (Yes/No):			Federal FFY 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		
AMP 201 Scattered Sites Central 122 & 130 McMicken, 2254 Flora, 2310 & 2308 Victor, 8273 Anthony Wayne, 7 Mc Millan 1-4, 4874 Winton Ridge 1-2, 4439 Station, 500 Orient, 536 Flatt Terrace, 3639 Besuden	Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacements • Appliances • Furnace/ AC Units • Water Heaters • Boilers	1460		807,474.00					
	ADA Accessible unit conversions	1460		286,991.00					
	Relocation	1495.1		12,850.00					
	Collateralization or Debt Service	9000		27,896.00					

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:			FFFP (Yes/No):			Federal FFY 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		
AMP 202 SCATTERED SITES, FAR SOUTHEAST	Operations/Routine Maintenance	1406		89,560.00					
	Fees and Service	1430		5,807.00					
	Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway / Parking Lots • Retaining Walls	1450		10,334.00					

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10F00450111			CFEP (Yes/No):			Federal FFY 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		
AMP 202 SCATTERED SITES, FAR SOUTHEAST 1421 Larry Joe, 1180 Alnetta, Dyer, 6428 & 6428 Sherman, 6467 & 6531 Rainbow, 1056 Baytree, Beth lane, Collinsdale 1-2, 1283 Brooke, 7021 Salem 1-2,	Interior/Exterior Renovations: <ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Appliances • Furnace/ AC Units • Water Heaters • Boilers 	1460		173,672.00					
6347-6351 Beechmont	Unit Conversions Bedroom Size Relocation Collateralization or Debt Service	1460 1495.1 9000		189,230.00 35,000.00 3,887.00					

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:			CFEP (Yes/No):		Federal FFY 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		
AMP 203 Scattered Sites Southeast	Operations/Routine Maintenance	1406		121,560.00					
	Fees and services	1430		2,321.00					
	Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls	1450		43,145.00					

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

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

Part II: Supporting Pages														
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY 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	
AMP 203 Scattered Sites Southeast 3231 Berwyn, 4235 Blaney, 3633 Columbia, 4000 Eileen		Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Appliances • Furnace/ AC Units • Water Heaters • Boilers		1460				223,476.00						
		ADA Accessible unit conversions		1460				358,739.00						
		Relocation		1495.1				5,400.00						
		Collateralization or Debt Service		9000				20,590.00						

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P0450111 Replacement Housing Factor Grant No:			CFPP (Yes/No):			Federal FFY 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		
AMP 204 Scattered Sites North	Operations/Routine Maintenance	1406		280,971.00					
	Fees and service	1430		3,882.00					
	Site: <ul style="list-style-type: none"> • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls 	1450		226,038.00					

Part II: Supporting Pages						Federal FFY Grant:		2011
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111		CFPP (Yes/No):		Total Actual Cost		Status of Work
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity	Total Estimated Cost	Funds Obligated ²	Funds Expended ²	
General Description of Major Work Categories		Development Account No.			Original	Revised ¹		
AMP 204 Scattered Sites North		1460			765,821.00			
<ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Appliances • Furnace/ AC Units • Water Heaters • Boilers 								
10004 & 10012 Clinton, 226 & 228 Carthage, 1209 Crescentville, 619 Oak, 1035 Jefferson 1-2, 1220 Sunrise		1460			27,995.00			
ADA Accessible unit conversions		1495.1			12,850.00			
Relocation		9000			9,184.00			
Collateralization or Debt Service								

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
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Part II: Supporting Pages						
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:		Federal FFY Grant:		2011
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	
AMP 205 Scattered Sites Far Southwest	Operations/Routine Maintenance	1406		380,987.00		
	Fees and service	1430		36,156.00		
	Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls	1450		152,207.00		

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111			CFPP (Yes/No):			Federal FFY Grant: 2011	
Development Number Name/PHA-Wide Activities		General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
						Original	Revised ¹	Funds Obligated ²	Funds Expended ²
									Status of Work
AMP 205 Scattered Sites Far Southwest		Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Appliances • Furnace/ AC Units • Water Heaters • Boilers		1460		1,251,603.00			
ADA Accessible unit conversions				1460		208,495.00			
Relocation				1495.1		15,650.00			
Collateralization or Debt Service				9000		12,739.00			

Part II: Supporting Pages										
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011				
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
General Description of Major Work Categories		Development Account No.		Original		Revised ¹		Funds Obligated ²	Funds Expended ²	
AMP 206 Scattered Sites Southwest		1406				240,561.00				
Operations/Routine Maintenance		1430				5,983.00				
Fees and service		1450				128,300.00				
Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls										

Part II: Supporting Pages											
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011					
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No: Development Account No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work	
General Description of Major Work Categories						Original		Revised ¹		Funds Obligated ²	Funds Expended ²
AMP 206 Scattered Sites Southwest		1460				474,984.00					
<ul style="list-style-type: none"> • Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Appliances • Furnace/ AC Units • Water Heaters • Boilers 											
ADA Accessible unit conversions		1460				143,495.00					
Relocation		1495.1				4,500.00					
Collateralization or Debt Service		9000				3,762.00					

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

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

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011			
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No: Development Account No.		Quantity	Total Estimated Cost	Total Actual Cost		Status of Work	
General Description of Major Work Categories					Original	Funds Obligated ²	Funds Expended ²		
AMP 207 Scattered Sites Northwest		1406			303,689.00				
Fees And Services		1430			11,149.00				
Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways / Steps • Driveway / Parking Lots • Retaining Walls		1450			77,243.00				

Part II: Supporting Pages														
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011								
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Development Account No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work		
General Description of Major Work Categories								Original		Revised ¹		Funds Obligated ²	Funds Expended ²	
AMP 207 Scattered Sites Northwest		Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Appliances • Furnace/ AC Units • Water Heaters • Boilers		1460				938,803.00						
ADA Accessible unit conversions				1460				143,495.00						
Relocation				1495.1				10,850.00						
Collateralization or Debt Service				9000				20,566.00						

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:			CFPP (Yes/No):		Federal FFY Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
AMP 208 Scattered Sites Northwest	Operations / Routine Maintenance	1406		245,125.00					
	Fees And Services	1430		18,488.00					
	Site: <ul style="list-style-type: none"> • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways / Steps • Driveway / Parking Lots • Retaining Walls 	1450		45,623.00					

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

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

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY 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		
AMP 208 Scattered Sites Northwest 520-540 Prospect, 123 Forest, 3586-3588 Haven, 3591-3589 Eden, 3251 Washington, 3543-3545 Dick, 3538-3546 Perdue, 541 Blair, 3547 Perdue,	Interior/Exterior Renovations: <ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Appliances • Furnace/ AC Units • Water Heaters • Boilers ADA Accessible unit conversions Relocation Collateralization or Debt Service	1460		520,454.00					
				66,228.00					
				3,500.00					
				32,509.00					

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):			Federal FFY Grant: 2011		
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity	Total Estimated Cost	Total Actual Cost	Status of Work
General Description of Major Work Categories		Development Account No.			Original	Revised ¹	
					Funds Obligated ²	Funds Expended ²	
AMP 209 Winton Terrace		1406			189,621.00		
Operations/Routine Maintenance							
Fees and Services		1430			8,778.00		
Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls		1450			198,395.00		

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111			CFYP (Yes/No):		Federal FFY Grant:		
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity	Total Estimated Cost	Total Actual Cost	Status of Work		
General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work			
				Original	Revised	Funds Obligated ²	Funds Expended ²		
AMP 209 Winton Terrace		1460		287,679.00					
Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Interior Finishes • Roof Replacement									
Relocation		1495.1		3,500.00					
Collateralization or Debt Service		9000		247,901.00					

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111				Federal FFY Grant: 2011			
Development Number Name / PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity		CFPP (Yes/No):		Status of Work	
General Description of Major Work Categories		Development Account No.		Total Estimated Cost		Total Actual Cost			
				Original		Revised ¹		Funds Obligated ²	
								Funds Expended ²	
AMP 210 Findlater Gardens		1406		279,541.00					
Operations/Routine Maintenance		1430		31,839.00					
Fees and Services		1450		582,694.00					
Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls									

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10F00450111 CFFP (Yes/No):				Federal FFY Grant: 2011			
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
General Description of Major Work Categories		Development Account No.			Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 210 Findlater Gardens		1460			306,667.00				
Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Tuck pointing & Sealing Exterior of Building • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters									
Relocation		1495.1			3,500.00				
Collateralization or Debt Service		9000			425,712.00				

Part II: Supporting Pages										
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011				
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No: Development Account No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
General Description of Major Work Categories						Original		Revised ¹		Funds Obligated ²
						251,887.00				Funds Expended ²
AMP 211 Beechwood Maple Evanston		1406				37,871.00				
Operations/Routine Maintenance		1430				135,884.00				
Fees and Services		1450								
Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways / Steps • Driveway / Parking Lots • Retaining Walls										

Part II: Supporting Pages														
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY 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	
AMP 211 Beechwood Maple Evanston		Interior/Exterior Renovations: <ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Retaining Wall • Tuck pointing & Sealing Exterior of Building • Door • Interior Finishes • Roof Replacement • Domestic Hot Water • Heat Pumps • A/C units 		1460						601,555.00				
Relocation				1495.1				3,500.00						
Collateralization or Debt Service				9000				92,434.00						

Part II: Supporting Pages											
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011					
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No: Development Account No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work	
General Description of Major Work Categories						Original		Revised ¹		Funds Obligated ²	Funds Expended ²
AMP 212 Riverview San Marco		1406				179,653.00					
Operations/ Routine Maintenance		1430				22,244.00					
Fees and services		1450				23,240.00					
Site:											
<ul style="list-style-type: none"> • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway / Parking Lots • Retaining Walls 											

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):		Federal FFY 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	
AMP 212 Riverview San Marco	Interior/Exterior Renovations: <ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors (San Marco) • Retaining Wall • Interior Finishes • Roof Replacement • AC Units • DHW • Boilers/Chillers 	1460		687,599.00				
	Unit Conversion of zero bedrooms	1460		260,000.00				
	Relocation	1495.1		3,500.00				
	Collateralization or Debt Service	9000		40,782.00				

Part II: Supporting Pages										
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFPP (Yes/No):				Federal FFY Grant: 2011				
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
General Description of Major Work Categories		Development Account No.		Original		Revised ¹		Funds Obligated ²	Funds Expended ²	
AMP 213 Park Eden President Redding		1406				384,071.00				
Fees and Services		1430				32,489.00				
Site: <ul style="list-style-type: none"> * Landscaping * Tree trimming * Fences * Utilities * Lighting * Walkways/ Steps * Driveway/ Parking Lots * Retaining Walls 		1450				197,533.00				

Part II: Supporting Pages										
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):			Federal FFY Grant: 2011					
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
General Description of Major Work Categories		Development Account No.	Quantity	Original	Revised ¹	Funds Obligated ²	Funds Expended ²			
AMP 213 Park Eden President Redding		1460		1,222,823.00						
Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Doors • Retaining Wall • Interior Finishes • Roof Replacement • AC Units • DHW • Boilers/Chillers		1495.1		12,850.00						
Relocation										

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Replacement Housing Factor Grant No:	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 214 Liberty St Apartments Stanley Rowe Houses	Operations/Routine Maintenance		1406		389,653.00				
	Fees and service		1430		72,203.00				
	Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls		1450		46,197.00				

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:			CFPP (Yes/No):			Federal FFY 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		
AMP 214 Liberty St Apartments Stanley Rowe Houses	Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters • Boilers/Chillers	1460		1,528,491.00					
	ADA Accessible unit conversions	1460		77,896.00					
	Relocation	1495.1		12,850.00					

Part II: Supporting Pages												
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011						
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No: Development Account No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work		
General Description of Major Work Categories						Original		Revised ¹		Funds Obligated ²	Funds Expended ²	
AMP 215 Stanley Rowe A Stanley Rowe B		Operations/Routine Maintenance		1406		370,779.00						
Fees and service				1430		50,127.00						
Site: <ul style="list-style-type: none"> * Landscaping * Tree trimming * Fences * Utilities * Lighting * Walkways/ Steps * Driveway/ Parking Lots * Retaining Walls 				1450		81,187.00						

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111			CFPP (Yes/No):			Federal FFY Grant: 2011	
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity		Total Estimated Cost		Total Actual Cost	
General Description of Major Work Categories		Development Account No.		Original		Revised ¹		Funds Expended ²	
								Funds Obligated ²	
AMP 215 Stanley Rowe A Stanley Rowe B		1460		1,272,709.00					
Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Doors • Interior Finishes • Roof Replacement • AC Units • DHW • Boilers Relocation		1495.1		12,850.00					

Part II: Supporting Pages										
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY Grant: 2011				
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
General Description of Major Work Categories		Development Account No.				Original		Revised ¹		Funds Expended ²
AMP 216 Pincrest		1406				310,256.00				
Operations/ Routine Maintenance		1430				2,862.00				
Fees and service		1450				25,498.00				
Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls										

Part II: Supporting Pages															
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFPP (Yes/No):				Federal FFY 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		
AMP 216 Pincrest		Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Retaining wall/ Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors • Interior Finishes • Roof Replacement • AC Units • DHW • Boilers Relocation		1460				471,711.00							
				1495.1				4,500.00							

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:				Federal FFY 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		
AMP 217 Millvale	Operations/Routine Maintenance	1406		778,649.00					
	Fees and service	1430		183,043.00					
	Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls	1450		658,402.00					

Part II: Supporting Pages										
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 Replacement Housing Factor Grant No:				CFPP (Yes/No):		Federal FFY 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			
AMP 217 Millvale	Interior/Exterior Renovations: <ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Retaining wall • Windows/ Doors • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters 	1460		3,201,949.00						
	ADA Accessible unit conversations	1460		802,117.00						
	Relocation	1495.1		82,000.00						
	Collateralization or Debt Service	9000		506,257.00						

Part II: Supporting Pages										
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111 CFFP (Yes/No):				Federal FFY 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	
AMP 218 Marquette Manor Suttlerview		Operations/ Routine Maintenance		1406		471,840.00				
		Fees and service		1430						
		Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways/ Steps • Driveway/ Parking Lots • Retaining Walls		1450		115,047.00				

Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450111			CFFP (Yes/No):			Federal FFY 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		
AMP 218 Marquette Manor Suttriview	Interior/Exterior Renovations: <ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters 	1460		1,744,196.00					
	ADA Accessible unit conversions	1460		155,061.00					
	Relocation	1495.1		15,850.00					
	Collateralization or Debt Service	9000		92,480.00					
Agency Wide	Development Activities	1499		3,000,000.00					
	10% Administration Fee	1410		3,000,174.00					

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Part E: Summary						
PHA Name/Number CH004 Cincinnati MHA CH004		Locality (City/County & State) Cincinnati, Ohio		Original 5-year Plan		Revision No:
Development 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.	Annual Statement					
B.	Physical Improvements Subtotal	11,956,383	9,579,097	10,047,425	6,841,314	
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration	2,290,692	1,777,739	1,880,322	1,995,589	
F.	Other	259,220	643,842	150,000		
G.	Operation		3,233,830	3,379,854	2,738,632	
H.	Demolition		340,000			
I.	Development	4,000,000	2,500,000	2,500,000	2,500,000	
J.	Capital Fund Financing - Debt Service	1,536,699	1,536,699	1,536,699	1,536,699	
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total	20,042,394	19,611,207	19,494,300	15,612,234	

