

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: The Housing Authority of the City of Newport, Rhode Island PHA Code: RI005, Newport PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 04/01/2011					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 711 Number of HCV units: 489					
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	
	PHA 1:				PH	HCV
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The Mission of the Housing Authority of the City of Newport, Rhode Island is to provide decent, safe, sanitary, affordable housing, and to promote homeownership, economic development, and economic self-sufficiency for public housing residents and a living environment free from discrimination and crime.					

5.2	<p>Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p>Below is a listing of some goals and objectives important for the next year:</p> <p><u>Development and Redevelopment:</u></p> <ul style="list-style-type: none"> • Segment #1 – Renovations • Segment #2 – Mid-rise building for one bedroom elderly apts. & services (may include selective demolition to complete 202 site). • Segment #3 – possibly replace a few buildings in areas that might benefit the renovation work with new units which will replace certain buildings identified in the Master Plan. The intent is to consider completing individual neighborhoods. • 100% utilization of vouchers. • Submit HUD 811 application and a HUD 202 application in 2010-2011 NOFA • Work with Newport County Affordable Housing Development Corporation in seeking funds for affordable housing and services Benefiting persons within our communities. • Lease to purchase homeownership program and other homeownership opportunities using reserve funds and other available funds. • Develop affordable housing units on vacant land owned by HACN. • Submit a dispo application amendment to HUD for Newport Heights maintenance garage. • Submit & seek approval of HUD Choice Neighborhood grant for Park Holm redevelopment work. • Work with RI Dept. of Administration, RIDE and East Bay Met to build an addition on the Florence Gray Center parcel. <p><u>Continue with the strategies and plans for the improvements to Park Holm:</u></p> <ul style="list-style-type: none"> • Renovations • Possible replace a few buildings in areas that might benefit the renovation work with new units which replace certain building Identified in the Master Plan. <p><u>Operations Section 8:</u></p> <ul style="list-style-type: none"> • Continue improving our procurement processes using N.A.H.R.O.'s e-procurement for technical assistance. • Seek an extension of the designation plan for Donovan Manor. • Continue to assess and maximize use of HACN non-residential space. • Conduct annual flat rent study and implement . • Utilize operational resources to begin making property improvements. • Explore and reinstate a security deposit process if feasible. • Continue to evaluate its ACOP & Section 8 Administrative Plan • Continue to work with the Newport Residents Council and residents regarding issues such as crime prevention, healthy housing, parking policy, resident services and other activity as appropriate. • Continue to review and make changes to the current lease. • Continue to develop and implement an Operations Plan authority-wide. • Continue to update the charges for maintenance repairs and service. <p><u>Energy Efficiency:</u></p> <ul style="list-style-type: none"> • Develop a system for monitoring utility consumption in common areas and apartments. • Develop and implement an energy and water conservation strategy. • Evaluate current excess utility charges to households. • Participate in the PHARI energy consortia. • Conduct a feasibility analysis for renewable energy production on HACN land. <p><u>Community Services & Self Sufficiency (CSS) and Resident Services (RS) Programs:</u></p> <ul style="list-style-type: none"> • Hire a FSS Coordinator for the public housing Section 8, program and lease to purchase program. • Conduct a needs assessment of services for the residents of Donovan Manor. • Begin stages for a "CSS" type resident services program in Park Holm. • Continue to survey residents for a needs assessment for services in Park Holm including the new program "Helping Students Succeed" with expansion potential to Chapel Terrace. • Develop a plan for an elderly fitness center in collaboration with Visiting Nurse Services at Donovan Manor or other Suitable uses of that space. • Continue to offer a summer employment program hiring a number of youth residing in our developments. <p><u>Staff Development:</u></p> <ul style="list-style-type: none"> • Continue with staff development & training. • Continue with the Risk Management Committee and their proactive work to reduce injury and claims.
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6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <ul style="list-style-type: none"> ▪ Element #1- Eligibility, Selection & admissions Policies, Including Deconcentration & Wait List Procedures ▪ Element #3 - Rent Determination ▪ Element #6 – Designated Housing For Elderly & Disabled Families ▪ Element #7 – Community Service & Self-Sufficiency ▪ Element #10 – Civil Rights Certification <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <ul style="list-style-type: none"> ▪ Main Administrative Office of the PHA ▪ PHA Development Management Offices ▪ PHA Local Offices ▪ Main Administrative Office of the Local Government ▪ Newport Resident Council Administration Office

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.

A. DEVELOPMENT

(1) PARK HOLM REDEVELOPMENT PROGRAM, INCLUDING A HUD 202 PROGRAM:

The Housing Authority of Newport intends to continue redeveloping the 262 unit Park Holm public housing development (RI005000001) in accordance with the 2009 Park Holm Master Plan. The Master Plan includes 3 segments: Segment 1 is a Renovation Project; Segment 2 is a HUD 202 mid-rise building that may also seek VA funds; and Segment 3 is a Demolition and New Construction component. Segment 1 is underway and has multiple phases. Phase 1 (30 renovated units) which was funded with AARA Economic Stimulus Funds and Public Housing Capital Funds was completed in 2010. Phase 2A (12 renovated units) which was funded using Public Housing Capital Funds was also completed in 2010. Phase 2B (9 renovated units) is presently underway, utilizing Public Housing Capital Funds, and is scheduled for completion in early 2011. HACN will apply for additional funding as it becomes available to complete the redevelopment project, including an estimated \$30 million under the HUD Choice Neighborhoods Initiative; HUD 202 funds, and any possible VA or other funds that are able to assist with this effort.

The timetable for submission of the Park Holm application is December 2010 for the Choice Neighborhoods Grant Initiative. The timetable for the HUD 202 funds; the VA funds; and any other funds for the Park Holm Redevelopment Program is unknown at this time because HUD has not posted a NOFA for these funds to date. Upon said 2010-2011 NOFA posting, HACN will seek any relevant available funds.

(2) LEASE-TO-PURCHASE HOMEOWNERSHIP PROGRAM:

The Housing Authority also intends to build between 3-5 lease-to-purchase units on the old Tonomy Hill HOPE VI site (RI005000001P) with \$1.7 million in HUD Replacement Housing Funds, subject to approval of the Authority's development proposal.

The Replacement Housing Funds proposal was submitted on November 1, 2010.

(3) HUD 811 PROGRAM:

The Housing Authority also intends to apply for any funds that become available under the HUD 811 Program to build 8-10 units of affordable, supportive housing for persons with disabilities with services provided by the James L. Maher Center on vacant land previously associated with the old Tonomy Hill HOPE VI site, which is now part of the Park Holm (RI005000001) footprint.

The timetable for submission of the HUD 811 Proposal is unknown at this time, but is subject to HUD's 2010-2011 posting of the 811 NOFA.

B. DEMOLITION AND DISPOSITION

The Housing Authority of Newport intends to have demolition and disposition activity in 2011. Such activity shall be:

• DEMOLITION

(1) PARK HOLM

The Authority began renovations to Park Holm (RI005000001) buildings with a construction contract for 51 units. Additional units may be added as funds become available. Currently, the Authority is using ARRA and CAPITAL funds for this work. Some buildings in Park Holm have been identified for demolition as part of the Master Plan completed by the architects and approved by the Board of Commissioners. Residents were involved in the development of the Master Plan.

√ Property Name: Park Holm -AMP 1-RI005000001

Activity:

Possible demolition of 98 or more units.

Six or more of these units would be to allow for resident parking and other site improvements as deemed necessary to complete the Park Holm Master Plan (PHMP); including Segment 1: Renovations; Segment 2: New Construction of a HUD 202 (if funded); and Segment 3: New Construction of ACC Units

Status:

Planned Application

Potential Submission:

2010-2011 subject to a HUD 202 NOFA posting and Choice Neighborhoods Grant funding

Number of Units:

Up to 98 units or more

Timeline:

2010-2011 subject to a HUD 202 NOFA posting and Choice Neighborhoods Grant funding

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.*

- **DISPOSITION**

(1) TRINITY MAINTENANCE GARAGE-DISPO AMENDMENT

The Authority intends to submit a modification/amendment to a previous HOPE VI Phase III disposition application to allow for the construction of a maintenance garage by the developer, Trinity Financial, Inc., on a parcel of vacant land abutting the Phase III HOPE VI site.

√ Property Name: Tonomy Hill - AMP 1-RI005000001P

(Note: HUD may now consider this land part of the Park Holm development, AMP 1-RI005000001)

Activity: Disposition of 0.27 acres of land to Trinity Financial, Inc (HOPE VI Phase III Developer)

Status: Planned Submission

Potential Submission: December 2010/January 2011

Number of Units: Non-Residential Use

Timeline: 2010-2011

(2) LEASE-TO-PURCHASE HOMEOWNERSHIP PROGRAM:

The Housing Authority intends to build between 3-5 lease-to-purchase units on the old Tonomy Hill HOPE VI site (RI005000001P) with \$1.7 million in HUD Replacement Housing Funds (RHF), subject to approval of the Authority's development proposal. If so required, the Authority will also submit a disposition application to HUD to allow the units to be sold to prospective low-income homebuyers.

