PHA	\ Cer	tificati	ons of	Comp	liance
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PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the _____5-Year and/or \times Annual PHA Plan for the PHA fiscal year beginning 04/01/2012 _____, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

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

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

Greene	Metropolitan	Housing	Authority

PHA Name

OH022

PHA Number/HA Code

 5-Year PHA Plan for Fiscal Years 20
 - 20

 x
 Annual PHA Plan for Fiscal Years 20
 - 20

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

Name of Authorized Official	Title
Brenda Smallwood	Executive Director
Signature Brenda Small wood	Date 1/12/2012

Applicant Name

GREENE METROPOLITAN HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

PUBLIC HOUSING AND HOUSING CHOICE VOUCHERS

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SEE ATTACHED

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

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

Name of Authorized Official	Title
	THE
BRENDA SMALLWOOD //	EXECUTIVE DIRECTOR
Signature	Date
× Depuda Malla	1/12/2012

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing and Urban Development Office o

OMB Approval No. 2577-0157 (Exp. 01/31/2014)

of Public and Indian Housing)	ţ		ł		1	l,	Ì	l)	ļ	ļ	l	3		ć	3	i		l	С	l	I	ľ	1	C	1	ł	2	3	ľ	1	ł		l	Э	l	1	Ş	5	Ħ	n	l	٦
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Applicant Name **GREENE METROPOLITAN HOUSING AUTHORITY** Program/Activity Receiving Federal Grant Funding PUBLIC HOUSING AND HOUSING CHOICE VOUCHERS The undersigned certifies, to the best of his or her knowledge and belief, that:

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

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

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

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

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

Name of Authorized Official	Title
BRENDA SMALLWOOD	EXECUTIVE DIRECTOR
Brenda Malladord	Dale (mm/dd/yyyy) 1/12/2012

Previous edition is obsolete form HUD 50071 (3/98)

Complete this	Disclosure of L form to disclose lobby (See reverse for pu	ing activities pur	suant to 31 U.S.C. 1352
 Type of Federal Action: a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance 	2. Status of Fed a. bid/of b b. initia c. post-a	fer/application 11 award	3. Report Type: a. initial filing _ab. material change For material change only: Yearquarter Date of last report
 Name and Address of Reporting X_Prime Subawarde Tier, Greene Metropolitan Housing A 538 North Detroit Street, Xenia 	e if Known: Authority		ng Entity in No. 4 is Subawardee, e and Address of Prime:
Congressional District , <i>if known</i> 6. Federal Department/Agency: US Dept. of Housing and Urban Dev Public and Indian Housing 451 7th Street S.W., Washington, DC 20410		7. Federal Pr	ional District, <i>if known</i> : rogram Name/Description: Public Housing r, <i>if applicable</i> : <u>14–87</u>
8. Federal Action Number, if know	<i>יוו:</i>	9. Award An S	nount, if known:
10. a. Name and Address of Lobbyin (if individual, last name, first no		different from N	Performing Services (including address if No. 10a) irst name, MI):
11. Information requested through this title 31 U.S.C. section 1352. This disclos activities is a material representation of reliance was placed by the tier above we was made or entered into. This disclosur pursuant to 31 U.S.C. 1352. This inform to the Congress semi-annually and will inspection. Any person who fails to file the disclosure shall be subject to a civil pens \$10,000 and not more than \$100,000 for	sure of lobbying fact upon which ten this transaction re is required tation will be reported be available for public the required alty of not less than	Signature: Print Name: Title: Executi Telephone No.	
Federal Use Only	:		Local Reproduction - LLL (Rev. 7-97)

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11.0 (f) Resident Advisory Board (RAB) comments.

Greene Metropolitan Housing Authority developed the FY 2012 Agency Plan in full cooperation with the Resident Advisory Board (RAB), which consists of representatives from public housing and the Housing Choice Voucher Program.

The Agency Plan was reviewed and discussed during the November 8, 2011 Resident Advisory Board meeting. GMHA Staff Jessica Carter reviewed the plan, highlighting the new format, plan updates, and advising residents that the plan was located at each public housing multi-unit development and at public libraries throughout Greene County.

One resident proposed that GMHA implement an incentive programs for tenants that are following the rules such as paying their rent on time and/ or keeping their house clean. This suggestion was taken under advisement.

There were no questions and / or challenges to the 2012 Agency Plan.

CHALLENGED ELEMENTS

No elements of the Annual and Five Year Plan were challenged at the resident meetings, community meetings, or at the public hearing, which was held on Thursday, December 8th, 2011 at 2:00pm.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and	Capital Fund Financing Program
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U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

					Expires 4/30/2011	
Ford I:	Part I: Summary					
FIIA Nanc:	Nauce: Greene Aletropolituu Housing Authority	Grant Type and Number CFP Grant No: OH10P0225011 Date of CFFP:		RHF Grant Not	FFV of Grant: 2011 FFV of Grant Approval:	shat:
	Type of Grant Colginal Annual Statement CReserve for Disasters/Emergencies		Revised Annual Statement (Revision No.: Final Performance and Evaluation Report	vision No.: Part (Second	11/2/11/2011	
1		Total Estimated Cost			Total Actual Cost	
Line	Summary by Development Account	Original	Revised ²	Oblignted	Expended	
	Total non-CFP Funds	\$0.00	\$0.00	-20,00		\$0.00
5	1406 Oncrations (may not exceed 20% of line 20) ¹	\$49,438.00	S0.00			50.00
5	1408 Managentent Improventents	50.00	\$0.00			\$0.00
-	1410 Administration (may not exceed 10% of line 20)	\$50,900.00	20.00			\$0.00
5	1411 Audit	\$0.00	\$0.00		1000	\$0.00
9	1415 Liquidated Datages	S0.00	00'US	S0.00		\$0.00
-	1430 Fees and Costs	\$0.00	\$0.00			\$0.00
8	1140 Sile Acquisition	S0.00	50.00	20.00		\$0.00
6	1450 Site Inprovement	\$11,000.00	50.00			\$3,175.00
01	1460 Dwelling Structures	\$396,438.00	S0.00	\$35,825.00		\$3,241.29
-	1465.1 Dwelling Equinatent - Nonexneadable	\$0.00	20.02		1	\$0.00
12	1470 Nondwelling Structures	50.00	\$0.00			\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00			\$0.00
14	1485 Demolition	\$0.00	S0.00			50.00
15	1492 Moving to Work Demonstratoin	\$0.00	\$0.00	50.00	1	\$0.00
16	1495.1 Relocation Costs	S0.00	\$0.00		1	\$0.00
17	1499 Development Activities ¹	20.00	S0.00		2.5.2.72	20.00
18a	1501 Collateralization at Debt Service paid by the PHA	\$0.00	S0.00	\$0.00	(\$0.00
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	50.00		\$0.00
16	1502 Contingency (may not exceed 8% of line 20)	\$0.00	20.00			\$0.00
20	Amount of Annual Grant: (sum of lines 2-19)	S507,776.00	50.00	S43,	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	56,416.29
21	Amount of line 20 Related to LBP Activities:	50.00	\$0.00	50.00		\$0.00
22	Amount of line 20 Related to Section 504 Activities	50.00	50.00		1	50.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	20.00			\$0.00
24	Amount of line 20 Related to Security Afard Costs	\$0.00	\$0.00)	\$0.00
25	Amount of Line 20 Related to Energy \mathcal{L} onservation Mensures	\$0.00]	50.00	20.00		\$0.00
Signn	Signature of Executive Director	Date: 2-2 6 -13 Signature	Signature of Public Rousing Director	Director	Date:	
	' To be campleted for the Performance and Evaluation Report					

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² To be completed for the Performance and Evaluation Report or a Revised Annual Statement ³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary

Page 1 of 1

form HUD-50075.1 (4/2008)

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Baul H. Cumueline Bauer								Expires 4/30/2011
PHA Name: Green	Greene Metropolitan Housing Authority	Grant Type and Number CFP Grant Nu.: RHF Grant Nu.:		01110F02250111	CFFP (Ycs/No);	Federal FFV of Grauts	2011	
Development Number	Į	Development		Total Estimated Cast	unteil Cast	Tatal Actual Cast		Contract of Workly
Nancif HA-wide Activities	Graeral Description of Major Wark Categories	Account Na.	Quantuy	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA WIDE	OPERATIONS - COCC	1406		\$49,438.00	\$0.00	\$0.00	so.00	
	TECHNICAL SALARIES	1410		\$50,900.00	\$0.00	20.00	\$0.00	
OH10P02200-181	LANDSCAPING	1450		\$2,000.00	\$0.00	20.02	20.00	
	REPLACE ROOFS	1460	18	seo,000.00	\$0.00	23,000.00	\$0.00 🛞	
	DEAD BOLT LOCKS	1460	33	\$5,000.00	20.02	20.00	\$0.00	
1	REPLACE FURNACES	1460	B	\$12,000.00	so.oo	\$0.00	\$0.00	
	BATHROOM REHAB	1460		\$5,000.00	\$0.00	\$0.00	30.00 S	
OH10P02200-182	EXTERIOR CONCRETE	1450		\$2,000.00	so.oo	\$0.00	so.oo] 💮	
	MINDOWS	1460	ß	\$12,000.00	20.02	\$0.00	\$0.00	
	REPLACE ROOFS	1460	9	\$25,000.00	20.00	\$0.00	\$0.00	
	SEWER LINES	1450	2	\$7,000.00	20'00	\$7,175.00	\$3,175.00	
	REHAB UNITS	1460	2	\$45,000.00	\$0.00	\$0.00	\$0.00	
	REMOVE CHIMNEYS	1460	e	\$13,938.00	\$0.00	\$0.00	\$0.00	
	REPLACE FLOORING	1460	3	\$10,000.00	20.00	\$0.00	\$0.00	
	PATIO DOORS	1460	7	\$6,500.00	\$0,00	\$0.00	\$0.00	
OH10P02200-183	REPLACE AC UNITS	1460	10	\$32,000.00	\$0.00	\$0.00	so.oo]	
	WATER HEATERS	1460	3	\$5,000.00	\$0.00	\$0.00	\$0.00	
	REHAB UNITS	1460	2	\$60,000.00	\$0.00	\$32,825.00	\$3,241.29	
	REPLACE FURNACES	1460	4	\$10,000.00	20.02	\$0.00	\$0.00	
	REPLACE ROOFING	1460	12	\$85,000.00	\$0.00	\$0.00	\$0.00 (
	BATHROOM REHAB	1460	° 2	\$10,000.00	\$0.00	\$0.03	\$0.00	
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Part II: Sunnording Pages				C L				

Sumorting Pages	Capital Fund Financing Program	Capital Fund Program, Capital Fund Program Replacement Hausing Factor and Capital Fund Financing Program
Part II: Supporting Pages		•

of Heusing and Uthan Development Office of Public and Indian Housing Office 1, 2000 No. 2377-0226 Expires 42002011					Status of World		
U.S. Department of Housing and Urban Development Office of Public and Indian Housing Office of Public and Indian Housing OMB No. 3577-0226 Expires 4/20/2011			1102	Total Actual Cost	Fonds Expended ¹	\$0.00 \$0.00	56.416.29
U.S. D.		Federal FFY of Grant:		Total Ac	Fands Obligated ¹	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	00'000'EFS
			CFFP (Ycs/No):	nated Cast	Revîscil ¹	\$0,00	50.00
			011101/02250111	Tnini Estimated Cast	Origiaal	50.00	S507,776.00
			NHO		Quantity		
		Grant Type and Number	CFP Grant No.: RHF Grant No.:		Account No.		
Amual Statement/Performance and Evaluation Report Cupital Fund Program, Capital Fund Program Replacement Hausing Factor and Capital Fund Financing Program			ış Autlırtiy		General Description of Major Work Categories		
mance and Evaluation I Apital Fund Program Ri Fogram	102		Greene Metrapolitan Itausing Authority		General Description		
Annual Statement/Perfarmance and Evaluation Report Cupital Fund Program, Capital Fund Program Replace Capital Fund Financing Program	Part II: Supporting Pages	PHA Name:	Green	Development Number/	Nume/PHA-wide Activities		

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 II: Supporting Pages

Page 2 of 2

form HUD-50076.1 (4/2008)

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

	:0	Work Statement for Year 5 FFY 2016		\$297,000		\$123,500				\$110,000						
	⊠Original 5-Year Plan ■ Revision No:															
	⊠Original 5-Year	Work Statement for Year 4 FFY 2015		\$439,800		895,000				\$110,000						
	.ocality (City/County & State) Xenia/Greene County, Ohio	Work Statement for Year 3 FFY 2014		÷ \$405,000		\$52,000				\$110,000						
	Locality (City/ Xenia/Greene	Work Statement for Year 2 FFY 2013		\$418,0 00		\$54,000				\$110,000						
	ropolitan Housing	Work Statement for Year 1	FFY	Activity Structured			<u>Ullillillillillilli</u>	VIIIIIIIIIIIIIIIIII	<u>Undernann</u>		ANNIN MUNICIPALITA	ANNIN MUNICUM				
Part I: Summary	PHA Name/Number Greene Metropolitan Housing Authority - OH022	Development Number and Name		Physical Improvements Subtotal	Management Improvements	PHA-Wide Non-dwelling	Structures and Equipment	Administration	Other	Operations	Demolition	Development	Capital Fund Financing – Deht Service	Total CFP Funds	Total Non-CFP Funds	Grand Total
Part	PHA Autho	A.		mi	ن ن	D		ய்	н.	U	H.	I.		¥	Ŀ	Ŵ.