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 2012		Work Statement for Year 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual	201 SCATTERED SITES, CENTRAL	Building Envelope Unit Site work 65,870 56,890 22,322	201 SCATTERED SITES, CENTRAL	Building Envelope Unit Site work Common Space HVAC 34,173 25,791 190,450 12,860 68,940
	202 SCATTERED SITES, FAR SOUTHEAST	Building Envelope Unit Site work HVAC 126,900 56,230 9,000 26,840	202 SCATTERED SITES, FAR SOUTHEAST	Building Envelope Unit 69,204 156,240
	203 SCATTERED SITES, SOUTHEAST	Building Envelope Unit Site work HVAC 89,620 165,890 75,640 12,340	203 SCATTERED SITES, SOUTHEAST	Building Envelope Unit Site work HVAC 265,780 140,560 121,450 56,710
	204 SCATTERED SITES, NORTH	Building Envelope Unit Site work HVAC Marianna Terrace Gut Rehab Phase I Relocation 60,258 236,540 40,230 80,652 450,000 5,200	204 SCATTERED SITES, NORTH	Building Envelope Unit Site work HVAC Marianna Terrace Gut Rehab Phase II 70,115 263,489 120,460 19,250 450,000

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Work Statement for Year 1 FFY 2011	Work Statement for Year 2012		Work Statement for Year 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
205 SCATTERED SITES, FAR SOUTHWEST	Building Envelope	60,034	Building Envelope	14,776
	Site work	48,966	Unit Site work HVAC	290,560 92,340 68,900
			Relocation	3,500
206 SCATTERED SITES, SOUTHWEST	Building Envelope	106,214	Building Envelope	156,230
	Unit	286,520	Unit Site work HVAC	246,530 156,321 65,230
	HVAC	48,510		
207 SCATTERED SITES, NORTHWEST	Building Envelope	23,342	Building Envelope	190,300
	Unit	126,740	Unit Site work	150,200 89,000
	Site work HVAC	20,243 13,690		

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Statement for Year 1 FFY 2011	Work Statement for Year 2012 FFY 2012		Work Statement for Year 2013 FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	208 SCATTERED SITES, AVONDALE WALNUT HILLS	Building Envelope Unit 261,520 480,230	208 SCATTERED SITES, AVONDALE WALNUT HILLS	Building Envelope Unit 293,000 46,300
		Site work 65,890	Site work 63,000	
		HVAC 68,970	HVAC 56,300	
		Relocation 2,100	Sety Kuhn Gut Rehab 280,000	
	209 WINTON TERRACE	Building Envelope Unit 280,460 260,480	209 WINTON TERRACE	Building Envelope Unit 59,967 490,300
		Site work 189,140	Site work 37,630	
		Relocation 14,000		
	210 FINDLATER GARDENS	Building Envelop Unit 42,361 175,640	210 FINDLATER GARDENS	Building Envelope Unit 17,908 306,040
		Site work 215,420	Site work 36,400	
		HVAC 23,850	HVAC 43,941	
			Relocation 5,200	
	211 BEECHWOOD MAPLE TOWER EVANSTON	Building Envelope Unit 103,560 10,230	211 BEECHWOOD MAPLE TOWER EVANSTON	Building Envelope Unit 206,300
	Site work 18,470	Common areas 43,652		
	HVAC 73,043			

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Work Statement for Year 1 FFY 2011	Work Statement for Year 2012 FFY 2012		Work Statement for Year 2013 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
212 RIVERVIEW SAN MARCO	Building Envelop Unit	160,293	212 RIVERVIEW SAN MARCO	Units	396,500
	Site work	48,230		Common areas	10,000
	Common areas	42,025		Relocation	2,100
213 REDDING PRESIDENT PARK EDEN	HVAC	42,025	213 REDDING PRESIDENT PARK EDEN	Building Envelop Unit	80,000
	Building Envelop Unit	23,410		Common areas HVAC	260,300
	Common areas HVAC	156,240			66,500
214 LIBERTY STREET APARTMENTS STANLEY ROWE HOUSES	Building Envelope Unit	207,522	214 LIBERTY STREET APARTMENTS STANLEY ROWE HOUSES	Building Envelop Unit	44,000
	HVAC	145,720		Site work	189,500
		36,450		Relocation	3,000
				Relocation	3,600

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Work Statement for Year 1 FFY 2011	Work Statement for Year 2012 FFY 2012		Work Statement for Year 2013 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
215 STANLEY ROWE TOWERS	Building Envelop Unit	89,420	215 STANLEY ROWE TOWERS	Building Envelop Unit	108,000
	Site work	126,540		Common areas	340,000
	HVAC	160,410		HVAC	7,500
		20,132			5,000
216 PINECREST	Unit	165,200	216 PINECREST	Unit	547,000
	HVAC	190,820		Relocation	6,200
217 MILLVALE	Building Envelop Unit	1,300,995	217 MILLVALE	Unit	523,600
	Site Work	2,975,621		Site work	32,000
	HVAC	419,447		Demolition of 42 Units	340,000
	Relocation	269,933			
		18,000			
218 MARQUETTE MANOR SUTTER VIEW	Unit	265,870	218 MARQUETTE MANOR SUTTER VIEW	Unit	407,000
	Common HVAC	24,867		HVAC	6,400
		182,568		Relocation	5,600

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 2012		Work Statement for Year 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	AGENCY WIDE	11,956,383	Project Total	9,919,097
	Operations	4,156,236	AGENCY WIDE	
	10% Administration Fee	2,290,092	Operations	3,233,830
	Development	4,000,000	10% Administration Fee	1,777,739
	Annual Dept Services (CFPP)	1,536,699	Development	2,500,000
	Annual Dept Services (CFPP)	1,536,699	Annual Dept Services (CFPP)	1,536,699
	Subtotal of Estimated Cost	\$ 23,939,410	Subtotal of Estimated Cost	\$ 18,967,365

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Work Statement for Year 1 FFY 2011	Work Statement for Year 2014		Work Statement for Year 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	201 SCATTERED SITES, CENTRAL	Building Envelope Unit Site work 252,618 26,658 126,856	201 SCATTERED SITES, CENTRAL	Building Envelope Unit Site work Relocation 141,739 154,584 19,894 12,000
	202 SCATTERED SITES, FAR SOUTHEAST	Building Envelope Unit Site work Relocation 30,364 98,460 12,600 4,500	202 SCATTERED SITES, FAR SOUTHEAST	Building Envelope Unit Site work 70,286 42,065 16,956
	203 SCATTERED SITES, SOUTHEAST	Building Envelope Unit Site work HVAC Relocation 162,871 199,788 56,409 35,698 3,000	203 SCATTERED SITES, SOUTHEAST	Building Envelope Unit Site work HVAC 1,381
	204 SCATTERED SITES, NORTH	Building Envelope Unit Site work HVAC Marianna Terrace Gut Rehab Phase III 197,258 126,540 68,643 16,268 450,000	204 SCATTERED SITES, NORTH	Building Envelope Unit Site work HVAC Marianna Terrace Gut Rehab Phase IV 15,910 55,116 7,359 5,791 450,000

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Work Statement for Year 1 FFY 2011	Work Statement for Year 2014		Work Statement for Year 2015		
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
205 SCATTERED SITES, FAR SOUTHWEST	Building Envelope Unit	189,423	205 SCATTERED SITES, FAR SOUTHWEST	Building Envelope Unit	82,184
	Site work	126,268		Site work	26,095
	HVAC	74,970		HVAC	11,295
206 SCATTERED SITES, SOUTHWEST	HVAC	14,268	206 SCATTERED SITES, SOUTHWEST	HVAC	2,956
	Building Envelope Unit	81,810		Building Envelope Unit	500
	Relocation	219,617		Site work HVAC	199 2,832 1,294
207 SCATTERED SITES, NORTHWEST	Relocation	6,200	207 SCATTERED SITES, NORTHWEST	Relocation	
	Building Envelope Unit	213,769		Building Envelope Unit	25,220
	Site work	258,071		Site work HVAC	75,286 15,835 6,429
208 SCATTERED SITES, AVONDALE WALNUT HILLS	Relocation	2,800	208 SCATTERED SITES, AVONDALE WALNUT HILLS	Relocation	
	Building Envelope Unit	21,651		Building Envelope Unit	6,637
	Site work HVAC	39,214 31,806 12,300		Site work HVAC Common area	126,201 12,664 14,436 73,542

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Work Statement for Year 1 FFY 2011	Work Statement for Year 2014 FFY 2014		Work Statement for Year FFY 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	209 WINTON TERRACE	Building Envelope Unit Site work	209 WINTON TERRACE	Building Envelope Unit Site work Environmental
		158,063 390,039 19,868		93,479 1,335,676 308,764 43,559
	210 FINDLATER GARDENS	Building Envelope Unit Site work HVAC	210 FINDLATER GARDENS	Building Envelope Unit Site work HVAC
		30,509 175,640 15,632 43,219		34,879 160,114 1,358 362,004
	211 BEECHWOOD MAPLE TOWER EVANSTON	Building Envelope Unit Site work Common areas HVAC Relocation	211 BEECHWOOD MAPLE TOWER EVANSTON	Building Envelope Unit Site work Common areas HVAC Environmental
		583,915 647,468 140,347 389,453 15,489 12,600		93,955 15,776 2,829 126,718
	212 RIVERVIEW SAN MARCO	Building Envelope Units Common areas	212 RIVERVIEW SAN MARCO	Building Envelope Units Site work Common areas HVAC Environmental
		313,000 143,500 473,000		161,497 23,628 3,434 67,654

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Work Statement for Year 1 FFY 2011	Work Statement for Year 2014		Work Statement for Year 2015		
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
213 REDDING PRESIDENT PARK EDEN	Building Envelop Unit	440,200	213 REDDING PRESIDENT PARK EDEN	Building Envelop Units	127,690
	Site work	722,800		Site work	1,000
	Common areas HVAC Relocation	32,100 165,000 4,500 15,800		Common areas HVAC	21,485
214 LIBERTY STREET APARTMENTS STANLEY ROWE HOUSES	Building Envelop Unit	98,000	214 LIBERTY STREET APARTMENTS STANLEY ROWE HOUSES	Building Envelop Unit	143,878
	Site work	11,500		Site Work	97,802
	HVAC	50,500		Common areas HVAC	143,198 18,720 51,839
215 STANLEY ROWE TOWERS	Building Envelop Unit	320,000	215 STANLEY ROWE TOWERS	Building Envelop Unit	929,032
	Site work	79,000		Site work	659,341
	Common areas HVAC	23,000 14,500 21,000		Common areas HVAC Relocation Environmental	29,402 15,800 18,385
216 PINECREST	Building Envelop Unit	68,000	216 PINECREST	Building Envelop Unit	87,236
	Building Envelop	16,000		Building Envelop Site work	2,793

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Work Statement for Year 1 FFY 2011	Work Statement for Year 2014		Work Statement for Year 2015		
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
217 MILLVALE	Building Envelop	7,500	217 MILLVALE	Building Envelop	
	Site work Common areas	184,000 194,000		Site work Common areas	33,942
218 MARQUETTE MANOR SUTTER VIEW	Building Envelop Unit	11,000	218 MARQUETTE MANOR SUTTER VIEW	Building Envelop Unit	2,984
	Site work	152,000		Site work	18,882
	HVAC	225,000		HVAC	125,875
		61,000			125,875
	Project Total	10,047,425		Project Total	6,841,314
Agency Wide	Operations	3,379,854	Agency Wide	Physical Needs Assessment	500,000
	10% Administration Fee	1,880,322		Operations	2,738,632
	Development	2,500,000		10% Administration Fee	1,495,589
	Annual Dept Service (CFFP)	1,536,699		Development	2,500,000
				Annual Dept Service (CFFP)	1,536,699
	Subtotal of Estimated Cost	\$ 19,344,300		Subtotal of Estimated Cost	\$ 15,612,234

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2012		Work Statement for Year 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	201 SCATTERED SITES, CENTRAL	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 2,982	201 SCATTERED SITES, CENTRAL	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 6,452
	202 SCATTERED SITES, FAR SOUTHEAST	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 2,028	202 SCATTERED SITES, FAR SOUTHEAST	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 4,388
	203 SCATTERED SITES, SOUTHEAST	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 767	203 SCATTERED SITES, SOUTHEAST	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 1,659
	204 SCATTERED SITES, NORTH	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 3,289	204 SCATTERED SITES, NORTH	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 7,116

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2012		Work Statement for Year 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	205 SCATTERED SITES, FAR SOUTHWEST	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 260 1,525 869 2,846	205 SCATTERED SITES, FAR SOUTHWEST	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 345 7,144 5,377 5,713 6,157
	206 SCATTERED SITES, SOUTHWEST	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 95 1,016 510 1,670	206 SCATTERED SITES, SOUTHWEST	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 7,144 3,156 3,352 3,613
	207 SCATTERED SITES, NORTHWEST	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 198 1,525 718 2,352	207 SCATTERED SITES, NORTHWEST	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 228 7,144 4,444 4,721 5,088
	208 SCATTERED SITES, AVONDALE WALNUT HILLS	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 453 2,541 1,223 4,005	208 SCATTERED SITES, AVONDALE WALNUT HILLS	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 587 7,144 7,567 8,039 8,664

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Work Statement for Year 2012 FFY 2012		Work Statement for Year FFY 2013		2013	
Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	Estimated Cost	Estimated Cost
209 WINTON TERRACE	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 10,000 1,210 6,607 3,163 10,362	209 WINTON TERRACE	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 3,119 7,144 19,578 20,798 22,417		
210 FINDLATER GARDENS	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 10,000 1,359 6,607 3,361 11,009	210 FINDLATER GARDENS	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 4,402 7,144 20,801 22,098 23,818		
211 BEECHWOOD MAPLE TOWER EVANSTON	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr 10,000 724 4,066 1,920 6,289	211 BEECHWOOD MAPLE TOWER EVANSTON	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II 1,932 7,144 1,182 12,622 13,605		

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2012		Work Statement for Year FFY 2013		Estimated Cost
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
	212 RIVERVIEW SAN MARCO	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr	212 RIVERVIEW SAN MARCO	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II	7,144 4,508 4,789 5,162
	213 REDDING PRESIDENT PARK EDEN	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr	213 REDDING PRESIDENT PARK EDEN	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II	2,429 7,144 12,011 12,759 13,753
	214 LIBERTY STREET APARTMENTS STANLEY ROWE HOUSES	Document Imaging Kiosk Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr	214 LIBERTY STREET APARTMENTS STANLEY ROWE HOUSES	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II	166 7,144 6,311 6,705 7,227

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2012 FFY 2012		Work Statement for Year FFY 2013		Estimated Cost
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
215 STANLEY ROWE TOWERS	Document Imaging Kiosk	10,000	215 STANLEY ROWE TOWERS	Communication Upgrade	1,898
	Email Upgrade	706		PC's, Monitors, Printers, Software	7,144
	Handheld for LIPH HQS	4,066		DI Professional Development	11,689
	DI Professional Development	1,889	DI & WO Project Mgr	12,759	
	DI & WO Project Mgr	6,186	Handheld Phase II	13,384	
216 PINECREST	Document Imaging Kiosk	10,000	216 PINECREST	Communication Upgrade	1,228
	Email Upgrade	517		PC's, Monitors, Printers, Software	7,144
	Handheld for LIPH HQS	2,033		DI Professional Development	6,118
	DI Professional Development	989	DI & WO Project Mgr	6,499	
	DI & WO Project Mgr	3,238	Handheld Phase II	7,005	
217 MILLVALE	Document Imaging Kiosk	10,000	217 MILLVALE	Communication Upgrade	2,967
	Email Upgrade	1,000		PC's, Monitors, Printers, Software	7,144
	Handheld for LIPH HQS	6,098		DI Professional Development	18,290
	DI Professional Development	9,680	DI & WO Project Mgr	19,430	
	DI & WO Project Mgr	3,289	Handheld Phase II	20,942	