√ Property Name: Tonomy Hill - AMP 1-RI005000001P

(Note: HUD may now consider this land part of the Park Holm development, AMP 1-RI005000001)

Activity: Construction of 3-5 lease-to-purchase units

Status: Planned Submission

Potential Submission: 2011, subject to HUD approval of the RHF proposal

Number of Units: 3-5

Timeline: 2011 or once RHF proposal is approved

D. HOMEOWNERSHIP

The Housing Authority intends to build between 3-5 lease-to-purchase homeownership units on the old Tonomy Hill HOPE VI site (RI005000001P) with \$1.7 million in HUD Replacement Housing Funds, subject to HUD approval of the Authority's development proposal that was submitted on November 1, 2010. HUD may now consider this land as part of development number RI005000001.

E. PROJECT BASED VOUCHERS

7.0

HACN intends to project base up to 20% of its vouchers in Newport or in other communities within Rhode Island that are not meeting the statewide mandate of having 10% of its housing stock affordable. HACN has an agreement with RI Housing that allows for HACN to provide project based vouchers in these other jurisdictions. Project basing HACN's vouchers is consistent with the PHA plan because it creates and preserves affordable stock for families in need.

8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>▪ (Attachments)</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>▪ (Attachments)</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>

9.0	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 on the Waiting List (PUBLIC HOUSING)			
Waiting list type: (select one) <input type="checkbox"/> Section 8 tenant-based assistance <input checked="" type="checkbox"/> Public Housing General Developments <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	183	100%	22
Extremely low income <=30% AMI	152	83%	
Very low income (>30% but <=50% AMI)	23	13%	
Low income (>50% but <80% AMI)	6	3%	
Families with children	120	66%	
Elderly families	9	5%	
Families with Disabilities	10	5%	
Race/ethnicity	White 92	50%	
Race/ethnicity	Black 39	21%	
Race/ethnicity	Am Indian 6	3%	
Race/ethnicity	Asian 1	Hawaiian (0.5%)	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	57	31%	6
2 BR	32	17%	16
3 BR	76	42%	0
4 BR	16	9%	2
5 BR	2	1%	0
5+ BR	0	0%	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 1 and 2 bedroom list is closed 3&4 bedroom list is open If yes: HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)? N/A Does the PHA expect to reopen the list in the PHA Plan year? (7 mos (1bedroom & 2 bedroom only.. 3&4 br is still open) Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>			

9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.		
Housing Needs of Families on the Waiting List (PUBLIC HOUSING ELDERLY/DISABLED)			
Waiting list type: (select one) <input type="checkbox"/> Section 8 tenant-based assistance <input checked="" type="checkbox"/> Public Housing Elderly /Disabled <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	112		
Extremely low income <=30% AMI	107	95%	
Very low income (>30% but <=50% AMI)	3	3%	
Low income (>50% but <80% AMI)	2	2%	
Families with children	0	0%	
Elderly families	38	34%	
Families with Disabilities	74	66%	
Race/ethnicity	White 91	81%	
Race/ethnicity	Black 14	13%	
Race/ethnicity	Am Indian 1	1%	
Race/ethnicity	Asian 0	0	
Race/ethnicity	Hispanic 6	5%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	112	100%	
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)? N/A Does the PHA expect to reopen the list in the PHA Plan year? N/A Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.						
Housing Needs of Families on the Waiting List (SECTION 8)							
Waiting list type: (select one) <input checked="" type="checkbox"/> Section 8 tenant-based assistance <input type="checkbox"/> Public Housing <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:							
		# of families		% of total families		Annual Turnover	
Waiting list total		686		100%		14%	
Extremely low income <=30% AMI		541		79%			
Very low income (>30% but <=50% AMI)		112		16%			
Low income (>50% but <80% AMI)		31		5%			
Families with children		402		59%			
Elderly families		43		6%			
Families with Disabilities		34		5%			
Race/ethnicity	White	346		50%			
Race/ethnicity	Black	144		21%			
Race/ethnicity	Am Indian	22		3%			
Race/ethnicity	Asian	6		<1%			
	Hawaiian	3		<1%			
Characteristics by Bedroom Size (Public Housing Only)		N/A		N/A			
1BR							
2 BR							
3 BR							
4 BR							
5 BR							
5+ BR							
Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Location
Income <= 30% of AMI	879	5	5	5	5	5	5
Income >30% but <=50% of AMI	574	5	5	4	2	3	4
Income >50% but <80% of AMI	593	4	4	4	1	3	3
Elderly	433	5	4	5	4	3	3
Families with Disabilities	193	5	5	5	5	5	5
Race/Ethnicity – White	1297	5	5	5	5	5	5
Race/Ethnicity – Black	654	5	5	5	5	5	5
Race/Ethnicity – Indian	93	5	5	5	5	5	5
Race/Ethnicity - Other	2	5	5	5	5	5	5

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <ul style="list-style-type: none"> • Employ effective maintenance and management policies to minimize the number of public housing units off-line. • Reduce turn over time for vacated public housing units. • Reduce time to renovate public housing units. • Seek replacement of public housing units lost to the inventory through mixed finance development. • Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources. • Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction. • Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required. • Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program. • Affirmatively market to local non-profit agencies that assist families with disabilities. • Apply for HUD 811 funding – Supportive housing for people with disabilities. • Affirmatively market to races/ethnicities shown to have disproportionate housing needs. • Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units • Market the Section 8 program to owners outside of areas of poverty/minority concentrations. • Participate in the Consolidated Plan development process to ensure coordination with broader community strategies. • Apply for additional section 8 units should they become available. • Leverage affordable housing resources in the community through the creation of mixed – finance housing. • Explore housing resources other than public housing or Section 8 tenant-based assistance. • Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing & Tenant based Section 8 assistance. • Adopt rent policies to support and encourage work. • Employ admissions preferences aimed at families who are working.
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Additional Information. Describe the following, as well as any additional information HUD has requested.

(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.

STATEMENT OF PROGRESS IN MEETING THE MISSIONS & GOALS OUTLINED IN THE CURRENT 5-YEAR PLAN:

The Authority continues to pursue its mission to provide decent, safe, sanitary and affordable housing and to promote homeownership, economic development, economic self-sufficiency for public housing and HCV Section 8 residents and a living environment free of discrimination and crime.

Much effort and planning was made to insure the construction and completion of Newport Heights Phase Four. This phase includes 37 rental units and seven ownership units. A Park Holm resident was able to use a section 8 voucher to assist in the purchase of the home. The rental units are fully occupied. Three of the seven homeownership units have been sold and marketing efforts continue. The Authority hired a State approved monitoring agent to insure affordable protections and long-term affordability. HACN received the 1st place National Award for the 2010 Charles Edison Tax Credit Award for an outstanding public housing revitalization project.

The remaining buildings in Tonomy Hill have been demolished. The objective will be to maintain the land while the Authority determines the appropriate time to begin development activity. Most of the homes will be market rate homeownership.

We received Capital Funds through the American Recovery and Reinvestment Act (ARRA) to make Park Holm improvements at its Park Holm properties. These ARRA funds allowed for the renovation of 30 units and the work was completed and the funds were fully expended well in advance of the deadline.

An application for HUD 811 grant funds was prepared by our consultant. The 2009 application was not funded, however, the consultant plans to renew the application and submit in the 2010 Notice of Funding Availability (NOFA) or once the next NOFA is posted.

A non-profit development corporation was formed with the name, Newport County Affordable Housing Development Corporation, with the purpose to promote, support and develop affordable and mixed income rental and homeownership properties and community facilities that enhance neighborhoods and services. The corporation submitted an application and received approval from the IRS to have 501C3 status.

HACN hired a master plan consultant and architect to work with its Board and residents to develop a master plan for Park Holm. Many public meetings with residents took place to help in soliciting ideas and suggestions with a goal to determine the needs of the residents and make improvements to the buildings and apartments. Efforts will continue to make improvements and identify service needs of the households similar to what was accomplished through the Hope 6 CSS program. We recognized best practices and lessons learned and wish to apply them accordingly.

We expanded the use of Resident Services and Community Facilities to allow education, social and recreational opportunities to our residents. The Ross NNC grant was fully expended and closed out in September 2010, however the Neighborhood Network Center (NNC) located at the Florence Gray Center continues to provide computer training and skills to individuals of our communities and members of the general public. We expanded these services by adding computer stations and training at Donovan Manor and the Park Holm Senior's Center. The new HSS program was implemented in 2010 with expansion potential to Coddington Manor.