Page 1 of 6

form HUD-50075.2 (4/2008)

Expires 4/30/20011		Revision No:	Work Statement for Year 5 FFY									form HUD-50075.2 (4/2008)	
		⊠Original 5-Year Plan	Work Statement for Year 4 FFY										
		City/county & State) Xenia, Oh	Work Statement for Year 3 FFY									Page 2 of 6	
		Locality (City/county & State) Xenia, Oh	Work Statement for Year 2 FFY										
	ation)	ropolitan Housing	Work Statement for	Year 1 FFY	Skateneat								
	Part I: Summary (Continuation)	PHA Name/Number-Greene Mettopolitan Housing Authority OH022	Development Number and Name										
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Office of Public and Indian Housing Expires 4/30/20011 U.S. Department of Housing and Urban Development

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			Estimated Cost					\$12,000	\$30,000	2000 SS 3000	\$30,000	83,000 BEE	\$15,000			\$15,000	\$6,000	\$70,000	\$5,000	\$40,000	\$15,000	\$30,000	\$20,000 million	
	Work Statement for Year: 2014	FFY States of the	Quantity					. 14 1. 11	5			2 12 12 12 12	5 (1994) (1994) (1994)				5	2	4	10	5	4	5	
	Work State		Development	Number/Name	General Description of	Major Work Categories	Amp 181	Air Conditioning	Bath Rehab	Tree Trimming	Rehab Unit	Water Heaters	Flooring		AMP 182	Tree Trimming	Water Heaters	Rehab Units	Patio Doors	Roofing	Flooring	Windows	Cabinets	
ment(s)			Estimated Cost					\$5,000	\$15,000	\$3,000	\$30,000	\$4,500	\$85,000	\$15,000			\$5,000	\$15,000	\$60,000	\$15,000	\$28,000	\$15,000	\$5,000	
al Needs Work State	Work Statement for Year 2013	FFY	Quantity		•				4	V rumë	2	2	19	5				3	2	4	5	5 ,	2	
Part II: Supporting Pages – Physical Needs Work State	Work State		Development	Number/Name	General Description of	Major Work Categories	Amp 181	Tree Trimming	Exterior Concrete	Sewer Lines	Rehab Unit	Furnaces	Cabinets	Flooring		182	Tree Trimming	Fumaces	Rehab Unit	Exterior Concrete	Roofing	Flooring	Electrical Upgrade	
Part II: Supp	Work	Statement for	Year 1 FFY				11118601111	[]]/Kakaday/]]]	///Statendont///															LALLA LANGE LALLA LALLA

\$6,000 \$20,000 \$15,000

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Subtotal of Estimated Cost

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Sewer Lines **Bath Rehab**

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Sewer Line Bath Rehab

Cabinets

Siding

\$10,000

continued

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Subtotal of Estimated Cost

Page 3 of 6

form HUD-50075.2 (4/2008)

of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/20011			Estimated Cost		22.2.2.000 AUX/01	5 (200 (1993) (1993) (1993) (1993)	\$10,000	\$8,000	\$5,000	(2.20,000 (2.20) (2.20)	AS \$50,000 AREAD	<pre>cm_c\$6,000 - Marging to</pre>	\$5,000 Barrier			\$110,000						10mm HUD-500/5.2 (4/2008)
U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/20011		t for Year: 2014	Quantity			2 .	4	2	5	5	2	2	2								Subtotal of Estimated Cost	
		Work Statement for Year: FFY 20	Development Number/Name General Description of Maior Work Categories	Amp 183	Tree Trimming	Flooring	Air Conditioning	Bath Rehab	Gutters	Cabinets	Rehab Units	Sewer Lines	Exterior Concrete		PHA Wide	Operations	Administration				Subtotal	
	ent(s)		Estimated Cost		\$5,000	\$30,000	\$5,000	\$20,000	\$3,500	\$17,000	\$40,000			\$110,000								Page 4 of 6
ar Action Plan	Needs Work Statem	ent for Year 2013 2013	Quantity			10	3	4	4	5								-			Subtotal of Estimated Cost \$	
Capital Fund Program—Five-Year Action Plan	Part II: Supporting Pages – Physical Needs Work Stateme	Work Statement for Year FFY 2013	Development Number/Name General Description of Maior Work Categories	Amp 183	Tree Trimming	Flooring	Furnaces	Roofing	Overhead Doors	Cabinets	Rehab Unit		PHA Wide	Operations	Administration				-		Subtota	
Capital J	Part II: Suppo	Work Statement for	I		1111 Kolder 111	///Stationalender///																

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

Part III: Su	Part III: Supporting Pages – Management Needs Work Statem	c Statement(s)			
Work	Work Statement for Year		Work Statement for Year:		
Statement for			FFY 2016		
Year I FFY	Development Number/Nam	Estimated Cost	Development Number/Name	Estimated Cost	
	General Description of Major Work Categories		General Description of Major Work Categories		۰.
[[[[]]][][][][][][][][][][][][][][][][][Amp 181		Amp 181		
	Bath Rehab	\$4,000	Tree Trimming	\$5,000	
[[[Statebald]]	Boiler	\$5,000	Flooring	\$24,000	
	Rehab Unit	\$30,000	Exterior Concrete	\$15,000	
	Exterior Concrete	\$5,000	Landscaping	\$5,000	
	Furnaces	\$50,000	Siding & Soffit	\$15,000	
	Flooring	\$15,000	Site Drainage	\$6,000	
	Overhead Doors	\$800	Sewer Line	\$5,000	
	Roofing	\$60,000			
	Windows	\$30,000	AMP 182		• •
			Pave Driveways	\$25,000	
	AMP 182		Rehab Units	\$80,000	
	Appliances	\$16,000	Flooring	\$25,000	
	Boiler	\$50,000	Exterior Concrete	\$10,000	
	Cabinets	\$15,000	Furnaces	\$9,000	
CIIIIIIIIIIIIII	Exterior Concrete	\$5,000	Electrical Upgrade	\$4,500	
	Flooring	\$16,000	Tree Trimming	\$15,000	
All IIIIII.	Furnaces	\$6,000	Sewer Lines	\$8,000	
	Gutter & Spouting	\$6,000	Water Heaters	\$5,000	
	Overhead Doors	\$2,400			
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost		1 : - <i>1</i> ,

Page 5 of 6

form HUD-50075.2 (4/2008)

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			Estimated Cost		\$40,000	\$70,000	\$12,000	\$25,000	\$8,000	\$4,500	\$4,500			\$110,000		and the second								
	Work Statement for Year:	FFY 2016	Development Number/Name General Description of Major Work Categories	AMP 183	Appliances	Rehab Units	Flooring	Exterior Concrete	Roofing	Sewer Line	Electrical Upgrade		PHW Wide	Operations	Administration									Subtotal of Estimated Cost
k Statement(s)			Estimated Cost	\$6,000	\$15,000	\$60,000	\$4,000			\$40,000	\$5,000	\$12,000	\$12,000	\$1,600	\$3,000	\$8,000	\$30,000	\$6,000	\$6,000	\$4,000		\$110,000		\$647,000
Part III: Supporting Pages – Management Needs Work		FFY 2015	Development Number/Name General Description of Major Work Categories	Landscaping	Bath Rehab	Rehab Units	Sewer Lines		AMP 183	Air Conditioning	Exterior Concrete	Flooring	Furnaces	Overhead Doors	Landscaping	Bath Rehab	Unit Rehab	Roofing	Siding & Soffit	Water Heaters	PHA Wide	Operations	Administration	Subtotal of Estimated Cost
Part III: Supp	Work	Statement for	Year I FFY			///Secondon///																		

Page 6 of 6

form HUD-50075.2 (4/2008)

Violence Against Women Act Report HCV

A goal of GMHA's Section 8 Department is to fully act in accordance with the Violence against Women Act (VAWA). It is the Section 8 Department's objective to work with current tenants to prevent offenses covered by VAWA to the fullest extent.

The GMHA's Section 8 Department will support victims of domestic violence, dating violence, sexual assault, or stalking. The Section 8 Department will refer victims of violence to the Greene County Family Violence Prevention Center and other applicable resources. The Section 8 Department may also refer to the court system for a TPO/CPO.

Referrals will be placed to area agencies to assist with any financial hardships with maintaining their Section 8 housing unit. The Section 8 Department will work to ensure that victims of violence maintain their Housing Choice Voucher.

The GMHA's Section 8 Department provides information and referral to current tenants that exhibit signs of domestic violence, dating violence, sexual assault, and stalking, to enhance victim safety in assisted families. The Section 8 Department also will link victims with area police departments to ensure continued safety and provide housing transfers as needed to relocate the family.

GMHA provides information regarding tenant rights under VAWA. This information is provided to all tenants upon move in.

Violence Against Women Act Report Public Housing

A goal of GMHA's Public Housing Department is to fully act in accordance with the Violence against Women Act (VAWA). It is the Public Housing Department's objective to work with current tenants to prevent offenses covered by VAWA to the fullest extent.

The GMHA's Public Housing Department will support victims of domestic violence, dating violence, sexual assault, or stalking. The Public Housing Department will refer victims of violence to the Greene County Family Violence Prevention Center and other applicable resources. The Public Housing Department may also refer to the court system for a TPO/CPO.

The GMHA's Public Housing Department will provide a referral to child and adult victims of domestic violence, dating violence, sexual assault, or stalking to GMHA's Project TOTAL program to ensure that housing is maintained. Also referrals will be placed to area agencies to assist with any financial hardships with maintaining the public housing unit. The Public Housing Department will work to ensure that victims of violence maintain public housing.

The GMHA's Public Housing Department provides information and referral to current tenants that exhibit signs of domestic violence, dating violence, sexual assault, and stalking, to enhance victim safety in assisted families. The Public Housing Department also will link victims with area police departments to ensure continued safety and provide housing transfers as needed to relocate the family.

The GMHA's provides information regarding tenant rights under VAWA. This information is provided to all tenants upon move in.