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2012		Work Statement for Year 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	218 MARQUETTE MANOR SUTTER VIEW	10,000	218 MARQUETTE MANOR SUTTER VIEW	1,182
	Email Upgrade Handheld for LIPH HQS DI Professional Development DI & WO Project Mgr	341 2,541 1,348 4,414	Communication Upgrade PC's, Monitors, Printers, Software DI Professional Development DI & WO Project Mgr Handheld Phase II	7,144 8,340 8,860 9,549
	Subtotal of Estimated Cost (Other)	\$ 259,220	Subtotal of Estimated Cost (Other)	\$ 643,842

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2014		Work Statement for Year 2015	
	Development Number /Name General Description of Major Work Categories	Estimated Cost	Development Number /Name General Description of Major Work Categories	Estimated Cost
See	201 SCATTERED SITES, CENTRAL	8,333	201 SCATTERED SITES, CENTRAL	
	202 SCATTERED SITES, FAR SOUTHEAST	8,333	202 SCATTERED SITES, FAR SOUTHEAST	
	203 SCATTERED SITES, SOUTHEAST	8,333	203 SCATTERED SITES, SOUTHEAST	
	204 SCATTERED SITES, NORTH	8,333	204 SCATTERED SITES, NORTH	

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2014		Work Statement for Year 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	205 SCATTERED SITES, FAR SOUTHWEST	PC's, Monitors, Printers, Software 8,333	205 SCATTERED SITES, FAR SOUTHWEST	
	206 SCATTERED SITES, SOUTHWEST	PC's, Monitors, Printers, Software 8,333	206 SCATTERED SITES, SOUTHWEST	
	207 SCATTERED SITES, NORTHWEST	PC's, Monitors, Printers, Software 8,333	207 SCATTERED SITES, NORTHWEST	

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2014		Work Statement for Year 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	208 SCATTERED SITES, AVONDALE WALNUT HILLS PC's, Monitors, Printers, Software	8,333	208 SCATTERED SITES, AVONDALE WALNUT HILLS	
	209 WINTON TERRACE PC's, Monitors, Printers, Software	8,333	209 WINTON TERRACE	
	210 FINDLATER GARDENS PC's, Monitors, Printers, Software	8,333	210 FINDLATER GARDENS	
	211 BEECHWOOD MAPLE TOWER EVANSTON PC's, Monitors, Printers, Software	8,333	211 BEECHWOOD MAPLE TOWER EVANSTON	

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2014		Work Statement for Year 2015		Estimated Cost
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
	212 RIVERVIEW SAN MARCO	8,333 PC's, Monitors, Printers, Software	212 RIVERVIEW SAN MARCO	8,333	
	213 REDDING PRESIDENT PARK EDEN	8,333 PC's, Monitors, Printers, Software	213 REDDING PRESIDENT PARK EDEN	8,333	
	214 LIBERTY STREET APARTMENTS STANLEY ROWE HOUSES	8,333 PC's, Monitors, Printers, Software	214 LIBERTY STREET APARTMENTS STANLEY ROWE HOUSES	8,333	

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Work Statement for Year 1 FFY 2010	Work Statement for Year 2014		Work Statement for Year 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	215 STANLEY ROWE TOWERS PC's, Monitors, Printers, Software	8,333	215 STANLEY ROWE TOWERS	
	216 PINECREST PC's, Monitors, Printers, Software	8,333	216 PINECREST	
	217 MILLVALE PC's, Monitors, Printers, Software	8,333	217 MILLVALE	
	218 MARQUETTE MANOR/SUTTER VIEW PC's, Monitors, Printers, Software	8,333	218 MARQUETTE MANOR/SUTTER VIEW	
	Subtotal of Estimated Cost (Other)	\$ 150,000	Subtotal of Estimated Cost (Other)	\$

Annual Statement / Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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Part I: Summary		Grant Type and Number	FFY of Grant:		
PHA Name:		Capital Fund Program Grant No:	2009		
OH004 Cincinnati Metropolitan Housing Authority		OH10S00450109 Replacement Housing Factor Grant No:	FFY of Grant Approval:		
Type of Grant					
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Final Performance and Evaluation Report				
Summary by Development Account		Total Estimated Cost	Total Actual Cost ¹		
Line		Original	Revised ²	Obligated	Expended
1	Total non-CFP funds	0	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) ³	0	0.00	0.00	0.00
3	1408 Management Improvements	0	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	1,902,852	1,902,852.00	1,902,852.00	1,550,499.58
5	1411 Audit	0	0.00	0.00	0.00
6	1415 Liquidated Damages	0	0.00	0.00	0.00
7	1430 Fees and Costs	415,989	415,988.55	415,988.55	415,988.55
8	1440 Site Acquisition	0	0.00	0.00	0.00
9	1450 Site Improvement	1,085,983	1,061,789.32	1,061,789.32	699,284.11
10	1460 Dwelling Structures	14,490,695	14,514,888.49	14,514,888.49	11,849,073.60
11	1465.1 Dwelling Equipment - Nonexpendable	1,133,002	1,133,002.64	1,133,002.64	1,133,002.64
12	1470 Non-dwelling structures	0	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	0	0.00	0.00	0.00
14	1485 Demolition	0	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0	0.00	0.00	0.00
16	1495.1 Relocation Costs	0	0.00	0.00	0.00
17	1499 Development Activities ⁴	0	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0	0.00	0.00	0.00
20	Amount of Annual Grant (sum lines 2-19)	0	0.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities	19,028,521	19,028,521.00	19,028,521.00	15,647,948.48
22	Amount of line 20 Related to Section 504 Activities	0	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0	0.00	0.00	0.00

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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Part I: Summary	
PHA Name: OH004 Cincinnati Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH10500450109 Date of CFFP: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____	Replacement Housing Factor Grant No: _____ FFY of Grant: 2009 FFY of Grant Approval: _____
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account	<input checked="" type="checkbox"/> Revised annual Statement revision no: 2 <input type="checkbox"/> Final Performance and Evaluation Report
Line	Total Estimated Cost
	Original Revised ²
	Obligated Expended
	Total Actual Cost ¹

Signature of Executive Director <i>Tom P...</i>	Signature of Public Housing Director
Date 6-14-11	Date

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

Annual Statement of Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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Part II: Supporting Pages									
PHA Name:		Grant Type and Number			Federal FFY Grant:		2009		
OH004 Cincinnati Metropolitan Housing Authority		Capital Fund Program Grant No: Replacement Housing Factor Grant No:			OH10500450109 CFFP (Yes/No):				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Work Items Numbers	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 201 Scattered Sites Central									
4048 Ledgewood	Fees and Cost	1430	7800		70,408.55	70,408.55	70,408.55	70,408.55	Completed
4048 Ledgewood	Retaining Wall; Driveway Repairs	1450	7801		183,557.90	159,364.32	159,364.32	133,522.49	Nearing Completion
4048 Ledgewood	Interior Renovations:	1460	7802		481,180.62	559,250.26	559,250.26	469,017.83	Nearing Completion
	Kitchen Cabinets Bathroom Tub Surrounds Flooring All Electric Plumbing Drywall Insulation Furnace Stove and Refrigerator Fixtures Finishes								
4048 Ledgewood	Exterior Renovations	1460	7803		89,050.00	115,410.56	115,410.56	108,306.00	Nearing Completion
	Tuck pointing Sealing Facade								
Various Scattered Sites	*Door Replacement	1460	7804		67,800.00	67,800.00	67,800.00	67,800.00	Completed
Various Scattered Sites	**Window Replacement	1460	7805		57,835.91	57,835.91	57,835.91	57,835.91	Completed

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			OH10S00450109 CFFP (Yes/No):		Federal FFY Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Work Items Numbers	Quantity:	Total Estimated Cost	Total Actual Cost	Status of Work	Funds Obligated ²	Funds Expended ²	
					Original	Revised ¹				
AMP 202 SCATTERED SITES, FAR SOUTHEAST 6347-6351 Beechmont	Driveway and Parking Lot Replacement	1450	7806		409,396.00	409,396.00		409,396.00	364,856.40	Nearing Completion
6347-6351 Beechmont and Various Scattered Sites	* Roof Replacement	1460	7807		273,574.35	273,574.35		273,574.35	273,574.35	Completed
AMP 203 Scattered Sites Southeast										
Various Scattered Sites	Roof Replacements	1460	7810		8,425.00	8,425.00		8,425.00	8,425.00	Completed

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PHA Name:		Grant Type and Number			Federal FFY Grant:		2009	
OH004 Cincinnati Metropolitan Housing Authority		Capital Fund Program Grant No: Replacement Housing Factor Grant No:			OH10500450109 CFFP (Yes/No):			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Work Items Numbers	Quantity	Total Estimated Cost		Total Actual Cost	Status of Work
					Original	Revised ¹		
						Funds Obligated ²	Funds Expended ²	
AMP 204 Scattered Sites North								
10101-10144 Shivers	*Window and Door Replacement	1460	7811		467,171.51	472,741.57	472,471.57	Completed
10101-10144 Love								
10101-10136 Able								
10101-10136 Hunter								
1700 Wabash and Various Scattered Sites								
10101-10144 Shivers	*Roof Replacement & Attic Insulation	1460	7812		412,330.14	406,759.88	406,759.88	Completed
10101-10144 Love								
10101-10136 Able								
10101-10136 Hunter								
1700 Wabash and Various Scattered Sites								

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			OH10S00450109 CFFP (Yes/No):		Federal FFY Grant: 2009	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Work Items Numbers	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work	
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²
AMP 206 Scattered Sites Southwest	Window Replacement	1460	7816		70,649.58	70,649.58	70,649.58	70,649.58
AMP 208 Scattered Sites Northwest	*Window and Door Replacement	1460	7817		221,701.02	221,701.02	221,701.02	221,701.02
AMP 209 Scattered Sites Various Scattered Sites	*Stove and Refrigerator Replacement	1465.1	7818		72,496.06	72,496.06	72,496.06	72,496.06
AMP 209 Vinton Terrace	Replace Entry Doors and Security Screens	1460	7820		1,474,180.77	1,430,150.77	1,480,150.77	1,328,924.09
	*Window Replacement	1460	7834		1,490,740.00	1,490,740.00	1,490,740.00	1,341,665.90
	*Stove and Refrigerator Replacement	1465.1	7819		512,550.08	512,550.08	512,550.08	512,550.08

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		OHI10S00450109 CFFP (Yes/No):		Federal FFY Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Work Items Numbers	Quantity	Total Estimated Cost Original Revised ¹	Funds Obligated ²	Total Actual Cost Funds Expended ²	Status of Work
AMP 210 Findlater Gardens	Replace Entry, Doors and Security Screens **Window Replacement *Stove and Refrigerator Replacement: Partial only, units not already completed	1460 1460 1465.1	7821 7835 7822		1,516,867.91 1,008,516.00 177,032.10	1,548,204.91 1,008,516.00 177,032.10	1,467,747.41 907,664.40 177,032.10	Nearing Completion Nearing Completion Completed
AMP 211 Beechwood/ Maple Evanston	*Interior Finishes Evanston (Windows) *Interior Finishes Maple Towers (**Windows) Interior Finishes Beechwood (**Windows) *Stove & Refrigerator replacement Evanston (100 Units) *Stove & Refrigerator replacement Maple Towers (125 Units)	1460 1460 1460 1465.1 1465.1	7836 7837 7838 7823 7824		222,292.00 239,910.00 269,840.00 84,301.00 101,161.20	222,292.00 239,910.00 269,840.00 84,301.00 101,161.20	5,612.61 216,184.51 5,401.39 84,301.00 101,161.20	On going Nearing Completion On going Completed Completed

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			OH10S00450109 CFPP (Yes/No):		Federal FFY Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Work Items Numbers	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 212 Riverview San Marco	*Stove & Refrigerator Replacement San Marco (31 Units)	1465.1	7826		25,290.00	25,290.30	25,290.30	25,290.30	Completed
AMP 213 Park Eden/ President/ Redding	*Interior Finishes President (Windows)	1460	7840		256,832.00	142,717.74	142,717.74	140,125.50	Nearing Completion
	*Interior Finishes Park Eden (Windows)	1460	7841		55,922.35	5,742.32	5,742.32	5,742.32	Nearing Completion
	*Interior Finishes Redding (Windows) (9th Floor common areas and units only)	1460	7842		0.00	1,747.07	1,747.07	1,747.07	Nearing Completion
AMP 215 Stanley Rowe A Stanley Rowe B	*Interior Finishes (Windows) Stanley Rowe A	1460	7843		374,950.00	374,950.00	374,950.00	6,871.94	On going
	*Interior Finishes (Windows) Stanley Rowe A	1460	7844		416,810.00	416,810.00	416,810.00	5,735.07	On going
AMP 216 Pincrest	*Stove & Refrigerator Replacement Pincrest All Units	1465.1	7845		160,171.90	160,171.90	160,171.90	160,171.90	Completed

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Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Work Items Numbers	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 217 Millvale	Sidewalks; Retaining Walls; Drainage, Landscaping	1450	7827		493,029.00	493,029.00	493,029.00	200,905.22	Nearing Completion
	Interior Renovations	1460	7828		2,994,062.80	2,994,434.40	2,994,434.40	2,492,043.11	Nearing Completion
	All Electric Plumbing Drywall Insulation 504 Units Furnace replacement Stove and Refrigerator								
	Exterior Renovation Exterior Facade	1460	7829		921,353.15	920,236.15	920,236.15	875,761.95	Nearing Completion

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Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Work Items Numbers	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 218 Marquette Manor Sutterview	*Window Replacement Interior Renovations Kitchen Cabinet All Electric Flooring Plumbing Fixtures Bath Tub Surrounds Subfloors	1460 1460	7830 7831		529,776.00 573,924.00	319,599.44 824,849.56	319,599.44 824,849.56	167,023.20 724,251.99	On going Nearing Completion
Agency Wide	10% Administration Physical Needs Assessment (P.N.A.)	1410 1430	7833 7832		1,902,852.00 345,580.00	1,902,852.00 345,580.00	1,902,852.00 345,580.00	1,550,499.58 345,580.00	Nearing Completion Completed

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Part I: Summary

PHA Name: OH004 Cincinnati MHA
 Grant Type and Number: OH10P00450110 Replacement Housing Factor Grant No:
 Capital Fund Program Grant No: _____
 Date of CFFP: _____

FFY of Grant: 2010
 FFY of Grant Approval: _____

Type of Grant: Original Annual Statement Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: _____
 Revised annual Statement (revision no: _____)
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost			Total Actual Cost ¹
		Original	Revised ²	Obligated	
1	Total non-CFP funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 20) ³	2,306,056	2,306,056	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 20)	1,164,730	1,164,730	1,164,730	750,122
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	287,422	287,422	30,611	26,812
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	770,657	770,657	10,900	10,900
10	1460 Dwelling Structures	5,331,741	5,331,741	202,595	75,764
11	1465.1 Dwelling Equipment - Nonexpendable	0	0	0	0
12	1470 Non-dwelling structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ⁴	250,000	250,000	0	0
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18b	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)	1,536,699	1,536,699	1,536,699	384,175
20	Amount of Annual Grant: (sum lines 2-19)	0	0	0	0
21	Amount of line 20 Related to LBP Activities	11,647,305	11,647,305	2,945,535	1,247,772
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security - Soft Costs	0	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