To help provide other education opportunities we worked with several providers including the East Bay MET who wished to expand their student enrollment by building a state owned building on the Florence Gray Center (FGC) parcel and complementing services at the FGC. The Authority will work with the MET and State as this initiative is pursued. A purchase and sales agreement with the State was signed and environmental testing was completed. We are currently working on an abatement plan in preparation of HUD disposition approval for the application that was submitted in September 2010.

The Newport Resident Council has been involved in much of our activity and remains a partner in our efforts and delivery of improvements and services. They have assisted in development activity, resident services and other planning initiatives and are valued by the Authority for its participation and work to benefit our residents.

We updated the flat rents by hiring an appraisal company to complete a market study of our area and comparative rents the Authority should be charging. A comprehensive report was completed. An implementation phase in schedule was established to allow a two year period for the increase. HACN is presently in year two and residents will be allowed to select their choice for a rent determination which is household income based or a flat rent.

The Authority looked into implementing a security deposit process and decided not to implement it in 2010, but will look to implement it in 2011. HACN implemented a 15 day advanced vacate notification process in 2010 and will explore a 30 day advanced notification process.

10.0

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.

**STATEMENT OF PROGRESS IN MEETING THE MISSIONS & GOALS OUTLINED IN THE CURRENT 5-YEAR PLAN
Cont'd.:**

A few modifications were made to the Authority's Applications for Continued Occupancy (ACOP), and its administrative plan for the HCV Program. These modifications were made in compliance to changing HUD regulations as they apply to both public housing and HCV programs relative to the Violence Against Women Act (VAWA). Some preliminary work was done and the Authority will submit a renewed designation plan for Donovan Manor in 2011.

The Authority explored the steps to have a HCV Section 8 Home Ownership plan and decided there were many other initiatives to complete before planning to operate this program. We will continue to explore this opportunity in 2011. We continued our summer youth employment program. This was the fourth successful year of employing and training youth and supervisors to work at HACN properties and management offices.

The Authority continued to provide staff development and training and will continue to provide such initiatives that allow our staff to excel in their delivery of services to our customers. We established a Risk Management Committee represented by all departments to pro-actively look at minimizing risks and reducing injury and claims throughout the entire Authority. Weekly Sr. Staff and Management meeting were held to review and enhance the operation plan.

We continued to expand our procurement processes and provided training to several staff members. Additionally, the Authority continues to be the lead agency in an energy consortia that purchases, electricity and natural gas as a group within the Public Housing Association of Rhode Island (PHARI). Savings have been realized thus far.

We completed some work to assess our non-residential spaces and this will continue to be part of our goals in 2011.

Energy:

HACN set up an energy monitoring system for utility consumption and expects to develop strategies with residents for conservation efforts in 2011. HACN also conducted a preliminary feasibility analysis and submitted it for grant funding to the RI Department of Economic Development for wind power on HACN land.

Park Holm:

Park Holm Renovations Segment 1, Phase 1, 30 units were completed ahead of schedule and HACN is presently renovating another 21 units in Phases 2A and 2B for a total of 51 renovated units. Segment 2, HACN plans to submit a HUD 202 upon a NOFA posting. Meanwhile, HACN had a survey done to identify the location of the 202 within Park Holm. Segment 3, HACN updated its master plan to select a different building for demolition in order to allow for more resident parking.

HACN conducted a needs assessment of services for residents of Coddington Manor followed by the completion of some items identified by the residents.

HACN applied for \$40k and received \$5k for CDBG funds for the purpose of a CSS type program for residents of Park Holm.

HACN began the evaluation of its non-resident space. We completed negotiations with the Visiting Nurse Services of Newport (VNS) at Donovan Manor which resulted in looking for future suitable uses of the Donovan Manor space. In addition, HACN developed plans and strategies for retail space at Florence Gray Center.

HACN met with the Newport Residents Council (NRC) and residents to develop a resident orientation handbook which included the highlighting of lease obligations, resident responsibility, HACN obligations, safety, maintenance charges, advanced vacate notification process, resident services and the operation plan programs and services offered through the NRC.

Managers conducted several general meetings with the residents to discuss parking, services, relocation, security and the other important community interests.

10.0

11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

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

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

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

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

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

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

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

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

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

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

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

(b) Demolition and/or Disposition.

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

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

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

(c) Conversion of Public Housing.

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

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

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

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

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

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

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

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

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

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

8.2 Capital Fund Program Five-Year Action Plan

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

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

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

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

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

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

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

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

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

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

6.0) PHA Plan Update - Elements

1. Eligibility, Selection & Admissions Policies, including Deconcentration & Wait List Procedures

(1) Eligibility

- a). The PHA verifies eligibility for admission to public housing as listed:
- When families are within a certain number of being offered a unit: (state number)
20
 - When families are within a certain time of being offered a unit: (state time)
60 days
- b). Non-income (screening) factors used to establish eligibility for admission to public housing are:
- Criminal history and any Drug-related activity
 - Rental history
 - Character references, in the absence of rental history
 - May begin using credit history

The HACN requests criminal records from local law enforcement agencies, criminal records from State Law enforcement and FBI Criminal Records for screening purposes.

(2) Waiting List Organization

- a). The methods the HACN uses to organize its public housing waiting list are:
- Community-wide list
 - Other Program based waiting list (s):
 - 1) Public Housing Family
 - 2) Public Housing Elderly/Disabled
 - 3) Public Housing Lease-to-Purchase Program
- b). Interested persons wanting to apply for admission to public housing may apply at:
- The Park Holm development site management office
 - The Donovan Manor site management office
 - The Administration Office

The HACN will be providing a site based waiting list in the coming year for the Lease-to-Purchase program.

Families may be on more than one list simultaneously 1) Family; 2) Elderly; and 3) Lease-to-Purchase.

(3) Assignment

- √ Applicants are given two vacant unit choices before they are removed from the waiting list. This policy is consistent across all waiting list types.

(4) Admissions Preferences

a. Income targeting:

- The HACN plans to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income? Yes

b. Transfer policies:

Transfers take precedence over new admissions under the following circumstances, subject to ratios of admissions to transfers:

- Emergencies
- Overhoused
- Underhoused
- Medical justification
- Administrative reasons determined by the HACN (e.g., to permit modernization work)

c. Preferences:

1. The HACN established preferences for admission to public housing (other than date and time of application).

Former Federal preferences: None

√ Other preferences are:

- Working families and those unable to work because of age or disability
- Residents who live and/or work in the jurisdiction

√ The HACN will employ admissions preferences by first priority of :

1. Date and Time

√ Relationship of preferences to income targeting requirements:

- The pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. The reference materials applicants and residents can use to obtain information about the rules of occupancy of public housing are:

- The HACN-resident lease
- The HACN's Admissions and Continued Occupancy policy
- The HACN's Resident Orientation Handbook
- PHA briefing seminars or written materials

b. The residents must notify the HACN of changes in family composition at:

- An annual reexamination and lease renewal
- Any time family composition changes
- Any time family requests revision

(6) Deconcentration and Income Mixing

a. The HACN's analysis of its family (general occupancy) developments did not determine concentrations of poverty indicating the need for measures to promote deconcentration of poverty or income mixing.

b. The HACN did not adopt any changes to its admissions policies based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing.

c. ☐ Yes ☒ No: Did the PHA adopt any changes to other policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

(7) Section 8

(1) Eligibility

a. The extent of screening conducted by the HACN is:

- Criminal or drug-related activity only to the extent required by law or regulation
- Income Eligibility
- Other (list below)
√ Good Standing in Public Housing

b. The HACN requests criminal records from local law enforcement agencies, criminal records from State Law enforcement and FBI Criminal Records for screening purposes.

c. The HACN shares the following information with prospective landlords?

√ Previous address

(2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged:
 - Federal project-based voucher program
- b. Interested persons wanting to apply for admission to Section 8 may apply at:
 - The Section 8 Office located at 120-B Hillside Avenue

(3) Search Time

- a. The HACN gives extensions on standard 60-day period to search for a unit.

If yes, state circumstances below: A 60-day extension for a maximum of 120-days, unless approved for longer periods for a reasonable accommodation or for families receiving vouchers due to public housing modernization efforts which required them to be relocated.

(4) Admissions Preferences

- a. Income targeting:

√ The HACN believes it will exceed the federal targeting requirements of more than 75% of all new admissions to the section 8 program being families at or below 30% of median area income.

- b. Preferences

1. The HACN has established preferences for admission to section 8 tenant-based assistance (other than date and time of application)
2. The following admission preferences the HACN plans to employ in the coming year are:

- Working families and those unable to work because of age or disability
- Residents who live and/or work in your jurisdiction

√ Other preference(s) (list below)

- Date and Time
- Working families and those unable to work because of age or disability
- Residents who live and/or work in your jurisdiction

3. The applicants on the waiting list with equal preference status, the applicants are selected by:

- Date and time of application

4. The HACN plans to employ preferences for “residents who live and/or work in the jurisdiction”, this preference has previously been reviewed and approved by HUD.