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

-	1				LINZ // CALIFORNIA AV31// ZVII	5
	David To Conservation				「「「「「「「「「「「「「「「」」」」」」	
PILA Name:	- 201111111111	Grant Type and Number			FFY of Grant: [201] The second s	
	Greene Metropolitan Housing Authority	CFP Grant No: Date of CFFP:	CFP Grant No: OH10P02250109 RH Date of CFFP:	RHF Grant No:	FFY of Grant Approval:	
						Τ
	Type of Grant Original Annual Statement Diservention Deacht Fording:		J Revised Annual Statement (Revision No.: Final Performance and Evaluation Report	2)	12/31/2011	
	בנוחוזופוורב מוח רא	Total Estin	Fotal Estimated Cost		Total Actual Cost	
Line	Summary by Development Account	Original	Revised ²	Obligated	Expended	Ì
_	Total non-CFP Funds	20.00		54.00 SO.00		S0.00
	1406 Onerations (may not exceed 20% of line 20) ²	\$45,988.00	\$29,397.63	\$29,397.63		
	1408 Management Improvements	\$64,000.00	S64,000.00	S64,000.00		6.60
-	1410 Administration (may not exceed 10% of line 20)	\$58,509.00	\$58,5	\$58,509.00	\$2X	00.6
5	4 Audit	\$0.09	S0.00	20.00		00 00
9	1415 Liquidated Damages	50.00		\$0.00		20.01
7	1430 Fees and Costs	\$0.00		\$0.00		20.00
	1440 Site Acouisition	\$0.00		\$0.00		\$0.00
	1.4.50 Site Instructored	S53,500.00	\$54,708.16	\$54,708.16)8.16
	1460 Dwrfline Statchres	\$360,100.00	\$378,482.21	\$378,482,21	5365,	5.05
-	1465 1 Dwelfine Equinarent - Naexpendable	50.00		\$0.00		\$0.00
: [1470 Nondwelling Structures	\$3,000.00		\$0.00		\$0.00
: [1475 Nondwelline Equipment	20.00		50,00		20.00
1	ld85 Demulition	20.00	20.00	S0.00		20.00
- 2	1492 Movine to Work Demonstratoin	00'0S		\$0.00		\$0.00
91	1495.1 Relocation Costs	\$0.00		\$0.00		50.00
-	1.100 Development Åeftivities ⁴	\$0.00		S0.00		50.00
181	1501 Collateralization or Debt Service paid by the PHA	S0.00	00°0\$	S0.00		20.8
181	9000 Collateralization or Debt Service paid Via System of Direct Payment	. \$0.00		\$0.00		50.00
6	1502 Contineercy (may not exceed 8% of line 20)	20.02	\$0.00	\$0.00		\$0,00
2	A mount of Augual Grant: (sum of lines 2-19)	S585,097.00	S585,097.00	S585,097.00	52714	36.50
-	Amount of line 20 Related to LRP Activities:	50.00	\$0.00	S0.00	1 × × 1	S0.00
15	Amount of line 70 Related to Section 504 Activities	\$0.00		\$0.00		20.00
12	Amount of line 20 Related to Security - Soft Costs	\$0.00		\$0.00		\$0.00
172	Ammat of line 20 Related to Security - Hard Costs	\$0.00		\$0.00		\$0.00
25	Annunt of Line 20 Related to Herry Conservation Measures	50.00	S0.00	\$0,00		20.00
Signat	Signature of Executive Director	0102/2/2	2/2/2010 Signature of Public Housing Director	ectar	Date:	
2	A walleto	1- 1m			Construction of the state of th	
∱						i T S

' To be completed for the Performance and Evaluation Report

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for aperations. ⁴ RHF funds shall be included here.

Part I: Summary

form HUD-50075.1 (4/2008)

Ectoral FFY of Grants	(Yes/Na):
OMB No. 2577-0 Expires 4/30/2	
Uthan Developing and Uthan Developing	

Interfacient Type and Muniter CFT Grant No.: RHF Grant No. Description of Atajur Work Categories NT INTTATIVE LABOR 1406 NT JOB TRAINING 1408 DEVELOPMENT 1408 FER SOFTWARE 1408 DEVELOPMENT 1408 DEVELOPMENT 1410 PRODORS 1410 RIATOROM LIGHTING 1460 DE DOORS 1460 OR DOORS 1460 OR CONCRETE 1460 MITY ROOM LIGHTING 1460 MITY ROOM LIGHTING 1460 NG 1450 NG 1460 NG 1460 NG 1460 <th>רמחומו רשוים בחוומיניון בוסצומות</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>The second s</th>	רמחומו רשוים בחוומיניון בוסצומות								The second s
Control Control Table Carpet Younds <	Part 11: Supporting 1	វិពម្មក្មន					And the second s		
Total Lettineted Cont Total Attend Cont Total Attend Cont Total Attend Cont Cherenal Description of Atajore Veck Categories Developmenti Quenti Yio, Total Attend Cont Emands Emands Cherenal Description of Atajore Veck Categories Hondi Total Attend Cont Total Attend Cont Emands		sec Metropolitoa Housing Authority	Grant Type and Naudicr CFP Grant No.: RHF Grant No.:	101110			cderal FFY of Grant:	Z UUD	
Concert Decription Analyse Word, Congration Account of Major Material Account of Major	Orectonical Number	1444			Total Estim	interl Cost	Total Actu	nıl Cost	
Internation 1406 1406 545,000 523,3763 523,3763 553,3763 573,3263 5	Deventionen vann Name/PHA-wide Activities			- StimenC	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	Status ul World
IESDENT INITATIVE LABOR 1406 1406 544,000.00 565,191.63 556,191.63 556,191.63 556,191.63 556,191.63 556,191.63 556,191.63 556,191.63 556,191.63 556,191.63 556,191.63 556,191.63 556,121 556,121 556,121 556,121 556,121 556,121 556,121 556,121 556,121 556,121 556,121 555,121 552,141 552,141 552,141 552,141 552,141 552,141 552,141 552,141 552,141 552,142 552,141 552,141 552,141 552,141 552,141 552,141 552,141 552,141 552,161 551,151 <th< td=""><td>PHA WIDE</td><td>OPERATIONS - COCC</td><td>1406</td><td></td><td>\$45,988.00</td><td>\$29,397.63</td><td>\$29,397.63</td><td>\$29,397.63</td><td></td></th<>	PHA WIDE	OPERATIONS - COCC	1406		\$45,988.00	\$29,397.63	\$29,397.63	\$29,397.63	
RESIDENT JOB TRAINIG 1406 7,023,30 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,023,00 57,00,00 57,00,00		RESIDENT INITIATIVE LABOR	1408		\$44,000.00	\$56,191.63	\$56,191.63	\$55,808.29	IN PROCESS
STAFF DEVELOPMENT 1406 S10,000,00 S55.12 S655.12 S655.12 COMPUTER SOFTWARE 1406 \$1400 \$10,000,00 \$143.16 \$143.06 \$143.06 \$143.06 \$143.06 \$143.06 \$143.06 \$143.06 \$144.0 \$1400 \$15,427.62 \$15,42		RESIDENT JOB TRAINING	1408		20.02	\$7,029.39	\$7,029.39	\$7,029.39	complete
COMPUTER SOFTWARE 1400 \$10,000.00 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,3.66 \$14,0.6 \$14,0 \$26,000.00 \$24,04.47 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.477 \$22,40.070 \$22,40.070 \$20,00 \$22,40.070 \$20,00 \$21,40.0765 \$21,40.0765 \$21,40.0765 \$21,40.0766 \$21,41.0766 \$2		STAFF DEVELOPMENT	1408		\$10,000.00	S635.12	\$635.12	\$635.12	complete
NON TECH SALARIES 1410 50.00 \$19,036.61 \$19,036.61 \$19,036.61 \$19,036.61 \$19,036.61 \$19,036.61 \$19,036.61 \$19,036.61 \$19,036.61 \$10,017.51 \$24,044.77 \$24,001.07 \$24,001.07 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$20,001 \$20,001 \$20,001 \$21,001.06 \$20,001 \$20,001 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 \$21,001.06 <t< td=""><td></td><td>COMPUTER SOFTWARE</td><td>1408</td><td></td><td>\$10,000.00</td><td>\$143.86</td><td>\$143.86</td><td>\$143.86</td><td>complete</td></t<>		COMPUTER SOFTWARE	1408		\$10,000.00	\$143.86	\$143.86	\$143.86	complete
TECHNICAL SALARIES 1410 \$58,600.00 \$24,04.77 \$24,00.00 \$51,200.00		NON TECH SALARIES	1410		\$0.00	\$19,036.61	\$19,036.61	\$19,036.61	complete
ADM-EMPLOYCE BENEFITS 1410 S0.00 \$15,427.62 \$15,427.62 \$15,427.62 \$20.00 EXTERIOR DOORS 1460 8 \$5,000.00 \$0.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$0.00 FURNAACES 1460 14 \$1 \$5,000.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$0.00 ROOFS 1460 14 \$5,000.00 \$1,4007.65 \$1,407 \$1,407 <td></td> <td>TECHNICAL SALARIES</td> <td>1410</td> <td></td> <td>\$58,509.00</td> <td>\$24,044.77</td> <td>\$24,044.77</td> <td>\$24,044.77</td> <td>complete</td>		TECHNICAL SALARIES	1410		\$58,509.00	\$24,044.77	\$24,044.77	\$24,044.77	complete
EXTERIOR DOCRS 1460 8 55,00.00 50.00 50.00 FURAACES 1460 50.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1,200.00 \$1,200.00 \$0.00 <td></td> <td>ADM-EMPLOYEE BENEFITS</td> <td>1410</td> <td></td> <td>\$0.00</td> <td>\$15,427.62</td> <td>\$15,427,62</td> <td>\$15,427.62</td> <td>complete a second</td>		ADM-EMPLOYEE BENEFITS	1410		\$0.00	\$15,427.62	\$15,427,62	\$15,427.62	complete a second
FURNACES 1460 7100 \$1,200.00 \$2,1,200.00	H10P02200-181	T	1460	8	\$5,000.00	\$0.00	\$0.00	\$0.00	
RODFS 1460 1460 80.00 514,007.65 510,000 50,000		T	1460		20.02	\$1,200.00	\$1,200.00	\$1,200.00	
Community Room LightTing 1470 1 S3,000.00 \$0.00 \$0.00 \$0.00 WINDOWS 1460 4 \$5,000.00 \$0.00 \$0.00 \$0.00 MINDOWS 1460 14 \$5,000.00 \$0.00 \$0.00 \$0.00 CABINETS 1460 14 \$5,000.00 \$7,167.64 \$7,167.64 \$0.00 FLOORING 1460 2 \$4,000.00 \$7,167.64 \$7,167.64 \$0.00 FLOORING 1460 2 \$3394.20 \$0.00 \$0.00 \$0.00 FELOORING 1450 2 \$3,000.00 \$1,03.50 \$4,103.50 \$4,103.50 FETERIOR LIGHTING 1450 2 \$3,000.00 \$5,000.00 \$5,000		ROOFS	1460		\$0.00	\$14,007.65	\$14,007.65	\$14,007.65	
WINDOWS 1460 4 \$5,000.00 \$0.00 \$0.00 CABINETS 1460 19 \$322,000.00 \$0.00 \$0.00 FLOORING 1460 1460 4 \$5,000.00 \$7,167.64 \$7,167.64 FLOORING 1460 4 \$5,000.00 \$7,103.50 \$394.20 REHAB UNITS 1460 7 \$4,000.00 \$7,103.50 \$394.20 RETERIOR CONCRETE 1450 2 \$3,000.00 \$5,103.50 \$5,4,103.50 POSTAL BOXES 1450 2 \$3,000.00 \$5,000.00 \$5,000.00 \$5,000 POSTAL BOXES 1450 2 \$3,000.00 \$5,000.00 \$5,000.00 \$5,000.00 POSTAL BOXES 1450 7 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 ITREE TRIMMING 1450 7 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00		COMMUNITY ROOM LIGHTING	1470		\$3,000-00	\$0.00	\$0.00	\$0,00	
CABINETS 1460 19 53,000.00 5394.20 530.00 530.00 530.00 530.00 530.00 530.00 530.00 530.00 531.97.20 531.97.20 531.97.20 531.97.20		SWODNIM	1460	4	\$5,000.00	\$0.00	\$0.00	\$0.00	
FLOORING 1460 4 \$5,000.00 \$7,167.64 \$7,167.76 \$7,167.76 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.66 \$7,177.67 \$7,177.67 \$7,177.67 \$7,177.67 \$7,167.01 <td></td> <td>CABINETS</td> <td>1460</td> <td>19</td> <td>\$32,000.00</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.00</td> <td></td>		CABINETS	1460	19	\$32,000.00	\$0.00	\$0.00	\$0.00	
REHAB UNITS 1460 7 \$0.00 \$394.20 \$30.00 <td></td> <td>FLOORING</td> <td>1460</td> <td>4</td> <td>\$5,000.00</td> <td>\$7,167.64</td> <td>\$7,167.64</td> <td>\$7,167.64</td> <td></td>		FLOORING	1460	4	\$5,000.00	\$7,167.64	\$7,167.64	\$7,167.64	
EXTERIOR CONCRETE 1450 54,000.00 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,103.50 54,000 50.00 <th< td=""><td></td><td>REHAB UNITS</td><td>1460</td><td></td><td>\$0.00</td><td>\$394.20</td><td>\$394.20</td><td>\$394.20</td><td></td></th<>		REHAB UNITS	1460		\$0.00	\$394.20	\$394.20	\$394.20	
POSTAL BOXES 1450 2 \$3,000.00 \$0.00 \$0.00 EXTERIOR LIGHTING 1450 4 \$3,000.00 \$0.00 \$0.00 \$0.00 TREE TRIMMING 1450 1450 8 \$2,000.00 \$0.00 \$0.00 \$0.00 TREE TRIMMING 1450 1450 1 \$2,000.00 \$0.00 \$0.00 \$0.00 PLAYGROUND EQUIPMENT 1450 1 \$10,000.00 \$20,077.66 \$2,000.00 \$0.177.6		EXTERIOR CONCRETE	1450		\$4,000.00	\$4,103.50	\$4,103.50	\$4,103.50	
EXTERIOR LIGHTING 1450 4 \$3,000.00 \$0.00	******	POSTAL BOXES	1450	N	\$3,000.00	\$0.00	\$0.00	\$0.00	
TREE TRIMMING 1450 1450 \$2,000.00 \$0.00		EXTERIOR LIGHTING	1450	4	\$3'000.00	\$0.00	\$0.00	20.00	
PLAYGROUND EQUIPMENT 1450 1 \$1,000.00 \$0.00 <td></td> <td>TREE TRIMMING</td> <td>1450</td> <td></td> <td>\$2,000.00</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.00</td> <td></td>		TREE TRIMMING	1450		\$2,000.00	\$0.00	\$0.00	\$0.00	
RETAINING WALL 1450 1 \$10,000.00 \$24,077.66 \$34,070.66 \$34,070.66 \$34,077.66 \$34,070.66 \$34,070.66 \$34,070.06 \$32,450.00		PLAYGROUND EQUIPMENT	1450		\$1,000.00	\$0.00	\$0.00	\$0.00	
OR CONCRETE 1450 \$20,000.00 \$17,927.00 \$17,927.00 EAD DOORS 1460 4 \$2,000.00 \$2,450.00 EAD DOORS 1460 12 \$35,000.00 \$71,456.75 \$71,456.75 CES 1460 12 \$35,000.00 \$11,456.75 \$71,456.75 \$71,456.75 HEATERS 1460 12 \$10,500.00 \$1,970.02 \$1,970.02	0H10P02200-182	1	1450		\$10,000.00	\$24,077.66	\$24,077.66	\$24,077.26	i compteto "
EAD DOORS 1460 4 \$2,000.00 \$2,450.00 DES 1460 12 \$35,000.00 \$71,456.75 \$71,456.75 DES 1460 12 \$10,500.00 \$1,970.02 \$1,970.02		EXTERIOR CONCRETE	1450		\$20,000.00	\$17,927.00	\$17,927.00	\$17,927.00) crimplete
CES 1460 12 \$35,000.00 \$71,456.75 \$71,456.75 \$71,456.75 HEATERS 1460 12 \$10,500.00 \$1,970.02 \$1,970.02		OVERHEAD DOORS	1460	4	\$2,000.00	\$2,450.00	\$2,450.00	\$2,450.00) číhiplete
HEATERS 1460 12 \$10,500.00 \$1,970.02 \$1,970.02		FURNACES	1460	12	\$35,000.00	\$71,456.75	\$71,456.75	\$71,456.75	i complete
		WATER HEATERS	1460	12	\$10,500.00	\$1,970.02	\$1,970.02	\$1,970.02	e complete
	Part II: Suppo	rting Pages		Page 1 of 3	of 3			fom HUD.	аюты.1 (4/2008)