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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Part I: Summary		FFY of Grant: 2010	
PHA Name: OH1004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: OH10P00L50110	Replacement Housing Factor Grant No:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	<input checked="" type="checkbox"/> Revised annual Statement (revision no. 1) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost
		Original	Revised
		Obligated	Expended

Signature of Executive Director <i>Ken Ryan</i>	Signature of Public Housing Director
Date 6-14-11	Date

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

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):		Federal FFY Grant: 2010		
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No: Development Account No.		Total Actual Cost		Status of Work
General Description of Major Work Categories		Quantity	Total Estimated Cost	Funds Obligated ²	Funds Expended ²	
			Original	Revised ¹		
AMP 201 Scattered Sites Central		1406	115,441.51	115,441.51	0.00	
Fees and service		1430	27,761.00	26,761.00	0.00	
Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway / Parking Lots		1450	69,529.00	69,529.00	0.00	
160 W 73rd, 2601 Marsh, 4237 Leonard, 2416 Galbraith, 3471 Fernside, 4558 Harrison 1-2, 2455 Galbraith, 4556 Cooper						

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10F00450110 CFFP (Yes/No):		Federal FFY Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	
AMP 201 Scattered Sites: Central 160 W. 73rd, 1315 Franklin, 2329 Glenside, 2601 Marsh, 2720-2722 Losantville, 6661 Bantry, 6731 Kennedy, 4237 Leonard 1-2, 3639 Besuden, 1754 Catalalina, 1928 Dale, 2416 Galbraith, 76 E. Galbraith 1-8, 6202 Elbrook, 3471 Fernside 1-11, 3944 Grand, 4558 Harrison 1-2, 2455 Galbraith 1-10, 6605 Lebanon, 3156 -58 Parkview, 10 Poplar, 4319 Vern, 4338 Webster, 4556 Cooper, 1708 & 1726 Race	Interior, Exterior Renovations: • Siding & Soffit Replacement/ Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters • Boilers	1460		323,225.00	323,225.00	0.00
Collateralization or Debt Service		9000		27,896.00	27,896.00	6,974.00

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):		Federal FFY Grant:		2010
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	
AMP 202 SCATTERED SITES, FAR SOUTHEAST	Operations/ Non Routine Maintenance	1406		37,971.36	37,971.36	
	Fees and Service	1430		2,200.00	183.96	
	HVAC • Water Heaters • Boilers • A/C units	1460		52,147.00	0.00	
	Collateralization or Debt Service	9000		3,887.00	3,887.00	971.75

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):		Federal FFY Grant: 2010				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 203 Scattered Sites Southeast	Operations/ Non Routine Maintenance	1406		50,373.32	50,373.32	0.00	0.00	
6925 Bramble 1-2, 7370-80 Shawnee Run	Fees and services Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots	1430 1450		4,376.00 19,056.00	10,957.00 19,056.00	10,957.00 0.00	8,432.46 0.00	
6925 Bramble 1-2, 7370-80 Shawnee Run	Interior/Exterior Renovations: • Siding & Soffit Replacement/ Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters	1460		101,323.00	101,323.00	0.00	0.00	
	Collateralization or Debt Service	9000		20,590.00	20,590.00	20,590.00	5,147.50	

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):		Federal FFY Grant:		2010
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	
AMP 204 Scattered Sites North	Operations/ Non Routine Maintenance	1406		200,875.56	200,875.56	
882 Waycross 1-2, 10100-10145 Able, 10100-10145 Shivers, 10100-10145 Love Ct, 10100-10137 Hunter, 96 Leslie	Fees and service Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots	1430 1450		16,180.00 148,368.00	18,195.40 148,368.00	0.00 18,195.40 0.00
882 Waycross 1-2, 10100-10145 Able, 10100-10145 Shivers, 10100-10145 Love Ct, 10100-10137 Hunter, 96 Leslie, 9175-77 E Kemper	Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Truck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters • Boilers	1460		464,349.00	464,349.00	171,744.85 54,913.61
Collateralization or Debt Service		9000		9,184.00	9,184.00	2,296.00

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PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: OH10P00450110 Replacement Housing Factor Grant No:	Quantity	Total Estimated Cost		Federal FFY Grant:		Status of Work
			Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.					
AMP 205 Scattered Sites Far South-west							
598 Claymore 1-5, 5157-5159 Cleves Warsaw, 4605 Foley 1-5, 1322-1338 Le Mar, 1783-1885 Provential, 2012-2140 Quebec 1208 Covedale 1-2, 1119 Betty Ln 1-2	Fees and service Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots	1406 1430 1450	175,341.92 12,171.00 95,584.00	175,341.92 11,171.00 95,584.00	0.00 0.00 10,900.00	0.00 0.00 10,900.00	
598 Claymore 1-5, 5157-5159 Cleves Warsaw, 4605 Foley 1-5, 1322-1338 Le Mar, 1783-1885 Provential, 2012-2140 Quebec 1208 Covedale 1-2, 1119 Betty Ln 1-2, 586 Claymore 1-5	Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters • Boilers	1460	414,603.00	414,603.00	11,350.00	11,350.00	
	Collateralization or Debt Service	9000	12,739.00	12,739.00	12,739.00	3,184.75	

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Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	Total Actual Cost
AMP 206 Scattered Sites South-west	Operations / Non Routine Maintenance	1406		129,554.15	129,554.15	
432 Elizabeth 1-2,	Fees and service	1430		5,684.00	4,684.00	0.00
3110 Braken Wood 1-4,	Site:	1450		59,272.00	59,272.00	0.00
3026 Gobel 1-4,	• Landscaping					
3629 Woodbine 1-2,	• Tree trimming					
2714 Orland 1-2,	• Fences					
2711 Lefeville 1-2,	• Utilities					
2215 WoodNorthern 1-2	• Lighting					
	• Walkways Steps					
	• Driveway / Parking Lots					
410 Elizabeth,	Interior/Exterior Renovations:	1460		310,901.00	310,901.00	9,500.00
402 Elizabeth 1-2,	• Siding & Soffit Replacement/Repair					
1939 Fairmount,	• Interior Wall Repairs					
427 Ezzard Charles,	• Plumbing Upgrades					
3110 Braken Wood 1-4,	• Electrical Upgrades					
3026 Gobel 1-4,	• Kitchen Cabinets & Flooring					
3629 Woodbine 1-2,	• New Fixtures					
1785 & 1791 Carlil,	• Foundation Repairs					
2714 Orland 1-2,	• Tuck pointing & Sealing Exterior of Building					
2711 Lefeville 1-2,	• Windows/ Doors and Screen					
2215 WoodNorthern 1-2	• Interior Finishes					
	• Roof Replacement					
	• Furnace/ AC Units					
	• Water Heaters					
	• Boilers					
	Collateralization or Debt Service	9000		3,762.00	3,762.00	940.50

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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	Funds Obligated ²	Funds Expended ²	
AMP 207 Scattered Sites Northwest		Operations/ Non Routine Maintenance	1406		204,465.44	0.00	0.00	
2547 West North Bend, 5142-5148 Hawaiian Terr, 6090-6092 Belmont 1-4, 1652 Westmoreland 1-2, 3271 Gayway 1-4, 7273 Boleyn 1-4, 3030 Sheldon 1-2, 11961 Waldon, 211 E Braodway, 4249 Williamson Pl,		Fees And Services Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors and Screen • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters • Boilers	1430 1460		2,072.00 604,704.00	1,275.00 0.00	0.00 0.00	
		Collateralization or Debt Service	9000		20,566.00	20,566.00	5,141.50	

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Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No: Development Account No.		Quantity	Total Estimated Cost	Status of Work
General Description of Major Work Categories					Original	Revised ¹
					Funds Obligated ²	Funds Expended ²
					Total Actual Cost	
AMP 208 Scattered Sites Northwest	Operations/ Non Routine Maintenance	1406			71,825.47	71,825.47
3035-3071 Walter,	Fees And Services	1430			20,720.00	0.00
3030-3064 Mather,	Site:	1450			16,032.00	0.00
864-874 Altoona,	• Landscaping					
420 Glenwood 1-20,	• Tree trimming					
415-417 Cathrine,	• Fences					
3465 Knott,	• Utilities					
918-922 Nassau 1-5,	• Lighting					
415-437 Rockdale,	• Walkways Steps					
418 Kasota 1-7,	• Driveway/ Parking Lots					
100-139 Rion Ln						
3035-3071 Walter,	Interior / Exterior Renovations:	1460			128,709.00	0.00
3030-3064 Mather,	• Siding & Soffit Replacement/ Repair					
864-874 Altoona,	• Interior Wall Repairs					
3503 Vine,	• Plumbing Upgrades					
420 Glenwood 1-20,	• Electrical Upgrades					
3470-3472 Harvey,	• Kitchen Cabinets & Flooring					
415-417 Cathrine,	• New Fixtures					
3465 Knott,	• Foundation Repairs					
2106 Sinton 101-316,	• Tuck pointing & Sealing Exterior of Building					
918-922 Nassau 1-5,	• Windows/ Doors and Screen					
546 Stewart,	• Interior Finishes					
415-437 Rockdale,	• Roof Replacement					
418 Kasota 1-7,	• Furnace/ AC Units					
100-139 Rion Ln,	• Water Heaters					
22 Glenwood,	• Boilers					
332-334 Northern						
	Collateralization or Debt Service	9000			32,509.00	8,127.25
					32,509.00	32,509.00

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):			Federal FFY Grant:		2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 210 Findlater Gardens	Operations/ Non Routine Maintenance	1406		96,909.49	96,909.49	0.00	0.00	
	Fees and Services	1430		13,058.00	11,462.00	0.00	0.00	
	Viability Study/ Market Study	1430		32,840.00	32,840.00	0.00	0.00	
	Site:	1450		25,609.00	25,609.00	0.00	0.00	
	<ul style="list-style-type: none"> • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots 							
	Interior/Exterior Renovations:	1460		143,300.00	143,300.00	0.00	0.00	
	<ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Tuck pointing & Sealing Exterior of Building • Interior Finishes • Roof Replacement 							
	Collateralization or Debt Service	9000		425,712.00	425,712.00	425,712.00	106,428.00	

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):			Federal FFY Grant:		2010	
Development Number Name/PHA-Wide Activities		General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost		Status of Work
					Original	Funds Obligated ²	Funds Expended ²	
AMP 211 Beechwood/ Maple Evanson		Operations/ Non Routine Maintenance	1406		233,285.30	0.00	0.00	
		Fees and Services	1430		8,027.00	0.00	0.00	
		Site:	1450		85,363.00	0.00	0.00	
		<ul style="list-style-type: none"> • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots 						
		Interior/Exterior Renovations:	1460		540,419.00	0.00	0.00	
		<ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Retaining Wall • Tuck pointing & Sealing Exterior of Building • Door • Interior Finishes • Roof Replacement • Domestic Hot Water • Heat Pumps • A/C units 						
		Collateralization or Debt Service	9000		92,434.00	92,434.00	23,108.50	

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):			Federal FFY Grant:		2010
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity	Total Estimated Cost		Status of Work
General Description of Major Work Categories		Development Account No.	Total Estimated Cost		Total Actual Cost		
			Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 213 Park Eden/ President/ Redding	Operations/ Non Routine Maintenance	1406	187,556.59	187,556.59	0.00	0.00	
	Fees and Services	1430	9,192.00	8,192.00	0.00	0.00	
	Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots	1450	11,584.00	11,584.00	0.00	0.00	
	Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Doors • Retaining Wall • Interior Finishes • Roof Replacement	1460	505,104.00	505,104.00	0.00	0.00	

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):		Federal FFY Grant: 2010				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Replacement Housing Factor Grant No: Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 215 Stanley Rowe A Stanley Rowe B	Operations/ Non Routine Maintenance Fees and service Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Doors • Interior Finishes • Roof Replacement • Domestic Hot Water • A/C units (roof top installation)	1406 1430 1450		124,549.76 5,720.00 16,094.00	124,549.76 5,720.00 16,094.00	0.00 0.00 0.00	0.00 0.00 0.00	
		1460		284,338.00	284,338.00	0.00	0.00	

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):		Federal FFY Grant:		2010			
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No: Development Account No.		Quantity		Total Estimated Cost	Total Actual Cost	Status of Work	
General Description of Major Work Categories						Original	Revised ¹	Funds Obligated ²	Funds Expended ²
AMP 216 Pincrest	Operations/ Non Routine Maintenance		1406			139,185.57	139,185.57	0.00	0.00
	Fees and service		1430			3,200.00	3,200.00	0.00	0.00
	Site: <ul style="list-style-type: none"> • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots 		1450			5,734.00	5,734.00	0.00	0.00
	Interior/Exterior Renovations: <ul style="list-style-type: none"> • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Retaining wall/ Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Windows/ Doors • Interior Finishes • Roof Replacement • Domestic Hot Water • A/C units (roof top installation) 		1460			364,088.00	364,088.00	0.00	0.00

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):			Federal FFY Grant:		2010
Development Number Name/PHA-Wide Activities		General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work
					Original	Funds Obligated ²	Funds Expended ²
					Revised ¹		
AMP 217 Millvale	Operations/ Non Routine Maintenance	1406			96,558.76	0.00	0.00
	Viability Study/ Market Study	1430			32,840.00	0.00	0.00
	Fees and service	1430			7,112.00	0.00	0.00
	Site:	1450			53,000.00	0.00	0.00
	<ul style="list-style-type: none"> • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveway/ Parking Lots 						
	Interior/Exterior Renovations:	1460			145,600.00	0.00	0.00
	<ul style="list-style-type: none"> • Siding & Soffit Replacement/ Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Retaining wall • Windows/ Doors • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters 						
	Collateralization or Debt Service	9000			506,257.00	506,257.00	126,564.25

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):			Federal FFY Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 218 Marquette Manor Sutterville	Operations/ Non Routine Maintenance Fees and service Viability Study/ Market Study Site: • Landscaping • Tree trimming • Fences • Utilities • Lighting • Walkways Steps • Driveaway/ Parking Lots	1406 1430 1430 1450		201,740.95 2,240.00 35,840.00 39,829.00	201,740.95 2,240.00 35,840.00 39,829.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	
	Interior/Exterior Renovations: • Siding & Soffit Replacement/Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building • Interior Finishes • Roof Replacement • Furnace/ AC Units • Water Heaters Collateralization or Debt Service	1460		604,482.00	604,482.00	0.00	0.00	
		9000		92,480.00	92,480.00	92,480.00	23,120.00	

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PHA Name: OH004 Cincinnati MIHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450110 CFFP (Yes/No):		Federal FFY Grant: 2010				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Agency Wide	Development Activities	1499		250,000.00	250,000.00	0.00	0.00	
	100 Unit New Construction Mixed Finance			250,000.00	250,000.00	0.00	0.00	
	10% Management Fee	1410		1,164,730.00	1,164,730.00	1,164,730.00	750,122.27	

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority
 Grant Type and Number: OH10P0045019
 Capital Fund Program Grant No: OH10P0045019
 Date of CFPP: _____
 Replacement Housing Factor Grant No: _____
 FFY of Grant: 2009
 FFY of Grant Approval: _____