5. Relationship of preferences to income targeting requirements:

- The pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

- a. Documents or other reference materials that include the policies governing eligibility, selection, and admissions to any special-purpose Section 8 program administered by the PHA are contained in
- The Section 8 Administrative Plan
 - Briefing sessions and written materials

The HACN announces the availability of any special-purpose Section 8 programs to the public through published notices.

2011 Annual Plan- Element 1 Cont'd.

I. Proposed Changes to the Admissions and Continued Occupancy Policy

- **HACN recommends the following change to section B1.0 Definitions –**

Delete: Resident Screening Panel- which states that a Resident Screening Panel will be utilized to determine the acceptance of a specific family in a development by a panel of residents in that community. Panels have been established in both developments that are tenant managed and developments in which tenant associations are in place. Rejection by these panels will not affect the applicant's status regarding the other offers provided by the Selection portion of the Plan. However, if the family is inadequate or unacceptable to the Resident Screening panel, they will not be considered for any development and removed from the wait list.

- **HACN recommends the following changes in section C2.0 – Admissions Eligibility Criteria-**

Part M From: If a prior resident of a public housing program administered by the Authority, the applicant family must have a satisfactory record in meeting financial and other lease obligations. A former resident who owes a move out balance to the Authority will not be considered for re-admission until the account is paid in full and reasonable assurance is obtained of the applicant's ability to meet his or her rent obligations.

To: If a prior resident of a public or assisted housing program, the applicant family must have a satisfactory record in meeting financial and other lease obligations. A former resident of an assisted housing program who owes a move out balance will not be considered for re-admission until the account is paid in full and reasonable assurance is obtained of the applicant's ability to meet his or her rent obligations.

Adding a Part O which would read: The applicant family must not have a record of eviction or termination from housing or residential programs. (Note that consideration will be given to relevant circumstances).

Adding a Part P which would read: That the Authority must deny admission to applicants who are within the following categories (note that these categories are federal requirements, however, HACN has the authority to make the prohibition periods longer):

- ~ Persons evicted from federally assisted housing for drug-related criminal activities may not be admitted for five years from the date of eviction;
- ~ Persons convicted of methamphetamine production in assisted housing are permanently prohibited from public housing;
- ~ Persons subject to a lifetime sex offender registration under a State sex offender registration program are barred from public housing permanently.

- **HACN recommends adding the following items to section C5.0 – Occupancy Standards**

- ~ HACN will consider unborn children in determining unit size
- ~ HACN will count foster children in determining unit size so long as the family can provide documentation that the foster child/children is/are expected to be in the home for more than 6 months.

- **HACN recommends the following changes in section C7.2 – Dwelling Unit Offers**

From: Upon acceptance of the offering the applicant will then be assigned a deadline for move-in. Before the end of this period the applicant must complete all outstanding pre-occupancy requirements such as joint unit inspection, leasing interview and lease execution. Normally this deadline will be within three working days of acceptance of the offer but may be extended a maximum of five additional days at the discretion of the Authority when necessary to alleviate hardship. Failure to complete move-in requirements within the assigned period will result in withdrawal of the offer and will be considered a refusal of the offer.

To: Upon acceptance of the offering the applicant will then be assigned a deadline for move-in. Before the end of this period the applicant must complete all outstanding pre-occupancy requirements such as joint unit inspection, leasing interview and lease execution. Normally this deadline will be within three (3) calendar days of acceptance of the offer but may be extended a maximum of two (2) additional calendar days at the discretion of the Authority when necessary to alleviate hardship. Failure to complete move-in requirements within the assigned period will result in withdrawal of the offer and will be considered a refusal of the offer.

Adding a section for Security Deposits that would read: HACN shall require a security deposit of one month's rent for all residents entering into a lease with HACN. Upon final determination of eligibility, applicants shall be provided a rent estimate and security deposit estimate so that applicants may begin saving money for any prospective apartment offer

made to them. Any changes in applicant circumstances (income, family composition, etc. will affect the rent/security deposit estimate).

- **HACN recommends making the following changes to section D2.3 part 1 – Interim Re-Certifications**

Adding: Residents must report all changes in income and family composition to the Authority. (Please note that the next section informs residents that interim-reexaminations would only be conducted when that would result in a lower rent obligation and only at the written request of the resident.)

- **HACN recommends making the following changes to section E1.0 Transfer Policy**

Change section E1.3, Bullet 12 From: Issue notice to transfer as soon as vacant apartment is available for occupancy. This notice will give the resident seven (7) working days to complete transfer.

To: Issue notice to transfer as soon as vacant apartment is available for occupancy. This notice will give the resident three (3) calendar days to complete transfer. This deadline may be extended a maximum of two (2) additional calendar days at the discretion of the Authority when necessary to alleviate hardship.

Ensure consistency between section E1.2 and E1.3 by deleting section E1.3, Bullet 16.

E1.2 presently states: Authority initiated transfers always have priority over new move-ins. The remainder shall be mixed with new move-ins in a ratio of one transfer to five new move-ins.

E1.3, Bullet 16, Transfer Ratio presently states:

<u>Bedroom Size</u>	<u>Transfer Ratio</u>
1	1 to 1
2	1 to 4
3	1 to 2
4	1 to 1
5	1 to 1

HACN recommends deleting the transfer ratio chart shown above in E1.3, Bullet 16 and replacing it with: The transfer ratio is one (1) transfer to every five (5) admissions.

- **HACN recommends the following change to section G – Policy and Procedure on Rent Collection**

Adding a section for Advanced Vacate Notice which would read: All households must provide HACN with at least thirty (30) days advanced vacate notice. HACN has an Intent to Vacate form in the management offices which must be completed and will be date/time

stamped. Vacating without said notice will result in the household being charged thirty (30) days worth of rent.

- **HACN recommends adding the following section for Lease-to-Purchase Units to the Admissions and Continued Occupancy Policy to address any lease-to-purchase units HACN seeks funding to construct.**

LEASE-TO-PURCHASE UNITS

A. Program Overview

A lease-purchase unit is a unit whereby the family leases a particular unit from the Housing Authority with the ultimate goal of purchasing said unit. A family has the opportunity to rent the unit under the traditional public housing program for up to twelve months, with a possible six month extension subject to certain requirements, while the family works on securing a mortgage to purchase the unit.

The homes eligible for purchase are initially owned by HACN and are leased to qualified applicants/residents until such time that they are sold to the lease-to-purchase occupant. The homes (specifically, the improvements) are for sale, however, the land will remain the property of HACN. The homebuyer will be entitled to the use of the land through a ground lease agreement. As such, ground lease payments will be required to be paid by the homebuyer to HACN.

If the family does not purchase the home within the twelve month period (or any approved extension period not to exceed up to six additional months for a grand total of eighteen months) then said family will be required to transfer to the next available public housing rental unit of the appropriate bedroom size, within or outside the existing neighborhood, at the family's own expense. Failure to transfer will be grounds for eviction. See transfer policy in terms of timeline allowed for transfer.

Additional details regarding the lease-purchase program, including the Homeownership Term Sheets and Homebuyer Guidelines materials may be found in the Housing Authority's Replacement Housing Fund Program Guidebook.

B. Applicant/Resident Selection

In addition to HACN's existing admissions preferences which are:

- Applicants who Live or Work in the City of Newport (1 point); and
- Applicants who are Employed, Elderly, or Disabled (1 point)

HACN shall add an additional preference point for:

- Existing HACN public housing residents or Housing Choice Voucher participants in good standing (1 point).

C. Minimum Income Requirements

The adult family members of a non-disabled family who will enter into a lease-purchase agreement must meet collectively a minimum non-welfare annual income requirement that is not less than the Federal minimum hourly wage (\$7.25/hour as of October, 2010) multiplied by 2,000 hours (\$14,500). For a disabled family (a family whose head, spouse, or sole member is a person with disabilities), the adult family members who will enter into the lease-purchase agreement must have an annual income that is not less than the monthly Federal Supplemental Security Income benefit for an individual living alone (\$674 as of October, 2010) multiplied by 12 (resulting in a minimum income requirement of \$8,088 as of October, 2010).

In determining if the family meets the HUD minimum income requirement, the PHA reviews the family's annual income as determined by the PHA in accordance with 24 CFR Part 5.609 and subtracts any income that is not attributable to the adult members of the family that will enter into the lease-purchase agreement. In the case of a non-elderly, non-disabled family (head, spouse or sole member not disabled or at least 62 years of age), the PHA also subtracts any welfare assistance these adult family members may be receiving. The PHA does not disregard welfare assistance received by family members that will enter into the lease-purchase agreement in the case of families with an elderly or disabled head, spouse, or sole member.