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

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of Housing and Urban Development Office of Pohlie and Indian Housing OMB No. 2571-0226 Cathres 4/30/2011	debe a sector de la sector a s			Dialities of Avoria	impleto	implete
U.S. Department of Housing and Urhan Development Office of Public and Indian Housing OMB No. 2577-022	1221년 2221년 - 1991년 1992년 1991년 1 1991년 1월	2009	ual Cost	Funds (1)	\$23,554.30 camplete	\$12,136.88 complete
n.s. Do		FFY of Grant:	Fotal Actual Cost	inuds ligntcil ²	\$23,554.30	\$12,136.88

Part II: Sumortine Paces								
Metropuli	Greene Metropolitant Housing Authority	Grant Type and Number CFP Grant No.:	her	011101-02250109	CFFP (Yes/Na):	Federal FIV of Grant	2009	
		Develorment		Total Estimated Cost	ated Cast	Fotal Act	Fotal Actual Cost	Status of Work
Gener	General Description of Major Work Categories	Account No.	Quantity	Original	Reviscul ¹	Funds Ohligated ²	Funds Experided ²	
FLOC	FLOORING	1460	~	\$20,000.00	\$23,554.30	\$23,554.30	\$23,554.30	complete
CABI	CABINETS	1460	10	\$25,000.00	\$12,136.08	\$12,136,88	\$12,136.88 complete	complete
MIN	SMOGNIM	1460	673	\$10,000.00	\$3,768.52	\$3,768.52	\$3,768.52	\$3,768.52 complete
TRE	TREE TRIMMING	1450		\$5,000.00	\$7,000.00	\$7,000.00		complete
REP	REPLACE TUB	1460		20.00	\$1,455.00	\$1,455.00	\$1,455.00	
REH	REHAB UNITS	1460	2	\$50,000.00	\$130,146.20	\$130,146.20	\$130,146.20	comptete
FUR	FURNACES	1460	20	\$21,600.00	\$3,818.70	S3,818.70	\$3,818.70	complete
M	WATER HEATERS	1460		\$0.00	\$2,274.00	\$2,274.00	\$2,274.00	
TRE	TREE TRIMMING	1450		\$2,500.00	\$0.00	\$0.00	\$0.0D	
<u>₽</u>	ROOFING	1460	4	\$15,000.00	\$433.20	\$433.20	\$433.20	\$433.20 complete
S	CABINETS	1460		\$35,000.00	\$7,465.99	57,465.99	\$7,465.99 complete	l complete
E E E E E	REHAB UNITS	1460		\$55,000.00	\$64,879.75	\$64,879.75	\$51,602.59	\$51,602.59 IN PROCESS
	PLAYGROUND EQUIPMENT	1450	+-	\$2,000.00	\$0.00	\$0.0D		
6	GUTTER & SPOUTING	1460	'n	\$5,000.00	\$850.00	\$850.00	\$850.00) complete service
E	FENCING	1450		\$1,000.00	\$0.00	\$0.00		
1	SMODNIW	1460		\$9,000.00	\$3,310.00	\$3,310.00	\$3,310.00	complete sea
Ъ	EXTERIOR CONCRETE	1450		\$0.00	\$1,600.00	\$1,600.00	\$1,600.00	
RE	REPLACE SPRINKLER HEADS	1460	50	\$20,000.00	\$25,743.41	\$25,743.41	\$25,743.41	complete
				50.0D	50.00	S0.00	50,00	
				S0.00	50,00	S0.00	20,02	
				S0.00	50.00	\$0.00	50.00	
				S0.00	50.00	S0,00	50,0D	
				20.00	\$0.00	S0.00	20100	
				50.00	50'09	\$0.00	\$0.00	
				S585,097.00	5585,097.00	\$585,097.00	\$571,436.10	
be completed for the Performan Part II: Supporting Pages	¹ To be completed for the Performance and Evaluation Report or a Revised Лилиа! Statement. Part II: Supporting Pages	anual Statement.	Page 2 of 3	z af 3			John HUD	1000 1000 1000 1000 1000 1000 1000 100
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Page 2 of 3

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

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U.S. Department of Housing and Urban Development Office of Polytic and Indian Housing Office of Polytic and Indian Housing Expires 4/30/2011.		بججه
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Part II: Sunnorting Pages	<u>(15</u>							
PHA Name:		Grant Type and Number			3	Federal FFY of Grant:		
Ę	atternations thereafter A collection	CFP Grant No.:	OHIO	OH10P02250109	CFFP (Yes/No):		2009	
Creene .	(manak greated tenning the second states and the second se	RUF Grant No.:						
Development Number/		Duraleurit		Total Es	Total Estimated Cost	Total Actual Cast	l Cast	
Name/PHA-while	Name/PHA-white General Description of Major Worlt Calegories	Acount No.	Quantity			Funds	Finds	
Activities				Original	Revised	Ohligated ¹	Expended ²	
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² To he completed for the Performance and Evaluation Report.

Part II: Supporting Pages

Page 3 of 3

form:HUD-60076.1 (4/2008)

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

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

					Expires 4/30/2011
Parl 1	Parl I: Summary				and the state of the second
PIIA Name:	Name: Greene Metropolitun Housing Authority	Grant Type and Number CFP Grant No:	d Number CFP Grant No: OH10P02250110	RHF Grant No.	FFV of Grant: 2010 crv of Grant Americal
Type	Type of Grant	actices .	Revised Annual Statement (Revision No.:	evision No.: (1)	112/31/2011
	JPerformance and Evaluation Report for Period Ending:		Truel Estimated Cost	allon Report and a support which Cont	
Line	Summary by Development Account	Original	nneu cusi Revised ¹	Obligated	Expended
	Total non-CFP Funds	\$0.00			
2	1406 Operations (may not exceed 20% of line 20) ³	\$45,988.00	\$105,488.00	\$24,1	51 3 19
'n	1408 Manugement Improventents	S64,000.00	\$0.00		
	1410 Administration (may not exceed 10% of line 20)	\$58,032.00	\$58,032.00	\$42,0	1153
ş	[14] 1 Audit	\$0.00			
9	1415 Liquidated Damages	20.00	S0.00		
7	1430 Fees and Costs	\$0.00	\$0.00		
\$	1440 Site Acquisition	\$0.00	\$0.00		
6	1450 Site Improvement	\$36,000.00	\$90,500.00	\$42,287.63	
10	1460 Dwelling Structures	\$228,104.00	\$228,104.00	\$166,192.40	
=	[1465.] Dwelling Equipment - Nonexpendable	\$98,200.00	\$98,200.00	S44,763.99	544.7
12	1470 Nondwolling Structures	\$0.00			
13	1475 Nondwelling Equipment	S0.00			
14	1485 Demolition	\$0.00			the second s
15	1492 Moving to Work Demonstratain	20.00		\$0.00	
<u>1</u> 0	1495.1 Relocation Costs	\$0.00			
13	1499 Development Activities ⁴	\$0,00			
IRa	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	50.00
481	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	00.03.	S0.00
19	1502 Contingency (may not exceed 8% of tine 20)	\$0.00	\$0.00	\$0.00	
20	Amount of Annuni Grant: (sum of lines 2-19)	S580.324.00	S580.3	S320,	S282,
21	Amount of line 20 Related to LBP Activities;	30.00		Stephen St.	
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	50.00	
23	Amount of line 20 Related to Security - Soft Costs	\$0.00			
57	Amount of line 20 Refuted to Security - Hard Costs	<u>\$0.00</u>		\$0,00	
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00		20.00

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Signature of Executive Director

To be completed for the Performance and Evaluation Report

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations. ⁴ RHF funds shall be included here.