Type of Grant: Original Annual Statement Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: _____
 Revised annual Statement (revision no): 2
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost			Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended	
	Total non-CFP funds	0	0	0	0	
2	1406 Operators (may not exceed 20% of line 21) ³	2,306,450	1,540,863	1,464,711	904,804	
3	1408 Management Improvements	0	0	0	0	
4	1410 Administration (may not exceed 10% of line 21)	1,000,163	1,000,163	1,000,163	1,000,163	
5	1411 Audit	0	0	0	0	
6	1415 Liquidated Damages	0	0	0	0	
7	1430 Fees and Costs	245,500	270,000	204,428	94,088	
8	1440 Site Acquisition	0	0	0	0	
28:9	1450 Site Improvement	638,640	638,298	307,298	38,727	
10	1460 Dwelling Structures	4,565,880	5,306,967	4,709,975	225,663	
11	1465.1 Dwelling Equipment - Nonexpendable	0	0	0	0	
12	1470 Non-dwelling structures	0	0	0	0	
28:13	1475 Non-dwelling Equipment	0	0	0	0	
14	1485 Demolition	45,000	45,000	270,000	0	
15	1492 Moving to Work Demonstration	0	0	0	0	
16	1495.1 Relocation Costs	0	0	0	0	
17	1499 Development Activities ⁴	1,200,000	1,200,000	0	0	
28:18a	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	1,536,699	1,536,699	1,536,699	1,536,699	
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0	
20	Amount of Annual Grant: (sum lines 2-19)	11,538,332	11,538,332	9,493,274	3,800,143	
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	560,000	560,000	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	

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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PHA Name: OH1004 Cincinnati Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH10P0045019 Date of CFFP: _____	Replacement Housing Factor Grant No: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account	FFY of Grant Approval: _____
<input checked="" type="checkbox"/> Revised annual Statement (revision no): 2 <input type="checkbox"/> Final Performance and Evaluation Report		
Total Estimated Cost		Total Actual Cost
Original	Revised	Obligated
		Expended

Signature of Executive Director <i>Kenyon</i>	Date 6-14-11
Signature of Public Housing Director	
Date	

6347-6351 Worksheet 1314 Crotty 1300 Reacon

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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PHA Name:		Grant Type and Number			Federal FFY Grant:		2009			
OH1004 Cincinnati Metropolitan Housing Authority:		Capital Fund Program Grant No: OH10P0045019			CFFP (Yes/No):					
Development Number Name/FHA-Wide Activities		Replacement Housing Factor Grant No:			Quantity		Total Estimated Cost		Status of Work	
		Development Account No.								
		General Description of Major Work Categories								
					Original		Revised ¹		Funds Obligated ²	
									Funds Expended ²	
AMP 201 Scattered Sites Central		Operations/ Non Routine Maintenance			1406		80,719.00		69,872.27	
2821 Rosella		Fees and Cost			1430		42,000.00		42,000.00	
8464 Monroe		Site Work:			1450		61,000.00		41,000.00	
5137 Silver		Driveways/Parking lots								
2821 Rosella		Side walks								
8464 Monroe		Retaining Walls								
5137 Silver		Landscaping								
		Lighting								
		Sewer/ Drainage Repair								
2821 Rosella		Interior/ Exterior Renovations			1460		566,730.00		351,663.78	
8464 Monroe		Roofing / Siding/Soffit replacement repair								
5137 Silver		Plumbing Upgrades								
		Electric Upgrades								
		Kitchen Cabinets & Flooring								
		New Fixtures								
		Tuck pointing & Sealing Exterior								
		Interior Finishes/ Wall Repairs								
		Exterior Doors								
		Windows								
		HVAC								
2821 Rosella		Demolition of 2821 Rosella			1485		15,000.00		15,000.00	
8464 Monroe		Collateralization or Debt Service			9000		27,896.00		27,896.00	
5137 Silver									0.00	
									27,896.00	

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019			CFFP (Yes/No):			Federal FFY Grant: 2009	
Development Number Name/PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
AMP 202 SCATTERED SITES, FAR SOUTHEAST	Operations/ Non Routine Maintenance	1406		60,979.00	71,707.40	70,262.58	65,982.82		
6347-6351 Beechmont	Fees and Cost	1430		22,000.00	64,703.20	64,703.20	55,134.06		
	Interior Renovations	1460		614,410.00	2,779,325.00	3,779,325.00	99,325.00		
	Roofing / Siding/Soffit replacement repair								
	Plumbing Upgrades								
	Electric Upgrades								
	Kitchen Cabinets & Flooring								
	New Fixtures								
	Tuck pointing & Sealing Exterior								
	Interior Finishes/ Wall Repairs								
	Exterior Doors								
	Windows								
	HVAC								
	Collateralization or Debt Service	9000		3,887.00	3,887.00	3,887.00	3,887.00		

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019 Replacement Housing Factor Grant No:		Federal FFY Grant: 2009				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 203 Scattered Sites Southeast	Operations/ Non Routine Maintenance	1406		14,805.00	12,717.07	12,170.59	396.02	
7501 Camargo	Fees and Cost	1430		22,000.00	20,975.96	20,975.96	819.86	
7501 Camargo	Site Work: Driveways/Parking lots Side walks Retaining Walls Landscaping Lighting Sever/ Drainage Repair	1450		35,030.00	35,030.00	11,415.00	4,920.00	
7501 Camargo 5717 Islington Ave, 7501 Camargo 1-2, 5717 Islington, 3711 Carlton, 3703 Ridgedale, 519-523 Hickory	Interior/ Exterior Renovations Roofing / Siding/Soffit replacement repair Plumbing Upgrades Electric Upgrades Kitchen Cabinets & Flooring New Fixtures Tuck pointing & Sealing Exterior Foundation Repairs Gutters and Fascia Interior Finishes/ Wall Repairs Exterior Doors Windows HVAC Collateralization or Debt Service	1460		250,000.00	250,000.00	110,830.00	0.00	
		9000		20,590.00	20,590.00	20,590.00	20,590.00	

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PHA Name:		Capital Fund Program Grant No:		CFFP (Yes/No):			
OH004 Cincinnati Metropolitan Housing Authority		OH10P0045019					
Development Number Name/PHA Wide Activities		Replacement Housing Factor Grant No:		Quantity		Total Estimated Cost	
		Development Account No.				Original	
General Description of Major Work Categories				Revised		Funds Obligated ²	
						Funds Expended ²	
						Total Actual Cost	
						Status of Work	
AMP 204 Scattered Sites North	Operations/ Non Routine Maintenance	1406		88,798.00	125,228.27	122,897.10	76,742.44
1189 Lawn View 120 N Cooper 4358 Williams 209 Clark	Fees and Cost	1430		22,000.00	38,043.20	38,043.20	28,061.77
1189 Lawn View 120 N Cooper 4358 Williams 209 Clark	Site Work: Driveways/Parking lots Side walks Retaining Walls Landscaping Lighting Sever/ Drainage Repair	1450		60,460.00	140,607.28	140,607.28	23,741.28
1189 Lawn View 120 N Cooper 4358 Williams 209 Clark	Interior/ Exterior Renovations Roofing / Siding/Soffit replacement repair Plumbing Upgrades Electric Upgrades Kitchen Cabinets & Flooring New Fixtures Tuck pointing & Sealing Exterior Foundation Repairs Gutters and Fascia Interior Finishes/ Wall Repairs Exterior Doors Windows HVAC Collateralization or Debt Service	1460		250,000.00	70,000.00	894.07	894.07
		9000		9,184.00	9,184.00	9,184.00	9,184.00

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Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
General Description of Major Work Categories		Development Account No.		Original		Revised ¹		Funds Obligated ²	Funds Expended ²	
AMP 205 Scattered Sites Far South-west		1406				57,574.00		12,112.08	5,317.12	
1783-1885 Provincial 2012-2140 Quebec		1430				22,000.00		6,000.00	2,790.88	
1783-1885 Provincial 2012-2140 Quebec		1450				125,990.00		600.00	600.00	
1783-1885 Provincial 2012-2140 Quebec		1460				281,920.00		1,300.00	1,300.00	
Collateralization or Debt Service		9000				12,739.00		12,739.00	12,739.00	

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Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		CFFP (Yes/No):		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	
AMP 206 Scattered Sites Southwest	Operations/ Non Routine Maintenance	1406		54,399.00	8,967.60	
	Fees and Cost	1430		20,000.00	28,800.00	0.00
	Site Work	1450		15,000.00	15,000.00	0.00
	Driveways/Parking lots					
	Side walks					
	Retaining Walls					
	Landscaping					
	Lighting					
	Sever/ Drainage Repair					
	Interior/ Exterior Renovations	1460		339,630.00	139,630.00	47,900.00
	Roofing / Siding/Soffit replacement repair					
	Plumbing Upgrades					
	Electric Upgrades					
	Kitchen Cabinets & Flooring					
	New Fixtures					
	Tuck pointing & Sealing Exterior					
	Foundation Repairs					
	Gutters and Fascia					
	Interior Finishes/ Wall Repairs					
	Exterior Doors					
	Windows					
	HVAC					
	Collateralization or Debt Service	9000		3,762.00	3,762.00	3,762.00

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019 Replacement Housing Factor Grant No:			Federal FFY Grant:		2009	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 207 Scattered Sites Northwest	Operations/ Non Routine Maintenance	1406		46,059.00	11,725.77	10,033.77	3,503.85	
3531 Blue Rock	Site Work Drive-ways/Parking lots Side walks Retaining Walls Landscaping Lighting Sewer/ Drainage Repair	1450		77,050.00	77,050.00	5,685.00	5,685.00	
AMP 207 Scattered Sites Northwest 3703 Ridgedale 3531 Blue rock	Interior/ Exterior Renovations Roofing / Siding/Soffit replacement repair Plumbing Upgrades Electric Upgrades Kitchen Cabinets & Flooring New Fixtures Tuck pointing & Sealing Exterior Foundation Repairs Gutters and Faccia Interior Finishes/ Wall Repairs Exterior Doors Windows HVAC Collateralization or Debt Service	1460		376,490.00	56,490.00	48,204.97	48,204.97	
		9000		20,566.00	20,566.00	20,566.00	20,566.00	

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Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
AMP 208 Scattered Sites Northwest	Operations/ Non Routine Maintenance	1406		78,958.00	99,387.33	96,546.05	49,435.98		
3010-3064 Mathers 3035-3065 Walters 864-874 Altoona 100-139 Rion Ln 3544 Haven 3587 Perdue	Fees and Cost	1430		55,500.00	39,477.64	6,850.00	3,913.12		
3010-3064 Mathers 3035-3065 Walters 864-874 Altoona 100-139 Rion Ln 3544 Haven 3587 Perdue 519-523 Hickory	Interior/ Exterior Renovations Roofing / Siding/Soffit replacement repair Plumbing Upgrades Electric Upgrades Kitchen Cabinets & Flooring New Fixtures Tuck pointing & Sealing Exterior Foundation Repairs Gutters and Fascia Interior Finishes/ Wall Repairs Exterior Doors Windows HVAC	1460		738,430.00	370,430.00	14,447.03	11,001.02		
	Demolition of 3544 Haven and 3587 Perdue	1485		30,000.00	30,000.00	0.00	0.00		
	Collateralization or Debt Service	9000		32,509.00	32,509.00	32,509.00	32,509.00		

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Part II: Supporting Pages										
PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019			CFPP (Yes/No):			Federal FFY Grant: 2009		
Development Number Name/PHA-Wide Activities		General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
						Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 209 Vinton Terrace		Operations/ Non Routine Maintenance Fees and Cost Site Work Driveways/Parking lots Side walks Retaining Walls Landscaping Lighting Sever/ Drainage Repair		1406 1430 1450		205,620.00 20,000.00 114,500.00	67,593.16 15,000.00 84,500.00	60,223.80 1,292.60 0.00	38,863.03 1,292.60 0.00	
		Collateralization or Debt Service		9000		247,901.00	247,901.00	247,901.00	247,901.00	
AMP 210 Findlater Gardens		Operations/ Non Routine Maintenance Collateralization or Debt Service		1406 9000		217,135.00 425,712.00	110,466.28 425,712.00	103,788.95 425,712.00	67,621.06 425,712.00	

Part II: Supporting Pages										
PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019			CFPP (Yes/No):			Federal FFY Grant: 2009		
Development Number Name/PHA-Wide Activities		General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
						Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 211 Beechwood/ Maple Erwinston		Operations/ Non Routine Maintenance		1406		265,017.00	54,844.94	50,673.01	33,682.95	
		Site Work		1450		75,000.00	145,210.64	145,210.64	0.00	
		Driveways/Parking lots								
		Side walks								
		Retaining Walls								
		Landscaping								
		Lighting								
		Sewer/ Drainage Repair								
		Compactor Replacement		1460		45,200.00	45,200.00	0.00	0.00	
		Carpet Replacement		1460		120,000.00	104,347.20	0.00	0.00	
		Collateralization or Debt Service		9000		92,434.00	92,434.00	92,434.00	92,434.00	
AMP 212 Riverview San Marco		Operations/ Non Routine Maintenance		1406		139,704.00	18,558.05	16,870.67	10,796.82	
		Fees and Cost		1430		20,000.00	15,000.00	93.38	93.38	
		Boiler Pump Replacement		1460		30,350.00	30,350.00	0.00	0.00	
		Replace compactor River view and San Marco		1460		52,940.00	52,940.00	0.00	0.00	
		Collateralization or Debt Service		9000		40,782.00	40,782.00	40,782.00	40,782.00	
AMP 213 Park Eden President Redding		Operations/ Non Routine Maintenance		1406		265,017.00	231,948.03	230,135.70	173,336.45	
		Site Work		1450		53,110.00	37,752.08	0.00	0.00	
		Driveways/ Parking Lots								
		Sidewalk								
		Landscaping								
		Fence								
		Replace Compactor - Redding		1460		25,000.00	25,000.00	0.00	0.00	

Part II: Supporting Pages

PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019 CFFP (Yes/No):		Federal FFY Grant: 2009		
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		Total Actual Cost		Status of Work
General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	Funds Obligated ²	Funds Expended ²
				Original	Revised ¹	
AMP 214 Liberty St Apartments	Operations/ Non Routine Maintenance	1406		65,789.00	51,535.68	22,044.73
	Site Work	1450		21,500.00	16,500.00	0.00
	Driveways/ Parking Lots					
	Sidewalks					
	Landscaping					
	Fence					
	Interior/ Exterior Renovation	1460		141,940.00	126,287.19	0.00
	Roofing / Siding/ Soffit					
	Plumbing Upgrades					
	Electric Upgrades					
	Kitchen Cabinets & Flooring					
	New Fixtures					
	Tuck pointing & Sealing Exterior					
	Gutters and Fascia					
	Interior Finishes/ Wall Repairs					
	Exterior Doors					
	Windows					
	HVAC					
	Appliances					
	HAZMAT Ccst					

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 Office of Public and Indian Housing
 OMB No. 2577-0226
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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019			CHFP (Yes/No):		Federal FFY Grant:		2009	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work		
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²			
AMP 215 Stanley Rowe A Stanley Rowe B	Operations/ Non Routine Maintenance	1406		220,082.00	119,662.22	94,121.45	57,762.79			
	Compactor Lift replacement	1460		17,000.00	17,000.00	0.00	0.00			
AMP 216 Pinecrest	Operations/ Non Routine Maintenance	1406		114,153.00	56,566.68	54,259.88	29,390.32			
	Main Switch Gear	1460		20,340.00	0.00	0.00	0.00			
AMP 217 Millvale	Operations/ Non Routine Maintenance	1406		194,504.00	280,519.43	273,622.60	180,623.94			
	Collateralization or Debt Service	9000		506,257.00	506,257.00	506,257.00	506,257.00			