Please note, however, that families that do not meet the Housing Authority's minimum income requirements must nevertheless be considered to meet the income requirement if:

- The family meets the applicable HUD standard; and
- The family demonstrates that the family has been pre-approved or pre-qualified for financing in an amount sufficient to purchase decent, safe, and sanitary housing of modest design in the Housing Authority's jurisdiction.

The pre-approved or pre-qualified financing must further meet any Housing Authority requirements for financing in general, including the qualifications of the lender and the terms of the loan. If the amount of the pre-approval or pre-qualification appears excessive in relation to the family's capacity to pay, HACN shall investigate the situation, i.e. for predatory lending practices or incomplete disclosure of income to HACN, and HACN may deem the family ineligible based on not meeting the income requirements.

Please note that the special rules on minimum income requirements only apply to eligibility for participation in the lease-purchase program. HACN must follow normal income definitions and rules for the public housing program for rental subsidy calculations.

D. Minimum Employment Requirements

In addition to meeting the income requirement, one or more adult family members who will enter into the lease-purchase agreement must be:

- a. Employed on a full-time basis (an average of not less than 30 hours a week); and
- b. Have been continuously employed for the year prior to the beginning of lease-purchase assistance with HACN.

This employment requirement does not apply to an elderly or disabled family (whose head, spouse, or sole member is elderly or disabled). Also, the employment requirement does not apply to a family that includes a person with disabilities, if other family members are unable to work on a full-time basis because they are required to care for the person with disabilities, and HACN determines a reasonable accommodation is necessary.

E. Homeownership Counseling

Families who enter into lease-purchase agreements shall be required to complete an approved homeownership counseling program. Approved programs will generally cover topics, including, but not limited to:

- Budgeting and money management;
- Home maintenance;
- Credit counseling;
- Obtaining financing and loan pre-approvals;
- Fair housing, Fair housing lending, and local Fair housing enforcement agencies; and
- Information about the Real Estate Settlement Procedures Act (RESPA), State and Federal Truth in Lending laws, and ways to avoid predatory lending.

F. Purchasing the home

The primary responsibility for securing the necessary financing to purchase the home rests with the family. HACN is permitted to educate lenders in the community in order to assist families in obtaining financing. However, HACN may not require a family to use a particular lender or lenders. The family must make the lender selection, so long as the lender meets the qualifying criteria and conditions set forth by HACN.

G. Loan/Lender Qualifications

- Lenders must be Fannie Mae approved and regulated by a State or other governmental entity
- There are prohibitions on financing that involves balloon payment mortgages, interest only mortgages, adjustable rate mortgages, and unduly restrictive provisions such as penalties for pre-payment of the mortgage.

H. Down Payment Requirements

Buyers must contribute a minimum of 1% of the purchase price or \$1,000 whichever is greater toward the purchase of the home.

I. Lease Time Limits

The lease-to-purchase homes are only available for lease for a limited amount of time. Families shall be given twelve months to secure a mortgage and purchase the home. If the family is not able to purchase the home within the twelve month period, but is able to demonstrate to the Housing Authority's satisfaction that 1) the family has completed an approved homebuyer education course; and 2) that the family has tried to secure the mortgage (i.e. loan approval or denial documentation, etc), and 3) that the family is likely to secure a mortgage to purchase the home within another six months; then the Housing Authority may approve a six month extension to allow the family some additional time to purchase the home.

If the family cannot demonstrate the justification for the six month extension and is unable to purchase the home after twelve months of occupancy, then the family will be required to transfer to the next available public housing unit of the appropriate bedroom size, within or outside the neighborhood, at the family's own expense. Failure to transfer to the next available rental unit shall be grounds for eviction.

If the family was approved for the six month extension and is still unable to secure the financing needed to purchase the home after eighteen months of occupancy, then the family will be required to transfer to the next available public housing unit of the appropriate bedroom size, within or outside the neighborhood, at the family's own expense. Failure to transfer to the next available rental unit shall be grounds for eviction.

II. Proposed Changes to the Section 8 Administrative Plan

- **HACN recommends the following change to section 6 G – Establishing Preferences and Maintaining the Waiting List**

Part A- Applicant Pool, item 3- From: All applicants must meet either "Very Poor" or "Very Low Income" eligibility requirements as established by HUD. Any exceptions to these requirements, must have been previously approved or listed as eligible by HUD.

To: All applicants must meet the Low Income eligibility requirements as established by HUD. Any exceptions to these requirements, must have been previously approved or listed as eligible by HUD.

Part C-Waiting List Preferences From: During the eligibility process, all applicants will be given the opportunity to show that they qualify for a residency preference.

To: During the eligibility process, all applicants will be given the opportunity to show that they qualify for a residency and/or a working preference.

Part E – Order of Selection From:

1. Local Residents by Chronology;
2. Remaining Applicants by Chronology

To:

1. Applicants with 2 preference points (The Residency Preference which is granted to applicants living or working in Newport; AND the Working Preference which is granted to applicants who are working, elderly, or disabled)
2. Applicants with 1 preference point (The Residence OR the Working Preference)
3. Remaining Applicants by Chronology (Date/Time of Application)

• **HACN recommends the following change to section 7 – Occupancy Standards**

Part A Voucher Size Issued From: Foster children will be included in determining unit size

To: Foster children will be included in determining unit size so long as the family can provide documentation that the foster children are expected to be in the home for more than 6 months.

• **HACN recommends the following change to section 16- Interim Recertification**

From: The Family must report any of the following factors which could result in an increase in rent:

- a. An increase in gross household income of \$40.00
dollars or more per month; or,
- b. Change in Family composition.

To: The Family must report any factors (i.e. income and family composition) which could result in a change in rent. However, HACN will only conduct interim recertifications that would result in a lower rent obligation and only at the written request of the resident.

• **HACN recommends the following change to section 18 – Denial or Termination of Assistance**

Adding an item that reads: Persons convicted of methamphetamine production in assisted housing are permanently prohibited from public housing.

6.0) PHA Plan Update - Elements
3. Rent Determination

Income Based Rents:

Income based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or the minimum rent (less HUD mandatory deductions and exclusions).

- HACN will employ one discretionary rent-setting policy for income based rent in the Public Housing Program which is the un-reimbursed child care expenses paid by public housing residents for children not living in the home.
- HACN will not employ any discretionary rent-setting policies for income based rent in the Section 8 Housing Choice Voucher Program.

Minimum Rents:

The minimum rent in the Public Housing and Section 8 Housing Choice Voucher Program is \$25 and there are no proposed changes for the upcoming year.

Minimum Rent Hardship Exemptions:

HACN has not adopted any discretionary minimum rent hardship program exemptions in its Public Housing or Section 8 Housing Choice Voucher Program.

Rent Re-Determinations:

HACN conducts interim recertifications in its Public Housing Program for decreases in income only.

HACN intends to conduct interim recertification in its Section 8 Housing Choice Voucher Program for decreases only this coming year as opposed to the current policy of conducting interims for any decreases in income or any increases in income of more than \$40 in gross household income per month.

HACN will conduct interim recertifications in its Public Housing and Section 8 Housing Choice Voucher Program for households who initially had no income and then receive income (i.e. minimum income renters).

Flat Rents:

HACN conducts an annual study utilizing comparability data such as rents listed in the local newspaper, on-line, or on the MLS real estate listing to determine its market-based flat rent schedule for the Public Housing Program.

Payment Standards for the Section 8 Housing Choice Voucher Program:

HACN has adopted a payment standard of 100% of the HUD published Fair Market Rents (FMRs). HACN reviews its payment standards annually.

6.0) PHA Plan Update - Elements
6. Designated Housing for Elderly and Disabled Families

HACN owns properties that have previously been designated for occupancy by only elderly families or families with disabilities. These properties include:

- RI005000004 - AMP 4 – The Elderly Scattered Sites (156 units)

HACN owns properties that have previously been designated for occupancy by only elderly families or families with physical disabilities. These properties include:

- RI005000005 - AMP 5 – Donovan Manor (85 units)

If HACN is required by HUD to apply for renewal of its elderly only designation (although the development allows occupancy by persons with physical disabilities) in development RI005000005 - AMP, Donovan Manor, then HACN will submit a renewal application in 2011.

6.0) PHA Plan Update - Elements
7). COMMUNITY SERVICE AND SELF SUFFICIENCY

Programs relating to services/ amenities provided or offered to assist families

1. One of the direct services that is provided for residents is the Emergency Food Pantry which gives a supply of food to families and or individuals who are in need. The Food Pantry is open Monday – Friday from 9:00 to 5:00. accommodations for after hour Emergency Food is available by appointment only.