Part I: Summary

Page 1 of 1

(orm HUD-50075.1 (4/2008)

Date:

Signature of Public Housing Director

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Office of Paddic and Iodian Hausing OMB No. 2577-0226 Expires (1502011				i																											
OMB No. 2577-0226 Expires 4/30/2011				Status of Work			- *.	-																							1 (4/2008
				S	10	00	00	<u>o</u>	े 00	08	00	00	00 🚲	06 🔅	00 jos	00 SS	00 (SS	00	00 🛞	00	8	0 0	ool 🔅	94 (종)	333 6 6	- 50 0 0	روت	32 Ale	72 (1991) 1995 (1992)	14 12 12 12 12 12 12	0-5007 6,
		2010	tunl Cost	Funds Expended ¹	\$19,111.04	\$0.00	\$0.00	\$0.0Ö	\$0.00	\$37,781.08	\$0.00	\$19,075.00	\$0.00	\$4,789.06	\$19,369.00	\$600.0D	\$0.00	\$0.00	\$0.00	\$0.00	\$2,230.00	20.00	\$0,00	\$5,445.94	\$25,394.99	\$0.00	\$0.00	\$78,332.92	\$3,744.72	\$310.14	form HUD-50075.1 (4/2008)
	Federal FFV of Grant:		Tatal Actual Cost	Funds Ohligated ¹	\$24,111.00	\$0.00	\$0.00	\$0.00	\$0.00	\$43,000.00	\$2,500.00	\$19,075.00	\$0.00	\$4,789.06	\$19,369.00	\$600.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,300.00	\$0,00	\$0.00	\$5,445.94	\$25,394.99	\$0.00	\$8,000.00	\$78,332.92	\$3,744.72	\$310.14	
	8	CFFP (YesMa):	ted Cost	Reviscul ¹	\$105,488.00	\$0.00	\$0.00	\$0.00	so.oo	\$58,032.00	S5,000.00	\$15,000.00	\$4,500.00	\$11,000.00	\$15,200.00	\$800.00	se,000.00	\$2,000.00	\$8,000.00	\$10,000.00	\$2,000.00	\$10,000.00	\$5,000.00	\$40,000.00	\$15,000.00	\$10,000.00	\$10,000.00	\$65,000.00	s0.00	\$5,000.00	
		01118702258118	Total Estimated Cost	Origiaal	\$45,988,00	\$44,000,00	\$10,000.00	\$10,000.00	\$0.00	\$58,032.00	\$5,000.00	\$15,000.00	\$0.00	\$11,000.00	\$15,200.00	\$800.00	\$8,000.00	\$2,000.00	\$8,000.00	\$10,000.00	\$2,000.00	\$10,000.00	\$5,000.00	\$40,000.00	\$15,000.00	\$10,000.00	\$10,000.00	\$55,000.00	\$0.00	\$5,000.00	of 2
		-		Quantity -										2	19		14		4	-		6	3	25	25			3		7	Page 1 of 2
	Crant True and Number	CFP Grant No.: KIF Grant No.: KIF Grant No.:	Development	Account Na.	1406	1408	1408	1408	1410	1410	1450	1450	1450	1460	1465.1	1460	1460	1460	1450	1450	1450	1450	1460	1460	1465.1	1450	1450	1460	1460	1460	
1		Greene Metropalinan Housing Authority		General Description of Major Work Categories	OPERATIONS - COCC	RESIDENT JOB TRAINING	STAFF DEVELOPMENT	COMPUTER SOFTWARE	NON TECH SALARIES	TECHNICAL SALARIES	TREE TRIMMING	EXTERIOR CONCRETE	SEWER	REPLACE BOILERS	APPLIANCES	OVERHEAD DOORS	PLUMBING	WASHER/DRYER HOOKUP	LANDSCAPING	PAVE PARKING LOT	LANDSCAPING	PAVE DRIVEWAYS	EXTERIOR DOORS	REPLACE ROOFS	APPLIANCES	EXTERIOR CONCRETE	TREE TRIMMING	REHAB UNITS	SIDING	OVERHEAD DOORS	
	THAT A PRIMI THE TARGET AND A PRIME TARGET AND A	-	12	Name/PHA-whie Activities	PHA WIDE]		1	OH10P02200-181	, Liu		<u></u>	4	0		2		OH10P02200-182 P	<u> </u>	<u>41</u>	111	<u>L</u>	A	Ш		<u>er</u>	S	0	Part II: Supporting Pages

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요즘 아프 문법 안전입니다.
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U.S. Department of I fousing and Urban Development Office of Public and Indian Housing OMD No. 2577-0226 Expires 4130201	Ĩ]							UP VI								<u> </u>]		
Office of Public and Indian Howing OMB No. 2577-0226 Explice 4/30/2011				AUNUS OL WOLK																									76.1 (4/2008)
		2010	nl Cost	Funds Expended	\$0.00	\$13,291.07	\$4,601.24	\$0 . 00	\$455.00	\$0.00	\$8,527.63	\$0.00	\$0.00	\$1,382.02	\$6,471.59	\$28,538.20	\$85.50	\$2,000.00	sé00.00	\$0.00	s0.00	50.00	50,00	S0.00	\$0.00	\$0.00	S282,136.14		form HUD-50075-1 (4/2000)
			Tatal Actual Cost	Funds Obligated ²	s3,000.00	\$18,000.00	\$4,601.24	s0.00	\$455.00	\$0.00	\$8,527.63	\$0.00	\$0.00	\$1,382.02	\$11,837.64	\$28,538.20	\$85.50	\$2,000.00	\$600.00	20 . 00	S0.00	S0.00	S0,00	S0.00	\$0.00	\$0,00	S320,000,00		
	21	CITP (Yes/No):	ted Cust	Revised ¹	\$6,000.00	\$15,000.00	\$20,000.00	\$4,000.00	s2,000.00	\$68,000.00	\$15,000.00	\$3,000.00	\$5,000.00	\$0.00	\$15,000.00	\$14,000.00	\$0.00	\$4,504.00	\$1,800.00	\$2,000.00	50°00	50.00	\$0.00	sa.na	50°00	\$0'00	S580,324.00		
		0110572040110	Total Estimated Cast	Origiunl	\$6,000.00	\$15,000.00	szo,000.00	\$4,000.00	s2,000.00	\$68,000.00	\$15,000.00	\$3'000.00	\$5,000.00	sa.oo	\$15,000.00	\$14,000.00	\$0.00	\$4,504.00	\$1,800.00	\$2,000.00	20,00	50'00	S0.00	50.00	\$0°00	\$0.00	00'12E'085S		í 2
		_		Qunatity		3	12			72		7	20		ŝ	10		2	2										Page 2 of 2
		Grant Type and Number CFP Grant No.: RHF Grant No.:	Breelannehd	Account No.	1460	1460	1460	1450	1450	1465.1	1450	1450	1460	1460	1460 ·	1460	1460	1460	1460	1450								al Statement.	
		ictropolitan Itausing Authority		General Description of Major Work Categories	ELECTRIC UPGRADE	REHAB BATHROOMS	WATER HEATERS	TREE TRIMMING	LANDSCAPING	APPLIANCES	EXTERIOR CONCRETE	PATIO FENCING	STORM DOORS	FURNACES	FLOORING	PATIO DOORS	STRUCTURE REHAB	ELECTRIC UPGRADE	OVERHEAD DOORS	SITE GRADING								¹ To he completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.	g Pages
	Part 11: Supporting Pages	PIIA Naue: Greene	Development Number/	Name/PHA-witte Activities			OH10P02200-183																					¹ To he completed for the ² To be completed for the	Part II: Supporting Pages

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Annua Capital Capital	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	Annuel Plan	CK2011 12-31-11 Annual Plan BS 1/12	U.S. Department of Hou Office (U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226
Part I:	Part I: Summary				
PHA Name:	Name: Greene Metropolitan Housing Authority	Grant Type and Number CFP Grant No: Date of CFFP:	d Number CFP Grant No: OH10P02250111 RHI Date of CFFP:	RHF Grant No:	FFY of Grant: 2011 FFY of Grant Approval:
Type	Type of Grant	ncies	Revision No.:		12/31/2011
<u> </u>	Performance and Ev	Total Esti	Total Estimated Cost	reput. Total Actual Cost	uni Cost ¹ se la seconda da se Bereja da seconda
Line	Summary by Development Account	Original	Revised ²	Oblignted	est state Expended
	Total non-CFP Funds	80,08		10000 100 100 100 20000	50100 State 1 Stat
2	1406 Operations (may not exceed 20% of line 20) ³	\$49,438.00	\$0.00	20.00	10000 0000 0000 00000 0000000000000000
m	1408 Management Improvements	20.00	\$0.00	\$0.00	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
4	1410 Administration (may not exceed 10% of line 20)	\$50,900.00	\$0.00	\$0.00 S	1. 100 000 000 000 000 000 000 000 000 0
Ś	1411 Audit	\$0.00	-	S0.00	S0.00
9	1415 Liquidated Dantages	\$0.00	\$0.00	20.00	1.5.5
7	1430 Fees and Costs	\$0.00		\$0.00	1111 - 111 - 1111 - 110 - 111
8	1440 Site Acquisition	\$0.00		\$0.00	\$0.00
6	1450 Site Improvement	\$11,000.00		\$7,175.00	\$3,175.00
01	1460 Dwelling Structures	\$396,438.00		\$35,825.00	53,241,29
	1465.1 Dwelling Equipment - Nonexpendable	\$0.00		\$0.00	20.00 ·
12	1470 Nondwelling Structures	\$0.00		\$0.00	1000 States 100
13	1475 Nondwelling Equipment	\$0.00		\$0.00	1000 1000 1000 1000 1000 1000 1000 100
14	1485 Demolition	\$0.00	\$0.00	\$0.00	1000 - 1000 - 1000 - 100
15	1492 Moving to Work Demonstratoin	\$0.00		\$0.00	10.00 10.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	10000 0000 0000 00000 00000 0000000000
17	1499 Development Activities ⁴	\$0.00		00.00	10.000 million 20.000
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	20.00	1.1.1. A
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	50.00	80.00
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00		20.00	10000 0000 0000 00000 0000000000000000
20	Amount of Annual Grant: (sum of lines 2-19)	S507,776.00		\$43,000.00	office and a second second S6,416.29
21	Amount of line 20 Related to LBP Activities:	\$0.00	\$0.00	00.02	50.00 States and States
22	Amount of line 20 Related to Section 504 Activities	\$0.00		S0.00	100.00 States 20.00
23	Amount of line 20 Related to Security - Soft Costs	. \$0.00		\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00		\$0.00	
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	100.000 Fighter 100 Store
Signat	Signature of Executive Director	Date:	Signature of Public Housing Director		Date: 1

¹ To be completed for the Performance and Evaluation Report

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

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

⁴ RHF funds shall be included here.

Part I: Summary

Page 1 of 1

form HUD-50075.1 (4/2008)

19-31-11 ことろう

PHA Name: Greene Metrapolitan Housing Authority Development Number/ General Description of Major Wajor								
	-	Grant Type and Number CFP Grant No.: RHF Grant No.:		01110P02250111	CFFP (Yes/No):	Federal FFV of Grant	2011	
		Development		Total Estimated Cost	nated Cost	Total Ac	Total Actual Cast	1
	General Description of Major Work Categories	Account No.	Quantity	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	Status of Work
	000	1406		\$49,438.00	\$0.00			
	RIES	1410		\$50,900.00	\$0.00	\$0.00	\$0.00	
REPLACE ROOFS DEAD BOLT LOCK		1450		\$2,000.00	\$0.00	\$0.00	\$0.00	
DEAD BOLT LOCK		1460	18	\$60,000.00	\$0.00	\$3,000.00	\$0,00	
REDIACE FURNA	S	1460	33	\$5,000.00	\$0.00	\$0.00	\$0.00	
	CES	1460	æ	\$12,000.00	\$0.00	\$0.00	\$0.00	
BATHROOM REHAB	AB	1460		\$5,000.00	\$0.00	\$0.00	\$0.00	
OH10P02200-182 EXTERIOR CONCRETE	RETE	1450		\$2,000.00	\$0.00	\$0.00	\$0.00	
SWOONIM		1460	£	\$12,000.00	\$0.00	\$0.00	\$0.00	
REPLACE ROOFS		1460	9	\$25,000.00	\$0.00	\$0.00	\$0.00	
SEWER LINES		1450	2	\$7,000.00	\$0.00	\$7,175.00	\$3,175.00	
REHAB UNITS		1460	2	\$45,000.00	\$0.00	\$0.00	\$0.00	
REMOVE CHIMNEYS	SYS	1460	Э	\$13,938.00	\$0.00	\$0.00	\$0.00	
REPLACE FLOORING	ING	1460	e	\$10,000.00	\$0.00	\$0.00	\$0.00	
PATIO DOORS		1460	7	\$6,500.00	\$0.00	\$0.00	\$0.00	
OH10P02200-183 REPLACE AC UNITS	TS	1460	5	\$32,000.00	\$0.00	\$0.00	\$0.00	
WATER HEATERS	(0	1460	£	\$5,000.00	\$0.00	\$0.00	\$0.00	
REHAB UNITS		1460	2	\$60,000.00	\$0.00	\$32,825.00	\$3,241.29	
REPLACE FURNACES	CES	1460	4	\$10,000.00	\$0.00	\$0.00	\$0.00	
REPLACE ROOFING	NG	1460	12	\$85,000.00	\$0.00	\$0.00	\$0.00	
BATHROOM REHAB	AB	1460	2	\$10,000.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	20,00	20'00	
				\$0.00	\$0.00	20.00	50.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
				S0.00	\$0.00	\$0.00	\$0.00	

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

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U.S. Department of Housing and Urban Development	Office of Public and Indian Housing	224	- 14	
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Part II: Supporting Pages	53							
PHA Name:		Grant Type and Number				Federal FFY of Grant:		
Greene	Greene Metropolitan Housing Authority	CFP Grant No.: RHF Grant No.:		OH10P02250111	CFFP (Yes/No):		2011	
Development Number/		Davaban		Total Estimated Cost	ed Cost	Total Acta	Total Actual Cost	
Nnme/PIIA-wide Activities	Name/PIIA-wide General Description of Major Work Categories Activities	Account No.	Quantity	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	Status of Work
				\$0.00	S0.00	00.00 20100		
				S507,776.00	50.00	\$43,000.00	S6,416.29	

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.



form HUD-50075.1 (4/2008)

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

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

I, ______ Deborah McDonnell the _____ City Manager _____ certify that the Five Year and Annual PHA Plan of the ______ Greene Metropolitan Housing Authority is consistent with the Consolidated Plan of City of Fairborn ______ prepared pursuant to 24 CFR Part 91.