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019		Federal FFY Grant: 2009		
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		CFPP (Yes/No):		
General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	
AMP 218 Manquette Manor Suterville	Operations/ Non Routine Maintenance	1406		127,138.00	135,492.91	31,371.09
	Interior/ Exterior Renovations Roofing / Siding/Soffit Plumbing Upgrades Electric Upgrades Kitchen Cabinets & Flooring New Fixtures Tuck pointing & Sealing Exterior Gutters and Fascia Interior Finishes/ Wall Repairs Exterior Doors Windows HVAC -Heat pump Appliances HAZMAT Cost Compactor Replacement	1460		695,500.00	706,384.00	16,347.60
Collateralization or Debt Service		9000		92,480.00	92,480.00	92,480.00

Part II: Supporting Pages

PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH10P0045019		Federal FFY Grant:		2009	
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:		CFFP (Yes/No):		Status of Work	
General Description of Major Work Categories		Development Account No.		Total Estimated Cost		Total Actual Cost	
				Original		Revised ¹	
				Obligated ²		Expended ²	
Agency Wide		1499		1,200,000.00		0.00	
10% Management Fee		1410		1,000,163.00		1,000,163.00	

Part I: Summary

PHA Name: **OH004 Cincinnati Metropolitan Housing Authority**
 Grant Type and Number: **Capital Fund Program Grant No: OH10P0045018** Replacement Housing Factor Grant No: _____
 Date of CFFP: _____ FFY of Grant: **2008**
 FFY of Grant Approval: _____

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: _____
 Revised annual Statement (revision no): **1**
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost			Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended	
1	Total non-CFF funds	0	0	0	0	
2	1406 Operations (may not exceed 20% of line 21) ³	2,625,927	2,625,927	687,702	440,924	
3	1408 Management Improvements	649,530	649,530	312,648	151,023	
4	1410 Administration (may not exceed 10% of line 21)	1,162,782	1,162,782	1,162,782	1,162,782	
5	1411 Audit	0	0	0	0	
6	1415 Liquidated Damages	0	0	0	0	
7	1430 Fees and Costs	171,840	171,840	284,792	82,598	
8	1440 Site Acquisition	0	0	0	0	
9	1450 Site Improvement	611,912	611,912	352,528	2,798	
10	1460 Dwelling Structures	5,385,824	4,938,440	5,420,671	171,453	
11	1465.1 Dwelling Equipment - Nonexpendable	0	447,384	0	0	
12	1470 Non-dwelling structures	0	0	0	0	
13	1475 Non-dwelling Equipment	0	0	0	0	
14	1485 Demolition	0	0	0	0	
15	1492 Moving to Work Demonstration	0	0	0	0	
16	1495.1 Relocation Costs	0	0	0	0	
17	1499 Development Activities ⁴	1,020,000	1,020,000	1,020,000	0	
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	1,536,699	1,536,699	1,536,699	1,536,699	
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0	
20	Amount of Annual Grant (sum lines 2-19)	13,164,514	13,164,514	10,777,821	3,548,276	
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	254,600	254,600	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	3,273,997	3,273,997	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 CFFP Grants for operations

⁴ RHF: funds shall be included here

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Part I: Summary		FFY of Grant: 2008
PHA Name: OH004 Cincinnati Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH1010045018 Date of CFFP: _____	FFY of Grant Approval: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	Reserve for Disasters/Emergencies <input type="checkbox"/> Revised annual Statement (revision no): 1 Final Performance and Evaluation Report <input type="checkbox"/>	
Line: Summary by Development Account	Total Estimated Cost	Total Actual Cost:
Signature of Executive Director: <i>[Signature]</i>	Original Date: 6-14-11	Obligated
	Revised*	Expanded
	Signature of Public Housing Director	Date

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

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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Part II: Supporting Pages

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	CFPP (Yes/No):		Federal FFY Grant:		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 201 Scattered Sites Central	Furnace and A/C Replacements 22 Units Bathroom rehabilitation Tub Surrounds Fixtures Flooring Electrical Upgrades Plumbing Upgrades Wall Finishes	1460 1460		66,275 142,153	66,275 142,153	98,292 146,706	32,000	2008
AMP 202 SCATTERED SITES, FAR SOUTHEAST	Collateralization or Dept service * Boiler/ Furnace Replacement * Stove and Refrigerator Replacement * Stove and Refrigerator Replacement * Furnace and A/C Replacement	9000 1460 1460 1465.1 1460		27,896 115,460 40,342 0 40,342	27,896 115,460 0 0 61,472	27,896 115,460 0 0 3,887	27,896	Completed Changed to BLI 1465.1 Completed
AMP 203 Scattered Sites Southeast	Collateralization or Dept service Site Work: Driveways, Side walks, Retaining walls * Stove and Refrigerator Replacement units * Stove and Refrigerator Replacement Collateralization or Dept service	9000 1450 1460 1465.1 9000		3,887 17,288 46,104 0 20,590	3,887 17,288 0 46,104 20,590	3,887 3,887 20,590	3,887 20,590	Completed Changed to BLI 1465.1 Completed Completed

Part II: Supporting Pages

PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		CFPP (Yes/No):		Federal FFY Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost Original	Revised ¹	Funds Obligated ²	Total Actual Cost Funds Expended ²	Status of Work
AMP 204 Scattered Sites North 10100 Able CT	Foundation repair Interior/ Exterior Renovations: • Siding & Soffit Replacement/ Repair • Interior Wall Repairs • Plumbing Upgrades • Electrical Upgrades • Kitchen Cabinets & Flooring • New Fixtures • Foundation Repairs • Tuck pointing & Sealing Exterior of Building *Furnace replacement	1450 1460		51,464 73,958	51,464 73,958	61,223	2,798	Clarification of address
	Collateralization or Dept service	1460 9000		100,000 9,184	100,000 9,184	175,153 9,184	114,353 9,184	Completed
AMP 205 Scattered Sites Far Southwest	Site Work: Concrete, Side walks, Driveways * Domestic Hot Water Boiler Replacement * Boiler replacement * Stove and Refrigerator Replacement * Stove and Refrigerator Replacement * Furnace/ A/C replacement Collateralization or Dept service	1450 1460 1460 1460 1465.1 1460 9000		22,092 40,000 100,000 30,033 0 30,033 35,280 12,739	22,092 40,000 100,000 0 30,033 35,280 12,739		51,000 25,100	Changed to BLI 1465.1 Completed

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			CFPP (Yes,/No):			Federal FFY Grant: 2008	
Development Number Name/PHA-Vide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	Total Actual Cost	Status of Work
AMP 206 Scattered Sites Southwest	Exterior- Siding Replacement Roof Replacemnt Collateralization or Dept service	1460 1460 9000		15,368 27,855 3,762	15,368 27,855 3,762			3,762	Completed
AMP 207 Scattered Sites Northwest	Collateralization or Dept service	9000		20,566	20,566		20,566	20,566	Completed
AMP 208 Scattered Sites Northwest	Remove Back Door Canopies Roof Replacement Furnace Replacement 16 units Collateralization or Dept service	1460 1460 1460 9000		88,366 46,940 32,230 32,509	88,366 46,940 32,230 32,509			32,509	Completed

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			CFFP (Yes/No):			Federal FFY Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	Status of Work		
				Original	Revised ¹			Funds Obligated ²	Funds Expended ²
AMP 209 Winton Terrace	Interior Finishes Non-Routine Maintenance Gas Piping repairs/ Carbon Monide Detection Improvements Collateralization or Dept service	1460 1460 9000		140,000 36,175 247,901	140,000 36,175 247,901				
AMP 210 Findlater Gardens	Site Work: Driveways Parking Lots Sidewalks Landscaping Lighting-Exterior Parking Lot and Courtyard Total Gut rehab Interior Renovation of Management offices Central Heating Electrical Plumbing Communications Infrastructure 504 Accessibility- Management Office and resident meeting area Collateralization or Dept service	1450 1460 9000		505,700 615,000 162,890 425,712	505,700 615,000 162,890 425,712	247,901 844,800 425,712	247,901 425,712	Completed Completed	

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			CFFP (Yes/No):		Federal FFY Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work		
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 211 Beechwood/ Maple Evanston	Site Work: Parking Lot repairs/ Handicap Signs Exterior Lighting *Heat Pumps/ Water Infiltration repairs Life Safety- elevator equipment, access control, sprinklers Collateralization or Dept service	1450		15,368	15,368			
		1460		36,499	36,499			
		1460		58,650	58,650			
		9000		92,434	92,434	92,434	92,434 Completed	
AMP 212 Riverview San Marco	504 Accessibility Conversions Interior Wall repairs and Painting * Replace A/C Carpet replacement 6 Floors San Marco Paint Common Areas and Units with wall repairs Life Safety- elevator equipment, access control, sprinklers Window Replacement Collateralization or Dept service	1460		150,000	150,000			
		1460		91,524	91,524			
		1460		11,046	11,046			
		1460		36,498	36,498			
		1460		50,000	50,000			
		1460		31,450	31,450			
		1460		40,782	40,782	310,820		
		9000		40,782	40,782	40,782	40,782 Completed	
AMP 213 Park Eden/ President/ Redding	* Replace A/C Units @ The President * Stove And Refrigerator replacement * Stove And Refrigerator replacement * Stove And Refrigerator replacement Life Safety- elevator equipment, access control, sprinklers Window Replacement	1460		54,749	54,749			
		1460		68,850	0			
		1465.1		0	68,850			
		1460		66,300	66,300			
		1450				291,305	Changed to BLJ 1465.1	

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			CFFP (Yes/No):			Federal FFY Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	Status of Work	Funds	
				Original	Revised ¹			Obligated ²	Expended ²
AMP 214 Liberty St Apartments Stanley Rowe Houses	Interior Renovations Kitchen cabinets Bathroom Tub Surrounds Flooring Painting Plumbing Electrical	1460		110,500	110,500	49,900			
AMP 215 Stanley Rowe A Stanley Rowe B	* Boiler Replacement * Stove and Refrigerator replacement A/B * Stove and Refrigerator replacement A/B Life Safety- elevator equipment, access control, sprinklers	1460 1460 1465.1 1460		2,057,327 245,780 0 39,100	2,057,327 0 245,780 39,100	3,744,000			Changed to BLI 1465.1
AMP 216 Pincrest	Life Safety- elevator equipment, access control, sprinklers	1460		19,550	19,550				

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		CFFP (Yes/No):		Federal FFY Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 217 Millvale	Collateralization or Dept service	9000		506,257	506,257	506,257	506,257	Completed
AMP 218 Marquette Manor Sutterview	* Electric Heat Pump replacement * Stove & refrigerator replacement * Stove & refrigerator replacement Life Safety- elevator equipment, access control, sprinklers Interior Renovations Kitchen cabinets bathroom Tub Surrounds Fixtures Flooring Painting Plumbing All Electrical Foundation Settlements	1460 1460 1465.1 1460 1460		116,275 16,275 0 19,550 90,000	116,275 0 16,275 19,550 90,000	506,257	506,257	Completed Changed to BLI 1465.1
	Collateralization or Dept service	9000		92,480	92,480	92,480	92,480	Completed

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PHA Name: OH004 Cincinnati Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		CFPP (Yes/No):		Federal FFY Grant: 2008		Status of Work
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Agency Wide	Development See Attached RHF & CFP Plan	1499		1,020,000	1,020,000	1,020,000		
	10 % Management Fee	1410		1,162,782	1,162,782	1,162,782	1,162,782	
	Operations	1406		2,625,927	2,625,927	687,702	440,924	
	Management improvement	1408		300,000	300,000	312,648	151,023	
	Document Imaging solutions to include Imaging of forms, signature capture, and bar coding tracking of documents to improve efficiency in rent determination and lease up							
	Upgrade of phone system to improve communication with tenants and thereby improve rent collections, tenancy, and lease up	1408		349,530	349,530			
	Architect and Engineering Fees: Permits and drawings	1430		171,840	171,840	284,792	82,598	

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Part I: Summary

PHA Name: OH004 Cincinnati MHA
 Grant Type and Number: OH10P00450107 Replacement Housing Factor Grant No:
 Date of CFFP: _____

FFY of Grant: 2007
 FFY of Grant Approval: _____

Type of Grant
 Original Annual Statement
 Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: _____
 Revised annual Statement (revision no): 2
 Final Performance and Evaluation Report

Line	Summary by: Development Account	Total Estimated Cost			Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended	
1	Total non-CFF funds	0	0	0	0	
2	1406 Operations (may not exceed 20% of line 20) ³	2,231,532	2,420,464	2,420,464	687,269	
3	1408 Management Improvements	0	0	0	0	
4	1410 Administration (may not exceed 10% of line 20)	1,070,885	1,070,885	1,070,885	1,070,885	
5	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	112,207	112,207	112,207	112,207	
10	1460 Dwelling Structures	4,596,146	4,497,214	4,409,020	4,344,114	
11	1465.1 Dwelling Equipment - Non-remediable	0	0	0	0	
12	1470 Non-dwelling structures	0	0	0	0	
13	1475 Non-dwelling Equipment	0	0	0	0	
14	1485 Demolition	564,949	564,949	564,949	564,949	
15	1492 Moving to Work Demonstration	0	0	0	0	
16	1495.1 Relocation Costs	0	0	0	0	
17	1499 Development Activities ⁴	1,900,000	1,900,000	1,900,000	0	
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0	
18b	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)	1,536,699	1,536,699	1,536,699	1,536,699	
20	Amount of Annual Grant: (sum lines 2-19)	0	0	0	0	
21	Amount of line 20 Related to LBP Activities	12,012,419	12,102,419	12,014,225	8,316,124	
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0	
23	Amount of line 20 Related to Security - Soft Costs	0	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	

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 RHIF funds shall be included here

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

U.S. Department of Housing and Urban Development
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 OMB No. 2577-0226
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Part I: Summary	
PHA Name: OH001 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: OH10P00450107 Date of CFFP: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Replacement Housing Factor Grant No: _____ FFY of Grant: 2007 FFY of Grant Approval: _____
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input checked="" type="checkbox"/> Revised annual Statement (revision no): 2 <input type="checkbox"/> Final Performance and Evaluation Report
Line	Summary by Development Account
	Total Estimated Cost
	Original
	Revised ¹
	Obligated
	Total Actual Cost ¹
	Expended

Signature of Executive Director <i>Tom [Signature]</i>	Date 6-14-11
Signature of Public Housing Director	Date

¹ To be Completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 10% of CFFP Grants for operations
⁴ REIF funds shall be included here

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450107 Replacement Housing Factor Grant No:		Federal FFY Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	
Winton Terrace 4-1	Interior/ Exterior: Boiler Replacement	1460		9,990.61	99,990.61	Completed
English woods 4-2	Demolition	1485		564,949.32	564,949.32	Completed
Millvale North and South 4-5/4-6	Interior/ Exterior: Comprehensive Modernization, Renovation of Units	1460		911,181.10	939,055.44	Nearing Completion
Beechwood 4-7	Interior/ Exterior: Elevator Upgrades, Intercom Installation	1460		22,225.29	22,225.29	Completed
Findlater Gardens 4-10/4-13	Site work: Concrete Replacement Interior/ Exterior: Comprehensive Modernization, Renovation of Units	1450 1460		23,438.95 2,378,144.48	23,438.95 2,378,144.48	Completed Completed
Sutterview 4-14	Interior/ Exterior: Roof repair/replace, Tub Glazing	1460		54,481.45	54,481.45	Completed