2. In addition to providing food, there is a Supplemental Nutrition Assistance Program (SNAP) formally known as Food Stamps, a representative is on site to assist individuals in filling out the forms for the SNAP program.

During the summer months on a weekly basis, fresh produce is distributed to residents supplied by the Rhode Island Community Food Bank. Food and produce is also delivered to home bound and shut in residents, who are not able to get out.

3. Other services and amenities provided

- | | | |
|---------------------------|-----------------|-------------------------|
| 1. Summer Feeding (youth) | 3. Winter coats | 5. Dinner Conversations |
| 2. Holiday Baskets | 4. Workshops | 6. Monthly Newsletter |

B. Policies or programs of the HACN for the enhancement of the economic and social self-sufficiency to assist residents.

1. An Even Start in Newport is a GED and ESL program on site, located at the Florence M. Gray Multi-Purpose Center. Participants are able to study for their High School Diploma and to learn English. This program is well with-in walking distance and also provides on site childcare for participants.
2. The Neighborhood Network Center, (Computer Lab) is a program located on site at the Multi-Purpose Center. The Computer lab offers training in Into to PC & Internet, Excel, Microsoft Word, participates have the opportunity to upgrade their resumes and do a job search. Evening classes are offered to accommodate working people.

C. Include any Section 3, FSS and HSS

1. When the opportunity arises, residents are made aware that a job is posted and they are encouraged to apply If the resident qualifies they will be granted an interview and if found qualified, will be given top consideration for the position.

7). Community Service and Self Sufficiency

2. The newest program is Helping Students to Succeed (HSS). This program gives, opportunity to utilize and engage middle and high school students in a beautification project within the development. Students were also involved with promoting and encouraging residents to vote. "Gong Green" is today's theme, and students are gaining knowledge of how to learn more about the process of going green. Students have access to the computers that are located at Housing's Senior Center, or at the Neighborhood Network Center to help them with school work.

2. Ser-Jobs for Progress is a training program located on site a the Multi-Purpose Center. This program provides job training for individuals fifty-five and older. Residents are recruited on a regular basis to participate. Individuals are placed at a non-profit organization and paid while being trained for future employment opportunities.

D. How does the HACN comply with requirements of community service and treat income changes resulting from welfare program requirements.

1. The Housing Authority allows resident to do community service at The Florence M. Gray Multi-Purpose Center or the Park Holm Senior Center, helping them to comply with what is required. A reduction in rent is applied to Residents who have been financially sanctioned due to the inability of meeting welfare program requirements. Resident Services is available to assist with employment plans and job search.

It is within the scope of Resident Services to keep abreast of the various services and programs that are available community wide. Information and referrals are provided on a daily basis.

Listing of Agencies/ Referrals

- 1.Newport Skills Alliance
For Job training and placement
- 2.Ser-Jobs for Progress
Paid Job Training for Senior Citizens
- 3.An Even Start
ESL and GED preparation

4. Deblois Fund
Help with finances

5. Visiting Nurses Service of Newport County
Free Blood Pressure/Screenings
Flu Shots
Nutrition/Diabetic Education/ Wellness Clinic

6. Church Community Housing Corporation
First Time Homebuyers Classes

7. Boys and Girls Club
After School Programs

8. Newport Housing
Health Homes Program

9. Park Holm Senior Center
Lunches/Activities for Seniors

10. East Bay Community Action Program
Services for WIC, Dental, Head Start

11. Department of Human Services
Medical Assistance, Food Stamps

12. Child and Family Services
Family Counseling/ Group Sessions

Civil Rights Certification

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

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:


The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of the City of Newport

RI005

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	
Name of Authorized Official Frank D. Landry	Title Chairman
Signature 	Date 11-12-10

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number The Housing Authority of The city of Newport RI005		Newport, RI Newport County		X Original 5-Year Plan Revision No:		
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	\$1,240,000	\$1,372,258	\$1,300,000	\$1,288,000
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		\$87,258	\$0	\$27,258	\$39,258
E.	Administration					
F.	Fee's and Costs		\$90,000	\$90,000	\$90,000	\$90,000
G.	Operations		\$154,473	\$154,473	\$154,473	\$154,473
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		\$1,574,731	\$1,574,731	\$1,574,731	\$1,574,731

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary (Continuation)

PHA Name/Number The Housing Authority of The city of Newport RI005			Newport, RI Newport County		<input checked="" type="checkbox"/> X Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
		Annual Statement				
	Operations		\$157,473	\$157,473	\$157,473	\$157,473
	Fee's and Costs		\$90,000	\$90,000	\$90,000	\$90,000
	AMP 1 Park Holm		\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
	AMP 2 Chapel Terrace		\$90,000	\$90,000	\$300,00	\$0
	AMP 4 Elderly		\$130,000	\$52,352	\$0	\$0
	AMP 5 Donovan Manor		\$20,000	\$184,906	\$0	\$0
	Non Dwelling					
	Structures		\$87,258	\$0	\$0	\$39,258
	Equipment		\$0	\$0	\$27,258	\$0
	Total		\$1,574,731	\$1,574,731	\$1,574,731	\$1,574,731

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011			Work Statement for Year: 3 FFY 2012		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	Operations	1	\$157,473	Operations	1	\$157,473
	Fees and Costs	3	\$90,000	Fees and Costs	3	\$90,000
	AMP 1 Park Holm			AMP 1 Park Holm		
	Building Renovations	4	\$1,000,000	Building Renovations	4	\$1,000,000
	AMP 2 Chapel Terrace			AMP 2 Chapel Terrace	9	\$90,000
	Exterior Painting	9	\$90,000	Boiler/HW Tank Replacement	18	\$20,000
	AMP 4 Elderly			AMP 4 Elderly		
	Earl Ave Exterior siding, painting	2	\$130,000	Dubois Street Kitchens	8	\$52,352
	AMP 5 Donovan Manor			AMP 5 Donovan Manor		
	Elevator Upgrade	2	\$20,000	Boiler/HW Upgrade	1	\$184,906
	Non-Dwelling Structures					
	Florence Gray Center Redecorate	1	\$87,258			
	Subtotal of Estimated Cost		\$1,574,731	Subtotal of Estimated Cost		\$1,574,731

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

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013			Work Statement for Year: 5 FFY 2014		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
<div>See Annual Statement</div>	Operations	1	\$154,473	Operations	1	\$157,473
	Fees and Costs	3	\$90,000	Fees and Costs	3	\$90,000
	AMP 1 Park Holm Building Renovations	4	\$1,000,000	AMP 1 Park Holm Building Renovations	4	\$1,000,000
	AMP 2 Chapel Terrace Kitchens and Baths	68	\$300,000	AMP 4 Elderly Coddington Street – Kitchens	36	\$288,000
	Non Dwelling Equipment Truck	1	\$27,258	Non Dwelling Structures 120B Hillside Building Improvements	1	\$39,258
		Subtotal of Estimated Cost		\$1,574,731	Subtotal of Estimated Cost	

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

Work Statement for Year 1 FFY	Work Statement for Year 2 FFY 2011		Work Statement for Year: 3 FFY 2012	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	C.O.C.C Operations	\$157,473	C.O.C.C. Operations	\$157,473
	A&E Architects, Engineering		A&E Architects, Engineering	
	AMP 1	\$70,300	AMP 1	\$70,300
	AMP 2	\$5400	AMP 2	\$4350
	AMP 4	\$7800	AMP 4	\$4350
	AMP 5	\$1500	AMP 5	\$11,000
	Non Dwelling Structures – Florence Gray Center	\$5000	Non Dwelling Structures	\$0
	Subtotal of Estimated Cost	\$247,473	Subtotal of Estimated Cost	\$247,473

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

[illegible]

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R00550210 Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$208,416			

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: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R00550210 Date of CFFP:			FFY of Grant:2010 FFY of Grant Approval: 2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$208,416			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		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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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

[illegible]

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

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

[illegible]

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

PHA Name: Housing Authority of The City of Newport

Reasons for Revised Target Dates ¹[illegible]

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R00550110 Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$337,634			

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R00550110 Date of CFFP:	FFY of Grant:2010 FFY of Grant Approval: 2010			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$337,634			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

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

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

[illegible]

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

² To be completed for the Performance and Evaluation Report.

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

[illegible]

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R005501-09 Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$356,035			

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: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R005501-09 Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$356,035			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

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

PHA Name: Housing Authority of The City of Newport

Reasons for Revised Target Dates ¹

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

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R005503-09 Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$200,167			

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
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Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R005503-09 Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$200,167			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

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

PHA Name: Housing Authority of The City of Newport

Reasons for Revised Target Dates ¹

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

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
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Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R0050108 Date of CFFP:			FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$612,916		\$612,916	\$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
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Expires 4/30/2011

Part I: Summary					
PHA Name: Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R0050108 Date of CFFP:	FFY of Grant:2008 FFY of Grant Approval: 2008			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$621,916		\$621,916	\$0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

[illegible]

² To be completed for the Performance and Evaluation Report.