Signed / Dated by Appropriate State or Local Official

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

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

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

I, ______ Jim Percival the City Manager certify that the Five Year and Annual PHA Plan of the Greene Metropolitan Housing Authority is consistent with the Consolidated Plan of City of Xenia ______ prepared pursuant to 24 CFR Part 91.

Signed / Dated by Appropriate State or Local Official

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.

Greene Metropolitan Housing Authority

OH022

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any inform- prosecute false claims and statements. Conviction may result in criminal an	ation provided in the accompaniment herewith, is true and accurate. Warning: HUD will d/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
Name of Authorized Official Nancy Hadley	. Title GMHA Board Chair
signature Mancy Salley	Date 2-1-12

DISCLOSURE OF LOBBYING ACTIVITIES CONTINUATION SHEET

Reporting Entity:	Page	of
	_ 1 490	
		Authorized for Local Reproduction

2012 Capital Fund

Capital Fund Program (CFP) Amendment To The Consolidated Annual Contributions

Contract (form HUD-53012)

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

Whereas, (Public Housing Authority) Greene Metropolitan Housing Authority(OH022) (herein called the "PHA") and the United States of America, Secretary of Housing and Urban Development (herein called "HUD") entered into Consolidated Annual Contributions Contract(s) ACC(s) Numbers(s) C5007 dated 9/23/1972

Whereas, HUD has agreed to provide CFP assistance, upon execution of this Amendment, to the PHA in the amount to be specified below for the purpose of assisting the PHA in carrying out capital and management activities at existing public housing developments in order to ensure that such developments continue to be available to serve low-income families. HUD reserves the right to provide additional CFP assistance in this FY to the PHA. HUD will provide a revised ACC Amendment authorizing such additional amounts.

<u>\$ 415,759.00</u> for Fiscal Year 2012 to be referred to under Capital Fund Grant Number <u>OH10P02250112</u> PHA Tax Identification Number (TIN):On File DUNS Number:On File

Whereas, HUD and the PHA are entering into the CFP Amendment Number ONTO POZA 50113

Now Therefore, the ACC(s) is (are) amended as follows: 1.The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This amendment is a part of the ACC(s).

2. The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.

3. (Check one)

a. For Non-qualified PHAs:

(i) In accordance with the HUD regulations, the Annual PHA Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1). OR

(ii) If the Annual PHA Plan has not been adopted by the PHA and approved by HUD, the PHA may use its CFP assistance under this contract for work items contained in its CFP-Five-Year Action Plan (HUD-50075.2), before the Annual PHA Plan is approved.

b. For Qualified PHAs:

(i) The CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1) has been adopted by the PHA and verified by HUD. The capital and management activities shall be carried out as described therein. OR

(ii) If the CFP Annual Statement/Performance and Evaluation Report has not been adopted by the PHA and/or verified by HUD, the PHA may use its CFP assistance under this contract for work items contained in its approved CFP 5-Year Action Plan (HUD-50075.2), before the CFP Annual Statement/Performance and Evaluation Report is adopted by the PHA and verified by HUD.

For cases where HUD has approved a Capital Fund Financing Amendment to the ACC (CFF Amendment attached), HUD will deduct the payment for amortization scheduled payments from the grant immediately on the effective date of this CFP Amendment. The payment of CFP funds due per the amortization scheduled will be made directly to a designated trustee (Trustee Agreement attached) within 3 days of the due date.

Regardless of the selection above, the 24 month time period in which the PHA must obligate this CFP assistance pursuant to section 9(j)(1) of the United

States Housing Act of 1937, as amended, (the "Act") and 48 month time period in which the PHA must expend this CFP assistance pursuant to section 9(j)(5) of the Act starts with the effective date of this CFP amendment (the date on which CFP assistance becomes available to the PHA for obligation). Any additional CFP assistance this FY will start with the same effective date.

4. Subject to the provisions of the ACC(s) and paragraph 3. and to assist in the capital and management activities, HUD agrees to disburse to the PHA or the designated trustee from time to time as needed up to the amount of the funding assistance specified herein.

5. The PHA shall continue to operate each development as low-income housing in compliance with the ACC(s), as amended, the Act and all HUD regulations for a period of twenty years after the last disbursement of CFP assistance for modernization activities for any public housing or portion thereof and for a period of forty years after the last distribution of CFP assistance for development activities for any public housing and for a period of ten years following the last payment of assistance from the Operating Fund to the PHA. However, the provisions of Section 7 of the ACC shall remain in effect for so long as HUD determines there is any outstanding indebtedness of the PHA to HUD which arose in connection with any development(s) under the ACC(s) and which is not eligible for forgiveness, and provided further that, no disposition of any development covered by this amendment shall occur unless approved by HUD.

6. The PHA will accept all CFP assistance provided for this FY. If the PHA does not comply with any of its obligations under this Amendment and does not have its Annual PHA Plan approved within the period specified by HUD, HUD shall impose such penalties or take such remedial action as provided by law. HUD may direct the PHA to terminate all work described in the Capital Fund Annual Statement of the Annual PHA Plan. In such case, the PHA shall only incur additional costs with HUD approval.

7. Implementation or use of funding assistance provided under this Amendment is subject to the attached corrective action order(s).

(mark one) :	Yes	No No
		الكيكل

8. The PHA acknowledges its responsibility for adherence to this Amendment.

9. At a public housing development level and in the format and frequency established by HUD, the PHA is required to report on all Capital Fund grants awarded that have not closed, including information on the installation of energy conservation measures.

The parties have executed this Agreement, and it will be effective on March 12, 2012. This is the date on which CFP assistance becomes available to the PHA for obligation.

		//
U.S. Department of Housing and Urban D	Development	PHA Executive Director
Ву	Date:	By Brevela Mallward Date: 3-1-12
Title		Title
		Frankting Directur
		Verecer 20 10 vere
Previous versions obsolete		form HUD-52840-A 03/04/2003

2012 Capital Fund

Capital Fund Program (CFP) Amendment To The Consolidated Annual Contributions Contract (form HUD-53012)

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

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<u>\$ 415,759.00</u> for Fiscal Year 2012 to be referred to under Capital Fund Grant Number <u>OH10P02250112</u> PHA Tax Identification Number (TIN):On File DUNS Number:On File

Whereas, HUD and the PHA are entering into the CFP Amendment Number OHIO PO22 5011

Now Therefore, the ACC(s) is (are) amended as follows: 1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This amendment is a part of the ACC(s).

The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.

3. (Check one)

a. For Non-qualified PHAs:

(i) In accordance with the HUD regulations, the Annual PHA Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1).

OR (ii) If the Annual PHA Plan has not been adopted by the PHA and approved by HUD, the PHA may use its CFP assistance under this contract for work items contained in its CFP-Five-Year Action Plan (HUD-50075.2), before the Annual PHA Plan is approved.

b. For Qualified PHAs:

(i) The CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1) has been adopted by the PHA and verified by HUD. The capital and management activities shall be carried out as described therein. OR

(ii) If the CFP Annual Statement/Performance and Evaluation Report has not been adopted by the PHA and/or verified by HUD, the PHA may use its CFP assistance under this contract for work items contained in its approved CFP 5-Year Action Plan (HUD-50075.2), before the CFP Annual Statement/Performance and Evaluation Report is adopted by the PHA and verified by HUD.

For cases where HUD has approved a Capital Fund Financing Amendment to the ACC (CFF Amendment attached), HUD will deduct the payment for amortization scheduled payments from the grant immediately on the effective date of this CFP Amendment. The payment of CFP funds due per the amortization scheduled will be made directly to a designated trustee (Trustee Agreement attached) within 3 days of the due date.

Regardless of the selection above, the 24 month time period in which the PHA must obligate this CFP assistance pursuant to section 9(j)(1) of the United

States Housing Act of 1937, as amended, (the "Act") and 48 month time period in which the PHA must expend this CFP assistance pursuant to section 9(j)(5) of the Act starts with the effective date of this CFP amendment (the date on which CFP assistance becomes available to the PHA for obligation). Any additional CFP assistance this FY will start with the same effective date.

4. Subject to the provisions of the ACC(s) and paragraph 3. and to assist in the capital and management activities, HUD agrees to disburse to the PHA or the designated trustee from time to time as needed up to the amount of the funding assistance specified herein.

5. The PHA shall continue to operate each development as low-income housing in compliance with the ACC(s), as amended, the Act and all HUD regulations for a period of twenty years after the last disbursement of CFP assistance for modemization activities for any public housing or portion thereof and for a period of forty years after the last distribution of CFP assistance for development activities for any public housing and for a period of the years following the last payment of assistance from the Operating Fund to the PHA. However, the provisions of Section 7 of the ACC shall remain in effect for so long as HUD determines there is any outstanding indebtedness of the PHA to HUD which arose in connection with any development(s) under the ACC(s) and which is not eligible for forgiveness, and provided further that, no disposition of any development covered by this amendment shall occur unless approved by HUD.

6. The PHA will accept all CFP assistance provided for this FY. If the PHA does not comply with any of its obligations under this Amendment and does not have its Annual PHA Plan approved within the period specified by HUD, HUD shall impose such penalties or take such remedial action as provided by law. HUD may direct the PHA to terminate all work described in the Capital Fund Annual Statement of the Annual PHA Plan. In such case, the PHA shall only incur additional costs with HUD approval.

7. Implementation or use of funding assistance provided under this Amendment is subject to the attached corrective action order(s).

No



8. The PHA acknowledges its responsibility for adherence to this Amendment.

9. At a public housing development level and in the format and frequency established by HUD, the PHA is required to report on all Capital Fund grants awarded that have not closed, including information on the installation of energy conservation measures.

The parties have executed this Agreement, and it will be effective on March 12, 2012. This is the date on which CFP assistance becomes available to the PHA for obligation.