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Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10F00450107 Replacement Housing Factor Grant No:		CFPP (Yes/No):		Federal FFY Grant:		2007	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
Scattered Sites 4-16	Site work: Remove old cloths lines, Concrete replacement Interior/ Exterior: Tub regalzing	1450		57,355.55	57,355.55	57,355.55	57,355.55	Completed	Completed
Stanley Rowe 4-17	Site work: Lanscaping, Tree removal Interior/ Exterior: Elevator upgrades, Replacement of expansion joints	1460		6,354.03	6,354.03	6,354.03	6,354.03	Completed	Completed
Maple Tower 4-19	Interior/ Exterior: Replace exterior light fixtures	1460		3,435.00	3,435.00	3,435.00	3,435.00	Completed	Completed
Redding 4-20	Interior/ Exterior: Elevator upgrades	1460		54,182.68	54,182.68	54,182.68	54,182.68	Completed	Completed
President 4-21	Interior/ Exterior: Hallway / Stairwell painting	1460		22,242.05	22,242.05	22,242.05	22,242.05	Completed	Completed
Park Eden 4-22	Elevator upgrade, Security systems upgrades	1460		177,442.36	42,442.36	42,442.36	42,442.36	Completed	Completed
Scattered Sites 4-23	Interior/ Exterior: Wall repairs and painting	1460		15,232.87	15,232.87	15,232.87	15,232.87	Completed	Completed
				32,732.01	32,732.01	32,732.01	22,189.35	Nearing Completion	
				30,239.77	30,239.77	30,239.77	30,239.77	Completed	Completed

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Part II: Supporting Pages									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450107			CFPP (Yes/No):			Federal FFY Grant: 2007	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
Riverview 4-25	Interior/ Exterior: Security upgrades, door locks and cylinders	1460		39,104.31	39,104.31	39,104.31	39,104.31	Completed	
Pinecrest 4-26	Interior/ Exterior: Roof repair/ replace	1460		18,756.98	18,756.98	18,756.98	18,756.98	Completed	
Scattered Sites 4-30	Interior/ Exterior: Roof replacement, Plumbing repairs and upgrades	1460		18,329.06	18,329.06	18,329.06	18,329.06	Completed	
San Marco 4-37	Interior/ Exterior: Remove carpet and replace with VCT	1460		18,319.79	18,319.79	18,319.79	18,319.79	Completed	
Scattered Sites 4-38	Interior/ Exterior: Comprehensive	1460		19,676.66	19,676.66	19,676.66	19,676.66	Completed	

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450107 Replacement Housing Factor Grant No:		CFFP (Yes/No):		Federal FFY Grant: 2007		
Development Number Name/ PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Scattered Sites 4-39	Site work: Landscaping, Tree removal, Install new fencing Interior/ Exterior: Interior and exterior painting, Window replacement, Gutters repair/ replace, Tub reglazing	1450		12,460.00	12,460.00	12,460.00	12,460.00	Completed
Scattered Sites 4-40	Interior/ Exterior: Roof repair and replacement, Gutter replacement	1460		9,964.16	9,964.16	9,964.16	9,964.16	Completed
Evanston 4-41	Interior/ Exterior: Roof repair and replacement, Gutter replacement	1460		43,622.21	43,622.21	43,622.21	43,622.21	Completed
Scattered Sites 4-43 1714 Race,	Interior/ Exterior: DHV: replacement, Roof repairs, Gutter replacement	1460		203,744.55	35,744.55	33,744.55	33,744.55	Completed
Scattered Sites 4-44	Interior/ Exterior: Interior and exterior painting, Roof replacement, New Entry doors, Furnace replacement	1460		37,138.08	37,138.08	37,138.08	37,138.08	Completed Addresses moved from FY2009 & FY 2010
Scattered Sites 4-44	Interior/ Exterior: Roof replacement, Fixture upgrades	1460		19,393.01	19,393.01	19,393.01	19,393.01	Completed

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450107		CFPP (Yes/No):		Federal FFY Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Scattered Sites 4-45	Interior/ Exterior: Roof repair and replacement, Gutter replacement	1460		10,373.52	10,373.52	10,373.52	10,373.52	Completed
Scattered Sites 4-46	Interior/ Exterior: Roof repair and replacement, Gutter replacement	1460		8,831.39	8,831.39	8,831.39	8,831.39	Completed
Scattered Sites 4-51	Site work: Lanscaping, Tree removal, Install new fencing	1450		7,825.97	7,825.97	7,825.97	7,825.97	Completed
1330 Beacon, 586 Claymore Terrace 1-5	Interior/ Exterior: Plumbing fixture upgrades, Roof replacement, Electrical upgrades, Gutter replacement	1460		22,846.85	22,846.85	22,846.85	22,846.85	Completed
Scattered Sites 4-57	Site work: Side walk replacement, Lanscaping, Tree removal	1450		3,987.00	3,987.00	3,987.00	3,987.00	Completed
Scattered Sites 4-58	Site work: Lanscaping, Tree removal Interior/ Exterior: Roof replacement, Gutter replacement, Electrical upgrades, Plumbing fixture replacement	1450 1460		3,705.00 11,992.81	3,705.00 11,992.81	3,705.00 11,992.81	3,705.00 11,992.81	Completed Completed

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10F00450107 Replacement Housing Factor Grant No:		Federal FFY Grant: 2007				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Agency Wide	Operations	1406		1,316,707.65	2,420,464.46	2,420,464.46	687,269.49	
	Management Improvements: Telephone Upgrades	1406		914,824.59	0.00	0.00	0.00	Moved figures to one line item (operations)
	Administration	1410		1,070,885.00	1,070,885.00	1,070,885.00	1,070,885.00	Completed
	Hazardous Material Abatement	1460		40,491.00	40,491.00	40,491.00	40,491.00	Completed
	Life Safety Systems	1460		359,112.52	359,112.52	359,112.52	359,112.52	Completed
	Dept Service	9000		1,536,698.88	1,536,698.88	1,536,698.88	1,536,698.88	Completed

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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: OH10P00450107			Federal FFY Grant: 2007		
Development Number Name/PHA-Wide Activities		General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost CFFP (Yes/No):		
					Original	Revised ¹	
					Total Actual Cost		
					Funds Obligated ²	Funds Expended ²	
					Status of Work		
Agency Wide Development			1499		1,900,000.00	1,900,000.00	
Laurel Homes		Site Improvements	1499.1450				Completed Extra-Ordinary Expenses HUD Approved
15 Unit PH Acquisition		Operations	1499.1406				Development Proposal Board Approved Submit to HUD Aug 2010
3 Unit PH demo and New Construction		Demolition	1499.1485		0.00	0.00	Demo Application to SAC Dec 2010
55 Unit New Construction		Site Improvements			0.00	0.00	In Progress of Development Planning

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Part I: Summary

PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	Replacement Housing Factor Grant No: OHH10R00450106	FFY of Grant: FY2006
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		<input type="checkbox"/> Revised annual Statement revision no: <input type="checkbox"/> Final Performance and Evaluation Report	

Line	Type of Grant	Summary by Development Account	Total Estimated Cost			Total Actual Cost ¹	
			Original	Revised ²	Obligated	Expended	
1	<input type="checkbox"/> Original Annual Statement	Total non-CFP funds	0	0	0	0	0
2	<input type="checkbox"/> Reserve for Disasters/Emergencies	1406 Operations (may not exceed 20% of line 20) ³	0	0	0	0	0
3	<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	1408 Management Improvements	0	0	0	0	0
4		1410 Administration (may not exceed 10% of line 20)	0	0	0	0	0
5		1411 Audit	0	0	0	0	0
6		1415 Liquidated Damages	0	0	0	0	0
7		1430 Fees and Costs	0	0	0	0	0
8		1440 Site Acquisition	0	0	0	0	0
9		1450 Site Improvement	0	0	0	0	0
10		1460 Dwelling Structures	0	0	0	0	0
11		1465.1 Dwelling Equipment - Nonexpendable	0	0	0	0	0
12		1470 Non-dwelling structures	0	0	0	0	0
13		1475 Non-dwelling Equipment	0	0	0	0	0
14		1485 Demolition	0	0	0	0	0
15		1492 Moving to Work Demonstration	0	0	0	0	0
16		1495.1 Relocation Costs	0	0	0	0	0
17		1499 Development Activities ⁴	1,042,944	1,042,944	1,042,944	1,042,944	510,903
18a		1501 Collateralization or Debt Service paid by the PHA	0	0	0	0	0
18b		9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0	0
19		1502 Contingency (may not exceed 8% of line 20)	0	0	0	0	0
20		Amount of Annual Grant: (sum lines 2-19)	1,042,944	1,042,944	1,042,944	1,042,944	510,903
21		Amount of line 20 Related to LBP Activities	0	0	0	0	0
22		Amount of line 20 Related to Section 504 Activities	0	0	0	0	0
23		Amount of line 20 Related to Security - Soft Costs	0	0	0	0	0
24		Amount of line 20 Related to Security - Hard Costs	0	0	0	0	0
25		Amount of line 20 Related to Energy Conservation Measures	0	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

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Part I: Summary		FFY of Grant: FY2006	
PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	Replacement Housing Factor Grant No: OH10R004S0106	FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	<input type="checkbox"/> Reserve for Disaster/Emergencies	<input checked="" type="checkbox"/> Revised annual Statement revision no: 1 <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Revised ²
		Obligated	Expended

Signature of Executive Director: <i>Ted Gye</i>	Date: 6-14-11
Signature of Public Housing Director	Date

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

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: OH10P00450106		CFFP (Yes/No):		Federal FFY Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
OH004-063 Scattered Sites	16 unit scattered site acquisition	1499 1410		58,000.00	58,000.00	58,000.00	0.00	
		1499 1430		250,000.00	226,000.00	226,000.00	51,071.61	
		1499 1450		350,000.00	350,000.00	350,000.00	51,060.00	
		1499 1460		384,944.00	408,944.00	408,944.00	408,771.48	
OH004-063 Scattered Sites	Total project OH004-063			1,042,944.00	1,042,944.00	1,042,944.00	510,903.09	

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Part I: Summary		Grant Type and Number			
PHA Name: OH004 Cincinnati MHA		Capital Fund Program Grant No: OH10R00450107			
Date of CFFP: _____		FFY of Grant: FY2007			
Replacement Housing Factor Grant No: _____		FFY of Grant Approval: _____			
Type of Grant		Revised annual Statement (revision no:)			
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report			
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011					
Summary by: Development Account		Total Estimated Cost			
Line		Original	Revised ²	Obligated	Expended
1	Total non-CFP funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 20) ¹	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 20)	0	0	0	0
5	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	0	0	0	0
12	1470 Non-dwelling structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ¹	1,714,873	1,714,873	0	0
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18b	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 lines 2-19)	1,714,873	1,714,873	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	0	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

¹ To be Completed for the Performance and Evaluation Report.

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Part I: Summary		Grant Type and Number		FFY of Grant	
PHA Name: OH004 Cincinnati MHA		Capital Fund Program Grant No: Date of CFFP:		FY2007	
Type of Grant		Replacement Housing Factor Grant No: OH10S00450107		FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised annual Statement (revision no): <input type="checkbox"/> Final Performance and Evaluation Report			
Summary by Development Account		Total Estimated Cost		Total Actual Cost ¹	
Line	Original	Revised ²	Obligated	Expended	

Signature of Executive Director <i>Tom Yu</i>	Date 6-14-11
Signature of Public Housing Director	Date

- 1 To be completed for the Performance and Evaluation Report.
- 2 To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
- 3 PHAs with under 200 units in management may use 100% of CFF Grants for operations
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PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: OH10R000450107		CFPP (Yes/No):		Federal FFY Grant:		2007	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work			
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
PHA-Wide (Development Number TBD)	Development Funds								
Not yet identified	3 Units demo/new construction	1499		199,270.00	102,391.00	0	0		
Not yet identified	100 Unit Mixed Finance	1499		1,515,603.00	0.00	0	0		
OH004-065 Scattered Sites	16 unit scattered site acquisition	1499 1460		0.00	1,612,482.00	0	0		FY2009 & FY2010 annual plan
	Total project OH004-065			0.00	1,612,482.00	0	0		
	Total			1,714,873.00	1,714,873.00	0	0		
	Note: PHA is accumulating RHF funds for Development None of these developments currently have an approved development proposal, amounts subject to change								

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PHA Name: OH004 Cincinnati MHA		Capital Fund Program Grant No: Date of CFFP: _____		FY2008	
Type of Grant		Replacement Housing Factor Grant No: OH10R00450108		FFY of Grant Approval: _____	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		<input type="checkbox"/> Revised annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report			
Summary by Development Account		Total Estimated Cost		Total Actual Cost ¹	
Line	Description	Original	Revised ²	Obligated	Expended
1	Total non-CFFP funds	0	0	0	0
2	1406 Operation. (may not exceed 20% of line 20) ³	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 20)	0	0	0	0
5	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	0	0	0	0
12	1470 Non-dwelling structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ⁴	1,438,273	1,438,273	0	0
18a	1501 Collateralization of Debt-Service paid by the PHA	0	0	0	0
18b	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 lines 2-19)	1,438,273	1,438,273	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	0	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

¹ To be Completed for the Performance and Evaluation Report.