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of The City of Newport					Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

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

U.S. Department of Housing and Urban Development
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Part I: Summary					
PHA Name: Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R0050107 Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 2007			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$417,398		\$417,398	\$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: Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R0050107 Date of CFFP:	FFY of Grant:2007 FFY of Grant Approval: 2007			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/2009 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$417,398		\$417,398	\$0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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² To be completed for the Performance and Evaluation Report.

[illegible]

² To be completed for the Performance and Evaluation Report.

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of The City of Newport					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

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

U.S. Department of Housing and Urban Development
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Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R0050106 Date of CFFP:			FFY of Grant: 2006 FFY of Grant Approval: 2006
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$322,396		\$322,396	\$193,421

¹ To be completed for the Performance and Evaluation Report.

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

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

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

U.S. Department of Housing and Urban Development
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Part I: Summary					
PHA Name: Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R0050106 Date of CFFP:	FFY of Grant:2006 FFY of Grant Approval: 2006			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$322,396		\$322,396	\$193,421
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

[illegible]

² To be completed for the Performance and Evaluation Report.

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PHA Name: Housing Authority of The City of Newport

Reasons for Revised Target Dates ¹[illegible]

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

U.S. Department of Housing and Urban Development
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Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R0050106 Date of CFFP:			FFY of Grant: 2006 FFY of Grant Approval: 2006
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$322,396		\$322,396	\$193,421

¹ To be completed for the Performance and Evaluation Report.

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

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
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Part I: Summary					
PHA Name: Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: RI143R0050106 Date of CFFP:	FFY of Grant:2006 FFY of Grant Approval: 2006			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$322,396		\$322,396	\$193,421
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

[illegible]

² To be completed for the Performance and Evaluation Report.

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

PHA Name: Housing Authority of The City of Newport

Reasons for Revised Target Dates ¹[illegible]

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

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

Part I: Summary					
PHA Name: The Housing Authority of the City of Newport		Grant Type and Number Capital Fund Program Grant No: RI43P00551-10 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$159,150	\$159,150	\$159,150	\$159,150
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$90,000	\$90,000	\$0	\$0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,210,000	\$1,210,000	\$1,000,000	\$109,327
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	\$115,581	\$115,581	\$0	\$0
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
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Part I: Summary					
PHA Name: The Housing Authority of the City of Newport	Grant Type and Number Capital Fund Program Grant No: RI43P00551-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2010 FFY of Grant Approval: 2010			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,574,731	\$1,574,731	\$1,159,150	\$268,477
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date 06/17/2010		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Newport			Grant Type and Number Capital Fund Program Grant No: RI43P00551-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Authority Wide	Operations	1406	1	\$159,150	\$159,150	\$159,150	\$159,150	
Fees & Costs	Architects/Construction Mgmt	1430	2	\$90,000	\$90,000	\$0	\$0	
AMP 1								
Park Holm	Building Renovations	1460	4	\$1,000,000	\$1,000,000	\$1,000,000	\$109,327	
AMP 4								
Elderly	Earl Avenue Apartment Improvements	1460	20	\$100,000	\$100,000	\$0	\$0	
	Painting, carpet, flooring							
	Coddington/Chapel - Hallway Redec.	1460	12	\$60,000	\$60,000	\$0	\$0	
AMP 5								
Donovan Manor	Common Area Redecorating	1460	6	\$50,000	\$50,000	\$0	\$0	
	Exercise/Fitness Center	1470	1	\$33,229	\$33,229	\$0	\$0	
	Parking lot paving and new curbing	1470	1	\$82,352	\$82,352	\$0	\$0	
	Total			\$1,574,731	\$1,574,731	\$1,159,150	\$268,477	

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

² To be completed for the Performance and Evaluation Report.

[illegible]

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: The Housing Authority of the City of Newport				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Operations	07/15/2012		07/15/2014		
Operatons	07/15/2012		07/15/2014		
AMP 1 Park holm	07/15/2012		07/15/2014		
AMP 4 Elderly	07/15/2012		07/15/2014		
AMP 5 Donovan	07/15/2012		07/15/2014		

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

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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: The Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: RI143P005501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$159,510	\$159,510	\$159,510	
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$90,000	\$90,000	\$90,000	\$15,830
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,299,852	\$1,299,852	\$1,299,852	\$713,014
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$42,500	\$42,500	\$15,000	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: the Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: RI143P005501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 2009			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,591,502	\$1,591,502	\$1,564,002	\$730,344
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: RI143P005501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Authority Wide	Operations	1406	1	\$159,150	\$159,150	\$159,150	\$0	In Progress
Fee's and Costs	Architect/Construction Mgt	1430	2	\$90,000	\$90,000	\$90,000	\$15,830	In Progress
AMP 1								
Park Holm	Site Improvements	1450	1	\$0	\$0	\$0	\$0	Not needed
	Building Renovations	1460	10	\$1,299,852	\$1,299,852	\$1,299,852	\$713,014	In Progress
RI00500001P								
Tonomy Hill	Site Improvements	1450	27	\$0	\$0	\$0	\$0	Not Needed
	Wind Feasibility Study	1499	1	\$42,500	\$42,500	\$15,000	\$1500.00	In Progress
Non Dwelling Structures								
Florence Gray Center	Fire Alarm	1470	1	\$0	\$0	\$0	\$0	Used Prior Years Funds

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

² To be completed for the Performance and Evaluation Report.

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of The City of Newport				Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Authority Wide	09/09/11		09/09/13		
Fee's and Costs	09/09/11		09/09/13		
AMP 1 Park holm	09/09/11		09/09/13		
RI005000001P					
Tonomy Hill	09/09/11		09/09/13		

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of The City of Newport					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: RI143P005501-08 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$151,525	\$151,525	\$151,525	\$151,525
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$198,200	\$198,200	\$198,200	\$150,376
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$774,644	\$776,467	\$744,901	\$641,144
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	\$230,000	\$228,177	\$228,177	\$228,177
13	1475 Non-dwelling Equipment	\$91,996	\$91,996	\$91,996	\$53,298
14	1485 Demolition	\$38,880	\$38,880	\$38,880	\$14,522
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$30,000	\$30,000	\$30,000	\$12,652

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: Housing Authority of The City of Newpor	Grant Type and Number Capital Fund Program Grant No: RI143P0055001-08 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2008 FFY of Grant Approval: 2008			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,515,245	\$1,515,245	\$1,483,679	\$1,251,694
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

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Part II: Supporting Pages								
PHA Name: The Housing Authority of The City of Newport			Grant Type and Number Capital Fund Program Grant No: RI143P0055001-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Authority Wide	Administration	1410	1	\$151,525	\$151,525	\$151,525	\$151,525	Completed
	Subtotal	1410		\$151,525	\$151,525	\$151,525	\$151,525	
Fee's and Costs	Architects/Clerk of The Works	1430	3	\$100,000	\$100,000	\$100,000	\$90,218	In Progress
	Park Holm&Construction Mgt	1430	1	\$65,000	\$65,000	\$65,000	\$26,958	In Progress
	Capital Needs Assesment	1430	8	\$33,200	\$33,200	\$33,200	\$33,200	Completed
	Subtotal	1430		\$198,200	\$198,200	\$198,200	\$150,376	In Progress
AMP 1								
Park Holm	Building Renovations	1460	2	\$601,144	\$601,144	\$601,144	\$601,144	Phase 1 Completed
Amp 4								
Elderly	Coddington/Chapel Door Replacement/Painting	1460		\$125,000	\$135,323	\$103,757	0	Under Contract
	Earl Avenue Exterior Painting	1460		\$0	\$0	\$0	\$0	Cancelled
AMP 5								
Donovan Manor	Electrical Switch Gear Repalcement	1460	1	\$40,000	\$31,500	\$31,500	\$31,500	Completed
	Thermopane Replacement	1460	30	\$8500	\$8500	\$8500	\$8500	Completed
	Subtotal	1460		\$774,644	\$776,467	\$744,901	\$641,144	

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² To be completed for the Performance and Evaluation Report.