U.S. Department of Housing and Urban Development By Date:	By Drander mallevoc Date: 3-12-1,
Title	Flouture Noroctor
Presidente de state	form HUD-52840-A 03/04/2003

Previous versions obsolete

2012 Capital Fund

Capital Fund Program (CFP) Amendment To The Consolidated Annual Contributions

Contract (form HUD-53012)

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

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\$ 415,759.00 for Fiscal Year 2012 to be referred to under Capital Fund Grant Number OH10P02250112 PHA Tax Identification Number (TIN):On File **DUNS Number: On File**

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-		(/
U.S. Department of Housing and Urban	Development	PHA Executive Director
Ву	Date:	By Broxcla Incal war Date: 3-12-12
Tille		Frecenture Director
Previous versions obsolete		/ form HUD-52840-A 03/04/2003

Fund Program, Capital Fund Program Replacement Housing Factor and	Capital Fund Financing Program
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	Capital Fund Program, Capital Fund Program Replacement Housing Factor and

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Part I: Sum PHA Name:	nary Greene Metropolitan Housing Authority	Grant Type and Number CFP Grant No: Date of CFFP:	d Number CFP Grant No: <u>OH10P022501112</u> Date of CFFP:	RHF Grant No:	FFY of Grant: 2012 FFY of Grant Approval:
Type.	Type of Grant Johginal Annual Statement Performance and Evaluation Report for Period Ending:		Revised Annual Statement (Revision No.: Final Performance and Evaluation Report	Vision No.;;) on Report	
		Total Estir	Total Estimated Cost	Total Actual Cost	
Line	Summary by Development Account	Original	Revised ²	Obligated	Expended
	Total non-CFP Funds	S0:00		\$0,00	
0	1406 Onerations (may not exceed 20% of line 20) ³	\$40,000.00	S0:00	2010 No. 2010 No. 2010 No. 2010	
6	1408 Management Improvements	\$40,000.00	10000 (SO:00	20.00 State of the second s	
4	[1410 Administration (may not exceed 10% of line 20)	\$41,500.00		\$0,00	
2	1411 Audit	100 (S. A. A. A. A. A. A. A. SO:00		100.021 St. 100.010 St. 100.000	
9	1415 Liquidated Damages	50,00 S0,00		50,00	
7	1430 Fees and Costs	201 101 11 10 101 10 10 10 10 10 10 10 10		20100	
8	1440 Site Acquisition	\$0.00		20,00	
6	1450 Site Improvement	· 高、市、家、家、家、高 \$15,000,00		\$0,00	
10	1460 Dwelling Structures	\$248,100.00		S0.00	A 2 2 2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1
	1465.1 Dwelling Equipment - Nonexpendable	\$31,159.00		S0.00	
12	1470 Nondwelling Structures	00'00		20100 States of the second second	
1	1475 Nondwelling Equipment	100.00 Store 200.00		\$0:00	
14	1485 Demolition	00.02 State 1 20.00	al so so so shi da sa sa sa	SO.00	
5	1492 Movine to Work Demonstratoin	00.00 M M M M M M M M M M M M M M M M M	100 (00 (00 (00 (00 (00 (00 (00 (00 (00	S0:00	
191	1495.1 Relocation Costs	\$0.00		20 20 20 20 20 20 20 20 20 20 20 20 20 2	
11	1400 Dovelonment Activities ⁴	\$0,00		(10) 00 00 00 00 00 00 00 00 00 00 00 00 0	
18a	1501 Collateralization or Debt Service paid by the PHA	0.00 No. 10 N	20.00	S0.00	50.00
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	50.00		00:0S	
61	1502 Contingency (may not exceed 8% of line 20)	\$0.00		100.00 Store 50 Store	
50	Amount of Annual Grant: (sum of lines 2-19)	\$415,759.00		50.00	
121	Amount of line 20 Related to LBP Activities:	\$0.00	S0.00	\$0,00	
22	Amount of line 20 Related to Section 504 Activities	50.00 × 20.00		20.00	a sta all sea see all that all all the
23	Amount of line 20 Related to Security - Soft Costs	20:00 x x x x x x x x x x x x x x x x x x	20.00 Strate 20 Strate 20 Strate 20 Store	10.00 (State of the state of \$20,00)	
24	Amount of line 20 Related to Security - Hard Costs	1 28 28 28 28 28 28 28 28 28 28 28 20 00		\$0,00	
25	Amount of Line 20 Related to Energy/Conservation Measures	12 21 2 2 1 1 1 2 2 2 0 0 0	S0.00	1. A	
Signat		Date:	Signature of Public Housing Director)irector Sector	Date:
Í	HICO A A A A A A A A A A A A A A A A A A A				

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 Statemen/Performance a Capital Fund Program, Capital Fi Capital Fund Financing Program	Amual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program					U.S. De	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/201	of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
Dart 11. Cunnerfing Prose	P							
PHA Name:	detranolltan Housing Authority	Grant Type and Number CFP Grant No.: C	er FV/SFLER	OH10702250112	CFFP (Yes/No):	rederai frek ol Grani:	2012	
				Total Estimated Cost	ted Cost	Total Actual Cost	ual Cost	Į
Development Number/ Name/PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity -	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	Status of Work
PHA WIDE	OPERATIONS - COCC	1406		\$40,000.00	\$0.00	\$0.00	\$0.00	
	MANAGEMENT IMPROVEMENTS	1408		\$40,000.00	\$0.00	\$0.00	\$0.00	
	TECHNICAL SALARIES	1410		\$41,500.00	\$0.00	\$0.00	\$0.00	
OH10P02200-181	OVERHEAD DOORS	1460	2	\$1,600.00	\$0.00	\$0.00	\$0.00	
	REPLACE ROOFS	1460		\$25,500.00	\$0.00	\$0.00	\$0.00	
	REPLACE FLOORING	1460	9	\$10,000.00	\$0.00	\$0.00	\$0.00	
	REPLACE GUTTERS/SPOUTING	1460	-	\$1,000.00	\$0.00			
	APPLIANCES	1465.1	19	\$17,659.00	\$0.00	\$0.00		
OH10P02200-182	REPLACE ROOFS	1460	3	\$20,000.00	\$0.00	\$0.00		
	WATER PIPING REPAIR	1460		\$2,000.00	\$0.00	\$0.00		
	BRICK RESTORATION	1460	÷	\$80,000.00	\$0.00	\$0.00		
	WATER HEATERS	1460	ŝ	\$1,000.00	\$0.00	\$0.00		
	REHAB UNITS	1460		\$50,000.00	\$0.00	\$0.00		
	REPLACE FLOORING	1460	ω	\$10,000.00	\$0.00	\$0.00	\$0.00	
	OVERHEAD DOORS	1460	2	\$5,000.00	\$0.00	\$0.00	\$0.00	
	APPLIANCES	1465.1	15	\$13,500.00				
OH10P02200-183	REPLACE SEWER LINE	1450	-	\$5,000.00	\$0.00			
	EXTERIOR CONCRETE	1450	ന	\$10,000.00	\$0.00			
	SMOGNIM	1460	22	\$30,000.00	\$0.00			
	WATER HEATERS	1460	22	\$12,000.00	\$0.00	\$0.00		
				\$0.00	\$0.00	50.00 Store	50.00 S	
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				\$0.00 States	\$0,00	20:00	1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1	

Page 1 of 2

Part II: Supporting Pages

form HUD-50075.1 (4/2008)

Annual Statement/Performance a Capital Fund Program, Capital Fi Capital Fund Financing Program	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program					U.S. Dep	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/201	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: Greene	letropolitan Housing Authority	Grant Type and Number CFP Grant No.: RHF Grant No.:		OH10P02250112	CFFP (Yes/No):	Federal FFY OF Grant:	2012	
Development Number/				Total Estimated Cost	nated Cost	Total Actual Cost	unl Cost	duc Would
Name/PHA-wide Activities	General Description of Major Work Categories	Account No.	Quantity	Original	Revised ¹	Funds Obligated ²	Funds Lxpended ²	A 10 W 10 SULAR
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				00 ⁰⁰ 80 ⁰⁰	000 00 00 00 00 00 00 00	S0.00	\$0,00	
				S415,759.00	S0.00	\$0.00	\$0.00	

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

¹ To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

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form HUD-50075.1 (4/2008)

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Capital Fund Financing Program	iation Report ram Replacement Housing	g Factor and	• 44		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 I	Capital Fund Financing	Program			
PHA Name:					Federal FFY of Grant:
	Greene Metropolit	Greene Metropolitan Housing Authority			2012
Development Number/	All Fund Obligated (Quarter Ending Date)	Oblignted Iding Date)	All Funds Expended (Quarter Ending Date)	xpended ding Date)	-
Name/PHA-wide Activities	Original Obligation End Date	Actual Obligation End Date	Original Expenditure Actual Expenditure End Date End Date	Actual Expenditure End Date	Reasons for Revised Target Dates'
PHA - wide	3/11/2014		3/11/2016		
AMP181	3/11/2014		3/11/2016		
AMP182	3/11/2014		3/11/2016		
AMP183	3/11/2014		3/11/2016		
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¹ Obligation and expenditure end dates can only be revised with HUD approval pursuant to Section 9i of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule

form HUD-50075.1 (4/2008)

U.S. Department of Housing and Urban Development Office of Community Planning and Development

This form is to be used by Responsible Entities and Recipients (as defined in 24 CFR 58.2) when requesting the release of funds, and requesting the authority to use such funds, for HUD programs identified by statutes that provide for the assumption of the environmental review responsibility by units of general local government and States. Public reporting burden for this collection of information is estimated to average 36 minutes 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. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Part 1. Program Description and Request for Release of Funds (to be completed by Responsible Entity)				
1: Program Title(s) Capital Fund Program OH10F02250112	2. HUD/State Identification Number 3. Recipient Identification Number (optional)				
4: OMB Catalog Number(s)	5. Name and address of responsible entity				
 6. For information about this request, contact (name & phone number) 	Greene County Dept. of Building Regulation 667 Dayton-Xenia Rd. Xenia, OH 45385				
Brenda Smallwood 937-352-0264	7. Name and address of recipient (if different than responsible entity)				
8. HUD or State Agency and office unit to receive request Cleveland HUD Office	Greene Metropolitan Housing Authority 538 N. Detroit St. Xenia, OH 45385				

The recipient(s) of assistance under the program(s) listed above requests the release of funds and removal of environmental grant conditions governing the use of the assistance for the following

9. Program Activity(les)/Project Name(s)	10. Location (Street address, city, county, State)
Capital Fund Program OH10P02250112	Various public housing locations in Greene
· •	County, Ohio

11. Program Activity/Project Description

Capital Fund Program Year #1 AMP 181 Appliances Overhead Doors Roofing Flooring Gutters and Spouting

AMP 182 Roofing Water Piping Repair Flooring Overhead Doors Appliances Rehab unit Brick restoration Water Heaters Windows

AMP 183 Sewer Line Exterior Concrete Exterior doors Windows Water Heaters

SEE ATTACHED SHEET FOR YEARS 2-5

Previous editions are obsolete

form HUD-7015.15 (1/99)

Part 2. Environmental Certification (to be completed by responsible entity)

With reference to the above Program Activity(ies)/Project(s), I, the undersigned officer of the responsible entity, certify that:

- The responsible entity has fully carried out its responsibilities for environmental review, decision-making and action pertaining to the project(s) named above.
- 2. The responsible entity has assumed responsibility for and complied with and will continue to comply with, the National Environmental Policy Act of 1969, as amended, and the environmental procedures, permit requirements and statutory obligations of the laws cited in 24 CFR 58.5; and also agrees to comply with the authorities in 24 CFR 58.6 and applicable State and local laws.
- 3. After considering the type and degree of environmental effects identified by the environmental review completed for the proposed project described in Part 1 of this request, I have found that the proposal did vide not require the preparation and dissemination of an environmental impact statement.
- 4. The responsible entity has disseminated and/or published in the manner prescribed by 24 CFR 58.43 and 58.55 a notice to the public in accordance with 24 CFR 58.70 and as evidenced by the attached copy (copies) or evidence of posting and mailing procedure.
- 5. The dates for all statutory and regulatory time periods for review, comment or other action are in compliance with procedures and requirements of 24 CFR Part 58.
- 6. In accordance with 24 CFR 58.71(b), the responsible entity will advise the recipient (if different from the responsible entity) of any special environmental conditions that must be adhered to in carrying out the project.

As the duly designated certifying official of the responsible entity, I also certify that:

- 7. I am authorized to and do consent to assume the status of Federal official under the National Environmental Policy Act of 1969 and each provision of law designated in the 24 CFR 58.5 list of NEPA-related authorities insofar as the provisions of these laws apply to the HUD responsibilities for environmental review, decision-making and action that have been assumed by the responsible entity.
- 8. I am authorized to and do accept, on behalf of the recipient personally, the jurisdiction of the Federal courts for the enforcement of all these responsibilities, in my capacity as certifying officer of the responsible entity.

Signature of Certifying Officer of the Responsible Entity

Address of Certilying Officer ' 667 Dayton-Xenia Rd. Xenia, OH 45385

Title of Certifying Officer Suilding Officia Date signed

Part 3. To be completed when the Recipient is not the Responsible Entity

The recipient requests the release of funds for the programs and activities identified in Part 1 and agrees to abide by the special conditions, procedures and requirements of the environmental review and to advise the responsible entity of any proposed change in the scope of the project or any change in environmental conditions in accordance with 24 CFR 58.71(b).