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

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⁴ RHF funds shall be included here

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Part I: Summary	
PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	Replacement Housing Factor Grant No: OH10R00450108 FFY of Grant: FY2008 FFY of Grant Approval: _____
<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	<input type="checkbox"/> Revised annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report
Line Summary by Development Account	Total Estimated Cost
	Original
	Revised ²
	Obligated
	Total Actual Cost ¹
	Expended

Signature of Executive Director <i>John P. W.</i>	Signature of Public Housing Director
Date 6-14-11	Date

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

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant N OH10R00450108		CFFP (Yes/No):		Federal FFY Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Not yet identified	Building: 100 Unit mixed finance construction Development Funds	1499		1,438,273.00	0.00	0.00	0.00	
OH004-065 Scattered Sites	16 Unit Scattered Site Acquisition	1499 1430		0.00	50,000.00	0.00	0.00	FY2009 and FY2010 Annual plan
Not yet identified	Total project OH004-065			0.00	50,000.00	0.00	0.00	
	55 Unit New: Construction	1499		0.00	1,388,273.00	0.00	0.00	Preliminary Planning Stages (FY2009 and FY2010 Annual plan)
	Total			1,438,273.00	1,488,273.00	0.00	0.00	
	Note: PHA is accumulating RHF funds for Development None of these developments currently have an approved development proposal, amounts subject to change							

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

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

Part I: Summary

PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____	Replacement Housing Factor Grant No: OH10R00045010 ²	FFY of Grant: FY2009
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		<input type="checkbox"/> Revised annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report	

Line	Summary by Development Account	Total Estimated Cost			Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended	
1	Total non-CFF funds	0	0	0	0	
2	1406 Operations (may not exceed 20% of line 20) ³	0	0	0	0	
3	1408 Management Improvements	0	0	0	0	
4	1410 Administration (may not exceed 10% of line 20)	0	0	0	0	
5	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	0	0	0	0	
12	1470 Non-dwelling structures	0	0	0	0	
13	1475 Non-dwelling Equipment	0	0	0	0	
14	1485 Demolition	0	0	0	0	
15	1492 Moving to Work Demonstration	0	0	0	0	
16	1495.1 Relocation Costs	0	0	0	0	
17	1499 Development Activities ⁴	810,017	0	0	0	
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0	
18b	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 lines 2-19)	810,017	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	0	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	

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

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: FY2009	
PHA Name: OH1004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	Replacement Housing Factor Grant No: OH10R0G450109	FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost
		Original	Revised ²
		Obligated	Expended

Signature of Executive Director <i>Ted Ryan</i>	Signature of Public Housing Director
Date 6-14-11	Date

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

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant OH10R00450109			Federal FFY Grant: 2009	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	CFPP (Yes/No):		Status of Work
				Original	Revised ¹	
		Total Estimated Cost		Funds Obligated ²	Funds Expended ²	
Not yet identified	Building: 100 Unit mixed finance new construction	1499		810,017.00	0.00	
	Total			810,017.00	0.00	
Note: PHA is accumulating RHF funds for Development None of these developments currently have an approved development proposal, amounts subject to change						

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

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

Part I: Summary

PHA Name: OH004 Cincinnati MHA
 Grant Type and Number: Capital Fund Program Grant No: OH00R00/50110
 Date of CFP: _____
 Replacement Housing Factor Grant No: _____
 FFY of Grant: FY2010
 FFY of Grant Approval: _____

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	Reserve for Disasters/Emergencies	Total Estimated Cost		Total 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 20) ³		0	0	0	0
3	1408 Management Improvements		0	0	0	0
4	1410 Administration (may not exceed 10% of line 20)		0	0	0	0
5	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		0	0	0	0
12	1470 Non-dwelling structures		0	0	0	0
13	1475 Non-dwelling Equipment		0	0	0	0
14	1485 Demolition		0	0	0	0
15	1492 Moving to Work Demonstration		0	0	0	0
16	1495.1 Relocation Costs		0	0	0	0
17	1499 Development Activities ⁴		1,521,590	0	0	0
18a	1501 Collateralization or Debt Service paid by the PHA		0	0	0	0
18b			0	0	0	0
19	9000 Collateralization or Debt Service paid Via System of Direct Payment		0	0	0	0
20	1502 Contingency (may not exceed 8% of line 20)		0	0	0	0
21	Amount of Annual Grant: (sum lines 2-19)		1,521,590	0	0	0
22	Amount of line 20 Related to LBP Activities		0	0	0	0
23	Amount of line 20 Related to Section 504 Activities		0	0	0	0
24	Amount of line 20 Related to Security - Soft Costs		0	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

¹ To be Completed for the Performance and Evaluation Report

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

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

⁴ RHF funds shall be included here

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

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

Part I: Summary	
PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:	Replacement Housing Factor Grant No: OH10R03450110 FFY of Grant: FY2010 FFY of Grant Approval:
Reserve for Disasters/Emergencies 3/31/2011	<input type="checkbox"/> Revised annual Statement (revision nr: <input type="checkbox"/> Final Performance and Evaluation Report
Summary by Development Account	Total Estimated Cost
Line	Original
	Revised ²
	Obligated
	Expended
	Total Actual Cost ¹

Signature of Executive Director <i>[Signature]</i>	Signature of Public Housing Director
Date 6-14-11	Date

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

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: OH10P00450110		CFEP (Yes/No):		Federal FFY Grant:		2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	Status of Work
Agency Wide	Development Activities Note: PHA is accumulating RHF funds for Development None of these developments currently have an approved development proposal, amounts subject to change	1499			1,521,590.00				

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

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

Part I: Summary

PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	Replacement Housing Factor Grant No: OH10R00450206	FFY of Grant: FY2006
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		<input type="checkbox"/> Revised annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report	

Line	Summary by Development Account	Total Estimated Cost			Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended	
1	Total non-CFF funds	0	0	0	0	
2	1406 Operations (may not exceed 20% of line 20) ³	0	0	0	0	
3	1408 Management Improvements	0	0	0	0	
4	1410 Administration (may not exceed 10% of line 20)	0	0	0	0	
5	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	0	0	0	0	
12	1470 Non-dwelling structures	0	0	0	0	
13	1475 Non-dwelling Equipment	0	0	0	0	
14	1485 Demolition	0	0	0	0	
15	1492 Moving to Work Demonstration	0	0	0	0	
16	1495.1 Relocation Costs	0	0	0	0	
17	1499 Development Activities ⁴	2,292,291	2,292,291	1,864,056	27,487	
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0	
18b	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 lines 2-19)	2,292,291	2,292,291	1,864,056	27,487	
21	Amount of line 20 Related to LBP Activities	0	0	0	0	
22	Amount of line 20 Related to Section 501 Activities	0	0	0	0	
23	Amount of line 20 Related to Security - Soft Costs	0	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	

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

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
 CMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary

PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	Replacement Housing Factor Grant No: OH10R00450206	FFY of Grant: FY2006 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised annual Statement (revision no: <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account	Original	Revised ²	Total Actual Cost ¹
Line		Obligated	Expended

Signature of Executive Director <i>Tom Ryan</i>	Date 6-14-11	Signature of Public Housing Director	Date
--	-----------------	--------------------------------------	------

- 1 To be Completed for the Performance and Evaluation Report.
- 2 To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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- 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							
PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant N OH10R00450206	Federal FFY Grant:		2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²
OH004-063 Scattered Sites	Dwelling Units	1499 1460		1,920,066.00	1,744,056.00	1,744,056.00	40.80
	Relocation	1499 1495		120,000.00	120,000.00	120,000.00	27,446.44
Not yet identified	5 units demo/new construction	1499		252,225.00	0.00	0.00	0.00
OH004-065 Scattered Sites	Acquisition 16 units	1499 1410		0.00	48,000.00	0.00	0.00
		1499 1450		0.00	150,000.00	0.00	0.00
		1499 1460		0.00	24,225.00	0.00	0.00
		1499 1495		0.00	30,000.00	0.00	0.00
	Total project OH004-065			0.00	252,225.00	0.00	0.00

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant NOH10R00450206			Federal FFY Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Not yet identified	100 unit mixed finance development Note: CMHA is accumulating RHF funds for development None of these development currently do not have an approved development proposal, amounts subject to change Total	1499		0.00	176,010.00	0.00	0.00	FY2010 Annual Plan
				2,292,291.00	2,292,291.00	1,864,056.00	27,487.24	

Part I: Summary		Grant Type and Number		Replacement Housing Factor Grant No:		FFY of Grant:	
PHA Name: OH004 Cincinnati MHA		Capital Fund Program Grant No: Date of CFFP:		OH10R00450207		FY2007	
Type of Grant		Reserve for Disasters/Emergencies		Revised annual Statement (revision no:)		FFY of Grant Approval:	
<input type="checkbox"/> Original: Annual Statement		<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Revised ²	Obligated	Total Actual Cost ¹	Expended	
1	Total non-CFF funds	0	0	0	0	0	
2	1406 Operations (may not exceed 20% of line 20) ¹	0	0	0	0	0	
3	1408 Management Improvements	0	0	0	0	0	
4	1410 Administration (may not exceed 10% of line 20)	0	0	0	0	0	
5	1411 Audit	0	0	0	0	0	
6	1415 Liquidated Damages	0	0	0	0	0	
7	1430 Fees and Costs	0	0	0	0	0	
8	1440 Site Acquisition	0	0	0	0	0	
9	1450 Site Improvement	0	0	0	0	0	
10	1460 Dwelling Structures	0	0	0	0	0	
11	1465.1 Dwelling Equipment - Nonexpendable	0	0	0	0	0	
12	1470 Non-dwelling structures	0	0	0	0	0	
13	1475 Non-dwelling Equipment	0	0	0	0	0	
14	1485 Demolition	0	0	0	0	0	
15	1492 Moving to Work Demonstration	0	0	0	0	0	
16	1495.1 Relocation Costs	0	0	0	0	0	
17	1499 Development Activities ¹	1,475,551	1,475,551	0	0	0	
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0	0	
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0	0	
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0	0	
20	Amount of Annual Grant (sum lines 2-19)	1,475,551	1,475,551	0	0	0	
21	Amount of line 20 Related to LBP Activities	0	0	0	0	0	
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0	0	
23	Amount of line 20 Related to Security - Soft Costs	0	0	0	0	0	
24	Amount of line 20 Related to Security - Hard Costs	0	0	0	0	0	
25	Amount of line 20 Related to Energy Conservation Measures	0	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.

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⁴ RHF funds shall be included here

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

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

Part I: Summary	
PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	Replacement Housing Factor Grant No: OH10R00450207
<input type="checkbox"/> Reserve for Disasters/Emergencies	FY of Grant: FY2007
<input type="checkbox"/> Revised Annual Statement (revision no:)	FY of Grant Approval:
<input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account	
Line	Total Estimated Cost
	Original
	Revised ²
	Obligated
	Expended
	Total Actual Cost ⁴

Signature of Executive Director <i>Tex Yu</i>	Signature of Public Housing Director
Date 6-14-11	Date

- 1 To be completed for the Performance and Evaluation Report.
- 2 To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
- 3 PHAs with under 250 units in management may use 100% of CFF Grant for operations
- 4 RGF 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									
PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: OH10R00450207			CFPP (Yes/No):			Federal FFY Grant: 2007	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
Not yet identified	100 Unit mixed finance development	1499		1,475,551.00	0.00	0.00	0.00		
Not yet identified	55 unit mixed finance development	1499		0.00	764,522.00	0.00	0.00		
OH004-065 Scattered Site	16 unit scattered site acquisition with rehab	1499 1450		0.00	150,000.00	0.00	0.00	FY2009 and FY2010 Annual Plan	
		1499 1460			561,029.00	0.00	0.00	FY2009 and FY2010 Annual Plan	
	Total Project OH004-065 Note: CMHA is accumulating RHF funds for development			0.00	711,029.00	0.00	0.00		
	None of these development currently have an approved development proposal, amounts subject to change								
	Total			1,475,551.00	2,186,580.00	0.00	0.00		

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

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

Part I: Summary		Grant Type and Number		FFY of Grant:	
PHA Name: OH004 Cincinnati MHA		Capital Fund Program Grant No: Date of CFFP:		FY2008	
Type of Grant		Replacement Housing Factor Grant No: OH10R00450208		FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		<input type="checkbox"/> Revised annual Statement (revision no): <input type="checkbox"/> Final Performance and Evaluation Report			
Summary by Development Account		Total Estimated Cost		Total Actual Cost ¹	
Line		Original	Revised ²	Obligated	Expended
1	Total non-CFF funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 20) ³	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 20)	0	0	0	0
5	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	0	0	0	0
12	1470 Non-dwelling structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ⁴	429,985	429,985	0	0
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18b	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 lines 2-19)	429,985	429,985	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	0	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

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

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

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

Part I: Summary	
PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____
Replacement Housing Factor Grant No: OH10R00450208	
FFY of Grant: FY2008	FFY of Grant Approval: _____
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: 3/31/2011	
<input type="checkbox"/> Revised annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account
	Total Estimated Cost
	Original
	Revised ²
	Obligated
	Expended
	Total Actual Cost ¹

Signature of Executive Director <i>Tea M</i>	Date 6-14-11
Signature of Public Housing Director	
Date	

- 1 To be completed for the Performance and Evaluation Report
- 2 To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
- 3 PHAs with under 250 units in management may use 100% of CFF 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
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 Expires 4/30/2011

Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: OH10R00450208			Federal FFY Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	CFFP (Yes/No):		Total Actual Cost	Status of Work
				Original	Revised ¹		
Not yet identified	55 unit PH new construction development	1499		429,985.00	429,985.00	0.00	
	Note: CMHA is accumulating RHF funds for development None of these developments currently have an approved development proposal, amounts subject to change						
	Total			429,985.00	429,985.00	0.00	

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Part I: Summary		Replacement Housing Factor Grant No: OH10R00450209		FFY of Grant: FY2009	
PHA Name: OH004 Cincinnati MIHA		Grant Type and Number Capital Fund Program Grant No: _____		FFY of Grant Approval: _____	
Date of CFFP: _____		Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies		Revised annual Statement (revision no: _____)	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		Final Performance and Evaluation Report			
Summary by Development Account		Total Estimated Cost		Total Actual Cost ¹	
Line	Original	Revised ²	Obligated	Expended	
1	Total non-CFFP funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 20) ³	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 20)	0	0	0	0
5	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	0	0	0	0
12	1470 Non-dwelling structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ⁴	0	0	0	0
18a	1501 Collateralization or Debt Service paid by the PHA	2,174,652	0	0	0
18b	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 lines 2-19)	0	0	0	0
21	Amount of line 20 Related to LBP Activities	2,174,652	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	0	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

¹ To be Completed for the Performance and Evaluation Report.

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

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⁴ RHF funds shall be included here

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Part I: Summary	
PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	Replacement Housing Factor Grant No: OH10R00450209 FFY of Grant: FY2009 FFY of Grant Approval: _____
<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Summary by Development Account	<input type="checkbox"/> Revised annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report
Line	Total Estimated Cost
	Original
	Revised ²
	Total Actual Cost ¹
	Obligated
	Expended

Signature of Executive Director <i>Tom Myr</i>	Signature of Public Housing Director
Date 6-14-11	Date

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Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: OH10P00450209		Federal FFY Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised ¹	
				Funds Obligated ²	Funds Expended ²	
Not yet identified	Development Activities Note: CMHA is accumulating RHF funds for development None of these development currently have an approved development proposal, amounts subject to change	1499		2,174,652.00		

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Part I: Summary

PHA Name: OH004 Cincinnati MHIA
 Grant Type and Number: OH10R00450210
 Capital Fund Program Grant No: OH10R00450210
 Date of CFFP: _____
 Replacement Housing Factor Grant No: _____
 FFY of Grant: FY2010
 FFY of Grant Approval: _____

Line	Type of Grant	Summary by Development Account	Total Estimated Cost			Total Actual Cost ¹
			Original	Revised ²	Obligated	
1	<input type="checkbox"/> Original Annual Statement	Reserve for Disasters/Emergencies	0	0	0	0
2	<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		0	0	0	0
3			0	0	0	0
4			0	0	0	0
5			0	0	0	0
6			0	0	0	0
7			0	0	0	0
8			0	0	0	0
9			0	0	0	0
10			0	0	0	0
11			0	0	0	0
12			0	0	0	0
13			0	0	0	0
14			0	0	0	0
15			0	0	0	0
16			0	0	0	0
17			2,789,294	0	0	0
18a			0	0	0	0
18b			0	0	0	0
19			0	0	0	0
20			2,789,294	0	0	0
21			0	0	0	0
22			0	0	0	0
23			0	0	0	0
24			0	0	0	0
25			0	0	0	0

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Part I: Summary	
PHA Name: OH004 Cincinnati MHA	Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	Replacement Housing Factor Grant No: OH10R00456210 FFY of Grant: FY2010 FFY of Grant Approval: _____
<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011	<input type="checkbox"/> Revised annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report
Summary by Development Account	Total Estimated Cost
Original	Revised ²
	Total Actual Cost ¹
	Obligated
	Expended

Signature of Executive Director <i>[Handwritten Signature]</i>	Signature of Public Housing Director
Date 6-14-11	Date

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Part II: Supporting Pages

PHA Name: OH004 Cincinnati MHA		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		CFFP (Yes/No): OH10P00450110		Federal FFY Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Agency Wide	Development Activities Note: CMHA is accumulating RHF funds for development None of these development currently have an approved development proposal, amounts subject to change	1499		2,789,294.00				