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

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

Part II: Supporting Pages								
PHA Name: Housing Authority of The City of Newport			Grant Type and Number Capital Fund Program Grant No: RI143P0055001-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
RI005000001P								
Tonomy Hill	Demolition Phase 5 Fence	1485	27	\$8,880	\$8,880	\$8,880	\$8,880	Completed
	Home Ownership Activity							
	Remove Infrastructure Middeltown Abutters	1485	3	\$30,000	\$30,000	\$30,000	\$5,642	In Progress
	Subtotal	1485		\$38,880	\$38,880	\$38,880	\$14,522	
	Utilities/Closing Costs/Marketing/Etc	1499	7	\$30,000	\$30,000	\$30,000	\$12,652	In Progress/Budgeted
	Subtotal	1499		\$30,000	\$30,000	\$30,000	\$12,652	
Non Dwelling Structures								
Florence Gray Center	Fire Alarm/Sprinkler	1470	2	\$230,000	\$228,177	\$228,177	\$228,177	Completed
	Subtotal	1470		\$230,000	\$228,177	\$228,177	\$228,177	Completed
Non Dwelling Equip	Vehicles and Equipment	1475						
	Replace 2 Vans and 1 Dump Truck	1475	3	\$82,992	\$82,996	\$82,996	\$44,298	In Progress/Under Contract
	Plow Replacement/Snowblowers	1475	3	\$9,000	\$9,000	\$9,000	\$9,000	Completed
	Subtotal	1475		\$91,996	\$91,996	\$91,996	\$53,298	

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

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of The City of Newport				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	06/12/2010		06/12/2012		
Fee'a and Costs	06/12/2010		06/12/2012		
Amp 4 Elderly	06/12/2010		06/12/2012		
Amp 5 Donovan	06/12/2010		06/12/2012		
RI00500001P - Tonomy	06/12/2010		06/12/2012		
Non Dwelling Structures	06/12/2010		06/12/2012		
Amp 1 Park Holm	06/12/2010		06/12/2012		
Non Dwelling Equipment	06/12/2010		06/12/2012		

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of The City of Newport					Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport		Grant Type and Number Capital Fund Program Grant No: RI143P005501-07 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2007 FFY of Grant Approval: 2007
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$178,742	\$178,742	\$178,742	\$178,742
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$194,000	\$194,000	\$194,000	\$104,684
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$867,099	\$867,099	\$867,099	\$867,099
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition	\$547,581	\$547,581	\$547,581	\$395,720
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: RI143P005501-07 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2007 FFY of Grant Approval: 2007			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,787,422	\$1,787,422	\$1,787,422	\$1,546,245
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Housing Authority of Newport			Grant Type and Number Capital Fund Program Grant No: RI143P005501-07 CFFP (Yes/ No): No Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Authority Wide	Administrative Costs	1410	1	\$178,742	\$178,742	\$178,742	\$178,742	Completed
	Subtotal	1410	1	\$178,742	\$178,742	\$178,742	\$178,742	Completed
Fee's and Costs	Architect/Clerk of The Works	1430	1	\$194,000	\$194,000	\$194,000	\$104,684	In Progress
	Subtotal	1430	1	\$194,000	\$194,000	\$194,000	\$104,684	
RI005000001P								
Tonomy Hill Demo	Phase 5 Demolition	1485	27	\$547,581	\$547,581	\$547,581	\$395,720.	In Progress
	Subtotal	1485		\$547,581	\$547,581	\$547,581	\$395,720	
AMP 5								
Donovan Manor	Entrance Driveway	1460	2	\$717,351	\$717,351	\$717,351	\$717,351	Completed
	Underground Tank	1460	1	\$2,738	\$2,738	\$2,738	\$2,738	Completed
AMP1								
Park Holm	Renovations	1460	10	\$94,822	\$94,822	\$94,822	\$94,822	Completed
AMP 4								
Elderly Sites	Fire Alarm Deblois Street	1460	1	\$52,188	\$52,188	\$52,188	\$52,188	Completed
	Subtotal			\$867,099	\$867,099	\$867,099	\$867,099	

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

² To be completed for the Performance and Evaluation Report.

[illegible]

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of The City of Newport				Federal FFY of Grant: 2007	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Authority Wide	09/12/2009		09/12/2011		
Fee's and Costs	09/12/2009		09/12/2011		
Tonomy Hill	09/12/2009		09/12/2011		
Amp 5 Donovan Manor	09/12/2009		09/12/2011		
Amp 4 Elderly	09/12/2009		09/12/2011		
Amp 1 Park Holm	09/12/2009		09/12/2011		

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of The City of Newport					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

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

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

Part I: Summary					
PHA Name: Housing Authority of The City of Newport	Grant Type and Number Capital Fund Program Grant No: RI143P005501-06 Replacement Housing Factor Grant No: Date of CFFP:				FFY of Grant: 2006 FFY of Grant Approval: 2006
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: x Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$9887	\$9887	\$9887	\$9887
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$144,062	\$144,062	\$144,062	\$144,062
8	1440 Site Acquisition				
9	1450 Site Improvement	\$245,897	\$245,987	\$245,897	\$245,897
10	1460 Dwelling Structures	\$781,537	\$781,537	\$781,537	\$781,537
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	\$371,421	\$371,421	\$371,421	\$371,421
13	1475 Non-dwelling Equipment	\$25,827	\$25,827	\$25,827	\$25,827
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
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Part I: Summary					
PHA Name: Housing Authority of City of Newport		Grant Type and Number Capital Fund Program Grant No: RI143P005501-06 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2006 FFY of Grant Approval: 2006
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: x Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,578,631	\$1,578,631	\$1,578,631	\$1,578,631
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

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⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Housing Authority of The City of Newport			Grant Type and Number Capital Fund Program Grant No: RI143P005501-06 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Operations	Authority Wide	1406	1	\$9887	\$9887	\$9887	\$9887	Completed
Fee's and Costs	Architect/Clerk of the Works	1430	1	\$144,062	\$144,062	\$144,062	\$144,062	Completed
AMP 1								
Park Holm	Site/Work Sidewalks	1450	1	\$28,239	\$28,239	\$28,239	\$28,239	Completed
	Street Lighting	1450	1	\$20,000	\$20,000	\$20,000	\$20,000	Completed
AMP 2								
Chapel Terrace	Lanscaping	1450	1	\$25,000	\$25,000	\$25,000	\$25,000	Completed
AMP 4								
Edgar Court/Pond Ave	Storm Drain Betterment	1450	1	\$26,925	\$26,925	\$26,925	\$26,925	Completed
Earl Avenue	Sidewalks/Site Improvements	1450	1	\$118,733	\$118,733	\$118,733	\$118,733	Completed
	Site Lighting AMP Wide	1450	1	\$27,000	\$27,000	\$27,000	\$27,000	Completed
	Subtotal	1450		\$247,987	\$247,987	\$247,987	\$247,987	Completed

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Housing Authority of The City of Newport			Grant Type and Number Capital Fund Program Grant No: RI143P005501-06 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1								
Park Holm	Building Renovations - Phase 1	1460	1	\$78,166	\$78,166	\$78,166	\$78,166	Completed
	Siding Replacement	1460	1	\$429,297	\$429,297	\$429,297	\$429,297	Completed
AMP 4								
Edgar/Pond	Exterior Painting	1460	1	\$47,598	\$47,598	\$47,598	\$47,598	Completed
AMP 5								
Donovan Manor	Entrance Addition	1460	1	\$100,746	\$100,746	\$100,746	\$100,746	Completed
	Elevator Upgrade	1460	1	\$25,500	\$25,500	\$25,500	\$25,500	Completed
Amp 4								
Earl Ave	Emergency Generator	1460	1	\$87,739	\$87,739	\$87,739	\$87,739	Completed
	504/ADA Work	1460	1	\$12,500	\$12,500	\$12,500	\$12,500	Completed
	Subtotal	1460		\$781,537	\$781,537	\$781,537	\$731,537	Completed
Non-Dwelling Structures								
Admin Building	Admin Renovations	1470	1	\$41,617	\$41,617	\$41,617	\$41,617	Completed
	FGC Generator	1470	1	\$69,561	\$69,561	\$69,561	\$69,561	Completed
	Gray/Gallagher Renovations	1470	1	\$260,243	\$260,243	\$260,243	\$260,243	Completed
	Subtotal	1470	1	\$371,421	\$371,421	\$371,421	\$371,421	
Non-Dwelling Equip								
	Vehicle Purchase	1475	1	\$17,327	\$17,327	\$17,327	\$17,327	Completed
	Computer Database Upgrade	1475	1	\$8,500	\$8,500	\$8,500	\$8,500	Completed
	Subtotal	1475		\$25,827	\$25,827	\$25,827	\$25,827	Completed

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² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of the City of Newport					Federal FFY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 1 Park Holm	07/18/08		07/18/10		
AMP 2 Chapel Terrace	07/18/08		07/18/10		
AMP 4 Pond/Edgar	07/18/08		07/18/10		
Amp 5 Donovan	07/18/08		07/18/10		
AMP 4 Earl	07/18/08		07/18/10		
HA Wide					
Operations	07/18/08		07/18/10		
Fee's and Costs	07/18/08		07/18/10		
Non Dwelling Struc/Equip	07/18/08		07/18/10		

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

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