Signature of Authorized Officer of the Recipient

Title of Authorized Officer Executive Director

Date signed

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)

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Capital Fund 2012 wor	k item years 2 thoroug	h5		
2013 AMP 181	2014	2015	2016	
AMP 181 Tree trimming	Air Conditioning	Bath Rehab	Tree Trimming	en andre se andre se Andre se andre se and
Exterior concrete	Bath Rehab	Boiler	Flooring	
Sewer lines	Tree Trimming	Rehab unit	Exterior concrete	a ali bana ya kata ya Kata ya kata ya
Rehab unit	Rehab unit	Exterior concrete	Landscaping	
Furnaces	Water heaters	Furnaces	Siding & Soffit	
Cabinets	Flooring	Flooring	Site Drainage	
Flooring		Overhead doors	Sewer Line	
(j)	· · · · · · · · · · · · · · · · · · ·	Roofing		
	a un deste deur de bace de bar de la contra con de la contracta de la contrata de marca adama una	Windows	an a	
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AMP 182	······································		a na	
Tree Trimming	Tree Trimming	Appliances	Pave driveways	
Funraces	Water heaters	Boiler	Rehab unit	
Rehab unit	Rehab unit	Cabinets	Flooring	
Exterior concrete	Patio doors	Exterior concrete	Exterior concrete	
Roofing	Roofing	Flooring	Furnaces	
Flooring	Flooring	Furnaces	Electrical upgrade	
Electrical upgrade	Windows	Gutter & spouting	Tree trimming	
Cabinets	Cabinets	Overhead doors	Sewer line	
Sewer Line	Sewer Line	Landscaping	Water heaters	
Bath rehab	Bath rehab	Bath rehab		
	Siding	Rehab unit		
		Sewer lines		
****		Water piping repair		
A140 100				
AMP 183 Tree trimming	Tree trimming	Air Conditioning	Appliances	
Flooring	Flooring	Air Conditioning Exterior concrete	Appliances Rehab unit	
Furnaces	Air Conditioning	Flooring	Flooring	
Roofing	Bath Rehab	Furnaces	Exterior concrete	
Overhead doors	Gutters	Overhead doors	Roofing	
Cabinets	Cabinets	Landscaping	Sewer line	
Rehab unit	Rehab unit	Rehab bath	Electrical upgrade	
	Sewer lines	Rehab unit		
	Exterior concrete	Roofing		
		Siding & soffit		
		Water heaters		
	- `	·		

[Code of Federal Regulations]
[Title 24, Volume 1]
[Revised as of April 1, 2010]
From the U.S. Government Printing Office via GPO Access
[CITE: 24CFR50.20]

[Page 353]

Section

TITLE 24--HOUSING AND URBAN DEVELOPMENT

PART 50_PROTECTION AND ENHANCEMENT OF ENVIRONMENTAL QUALITY--Table of Contents

Subpart D_General Policy: Environmental Review Procedures

Sec. 50.20 Categorical exclusions subject to the Federal laws and authorities cited in Sec. 50.4.

(a) The following actions, activities and programs are categorically excluded from the NEPA requirements of this part. They are not excluded from individual compliance requirements of other environmental statutes, Executive orders and HUD standards cited in Sec. 50.4, where appropriate. Form HUD-4128 shall be used to document compliance. Where the responsible official determines that any item identified below may have an environmental effect because of extraordinary circumstances (40 CFR 1508.4), the requirements of NEPA shall apply (see paragraph (b) of this section).

(1) Special projects directed to the removal of material and architectural barriers that restrict the mobility of and accessibility to elderly and persons with disabilities.

(2) Rehabilitation of buildings and improvements when the following conditions are met:

(i) In the case of a building for residential use (with one to four units), the density is not increased beyond four units, the land use is not changed, and the footprint of the building is not increased in a floodplain or in a wetland;

(ii) In the case of multifamily residential buildings:

(A) Unit density is not changed more than 20 percent;

(B) The project does not involve changes in land use from residential to non-residential; and

(C) The estimated cost of rehabilitation is less than 75 percent of the total estimated cost of replacement after rehabilitation.

(iii) In the case of non-residential structures, including commercial, industrial, and public buildings:

(A) The facilities and improvements are in place and will not be changed in size nor capacity by more than 20 percent; and

(B) The activity does not involve a change in land use, such as from non-residential to residential, commercial to industrial, or from one industrial use to another.

(3) (i) An individual action on up to four dwelling units where there is a maximum of four units on any one site. The units can be four oneunit buildings or one four-unit building or any combination in between; or

(ii) An individual action on a project of five or more housing units developed on scattered sites when the sites are more than 2,000 feet apart and there are not more than four housing units on any one site.

(iii) Paragraphs (a)(3)(i) and (ii) of this section do not apply to rehabilitation of a building for residential use (with one to four units) (see paragraph (a)(2)(i) of this section).

Page 1 of 2

(4) Acquisition (including leasing) or disposition of, or equity loans on an existing structure, or acquisition (including leasing) of vacant land provided that the structure or land acquired, financed, or disposed of will be retained for the same use.

(5) Purchased or refinanced housing and medical facilities under section 223(f) of the National Housing Act (12 U.S.C. 1715n).

(6) Mortgage prepayments or plans of action (including incentives) under 24 CFR part 248.

(b) For categorical exclusions having the potential for significant impact because of extraordinary circumstances, HUD must prepare an EA in accordance with subpart E. If it is evident without preparing an EA that an EIS is required pursuant to Sec. 50.42, HUD should proceed directlyto the preparation of an EIS in accordance with subpart F.

[61 FR 50916, Sept. 27, 1996, as amended at 68 FR 56127, Sept. 29, 2003]



538 North Detroit Street • Xenia, Ohio 45385 • PH: (937) 376-2908 • (937) 429-7736 Fax: (937) 376-2487 TDD (937) 374-1607

November 2, 2011

Al Kuzma Chief Building Offical 667 Dayton-Xenia Road Xenia, OH 45385

Mr. Kuzma,

Environmental review / responsible entity

Greene Metropolitan Housing Authority needs you to review and sign our HUD form 7015.15 to verify our categorical exclusions as per 24CFR50.20

والمتحد فبالمحاص والمحاص والمحاص والمحاص

Item 11 on form 7015.15 gives a list of all work items.

Sincerely,

Aumer

Warren Sumner Development Manager Greene Metropolitan Housing Authority

	A 5-Year and nual Plan	Developme	tment of Housing and nt ublic and Indian Housi		OMB No. 2 Expires	2577-0226 4/30/2011	
1.0	PHA Information PHA Name: Greene Metropolita PHA Type: Small PHA Fiscal Year Beginning: (MM/YY)	High Performing	🖂 Standard	HCV (Secti	PHA Code:OH(ion 8)	022_	
2.0	Inventory (based on ACC units at time Number of PH units:361			umber of HCV units: _	1390		
3.0	Submission Type	Annual	Plan Only	5-Year Plan Only			
4.0	PHA Consortia	PHA Consorti	a: (Check box if submitting a join	nt Plan and complete t		to in Each	
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	e No. of Uni Program PH	HCV	
	PHA 1: PHA 2:						
5.0	PHA 3: 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: Not Applicable at this time. 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						
6.0	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. Not Applicable at this time. PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: 1.) Revision to HCV Administrative Plan and Public Housing Admissions and Continued Occupancy Policy, which includes Revision to Admission for HCV and Public Housing to add 1 additional preference point for Greene County residents.						
	 2.) Revisions to Financial Resource (b) Identify the specific location Plan elements, see Section 6 At GMHA's office in lobby, at the Xenia, and Yellow Springs – and 5 	es based on proj (s) where the pub .0 of the instruction public libraries at the community	ected income. lic may obtain copies of the 5-Ye ons. in communities where public h y rooms of each of the senior he	ear and Annual PHA F ousing is located – B ousing developments.	Plan. For a complete li: Beavercreek, Cedarvil •	lle, Fairborn,	
7.0	Hope VI, Mixed Finance Modernizat Programs, and Project-based Vouche GMHA intends to dispose of 3978 India house is located has become a commerc live. GMHA is currently working with	ers. Include stater an Ripple Rd. Bea cial area since dev	nents related to these programs of vercreek, and find a replacement elopment of The Greene Mall in	<i>us applicable.</i> unit in the City of Be	eavercreek. The area w	here the	
8.0	Capital Improvements. Please complete	ete Parts 8.1 throu	gh 8.3, as applicable. Attached				
8.1	Capital Fund Program Annual State complete and submit the <i>Capital Fund</i> open CFP grant and CFFP financing.	Program Annual 3					
8.2	Capital Fund Program Five-Year Act <i>Program Five-Year Action Plan</i> , form I for a five year period). Large capital ite	HUD-50075.2, and	d subsequent annual updates (on	a rolling basis, e.g., dr			

1

8.3	Capital Fund Financing Program (CFFP). 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. Not Applicable
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.

Public Housing Waiting List

There are currently 549 applicants on the Public Housing Waiting List, of these 549 applicants 148 require 1 bedroom units, 174 applicants requires 2 bedroom units, 131 applicants require a 3 bedroom units, 66 applicants require 4 bedroom units, 18 applicants require 5 bedroom units, 9 applicants require 6 bedroom units and 3 applicants require 7 bedroom units. Of the 549 applicant families on the waiting list, the family status recap stated that 25 applicants are identified as headed by an Elderly Person, 117 applicants are identified as headed by a person with a disability. Of those applicants on the Public Housing Waiting List, 345 applicants are identified as White (Non-Hispanic), 190 are identified as Black (Non-Hispanic), 5 are identified as American Indian/ Native American, 15 are identified as Hispanic, and 1 identified as other. The Annual Income Distribution of Applicants are as follows 11 applicants are at less than 30% of Median Income Guidelines. Greene Metropolitan Housing Authority Public Housing Waiting List is currently open. Greene County Residents are given 3 local preference points and there are no site based waiting lists. The average length of time on the waiting list is 10.6 months.

Section 8 Waiting List

There are currently 1306 applicants on the Section 8 Housing Choice Voucher Waiting List, of these 1143 applicants have income less than 30% of the Median, 147 applicants have income between 30% and 49.9% of the Median , and 16 applicants have income between 50% and 80% of the Median Income guidelines. The ethnicity recap indicates that 682 applicants are identified as White, 545 applicants are identified as Black, 10 applicants are identified as American Indian/ Native Alaskan, 44 applicants are identified as Asian or Pacific Islander, and 25 applicants are identified as Hispanic. The are 58 applicant families identified as headed by an elderly person and 190 applicant families identified as headed by a person with a disability. Information regarding bedroom size was not captured at the time of application. GMHA's Section 8 Housing Choice Voucher Program waiting list is currently open. Greene County Residents are given 3 local preference points. The average length of time to receive a Section 8 Housing Choice Voucher is 5 month.

Housing Needs of Families in the Jurisdiction by Family Type Given our review the City of Fairborn's 2010-2012 Consolidated Plan we updated the Jurisdictional Needs table below. With 5 being the most need and 1 being the lowest need

Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Extremely low income <=30% of AMI	1260	5	5	4	4	2	1
Very low income (>30% but <=50% of AMI	1143	5	5	4	4	2	1
Low income (>50% but <80% of AMI	1064	5	5	2	3	4	1
Elderly Families	656	5	5	3	4	4	1
Families with Disabilities	708	5	5	3	4	4	1
Race/ethnicity White	27,935	5	N/A	N/A	N/A	N/A	N/A
Race/ethnicity Black	1945	5	N/A	N/A	N/A	N/A	N/A
Race/ethnicity Hispanic	577	5	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity Asian	899	5	N/A	N/A	N/A	N/A	N/A

	jurisdiction and on	ressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual with the 5-Year Plan.					
		ing and Work Responsibility Act of 1998 requires that housing authorities set forth in our Annual Plan a Needs Assessment of the our jurisdiction and our waiting list. Also, we are required to state how we intend to address these needs.					
	CHIS. It shows the	the information contained in the Housing Needs Section of the Fairborn Consolidated Plan, Greene County CHIS, and Xenia here is a significant need for additional affordable housing resources in our community. Also, per the requirements, we have tables that provide an analysis of our waiting list.					
		vas analyzed in the following manner. We gathered data from our waiting lists and we then looked at this information from the required groups and for factors set forth in the regulations. Finally, we consulted with our local municipalities to ensure that they lysis.					
9.1	The Greene Metro set forth in our Mi	politan Housing Authority used this analysis to prepare our five-year goals and objectives. It reflects our priorities that we have ssion Statement.					
	Commissioners ha	Choice Voucher wait list is currently open after having been closed for about six months in 2009. The GMHA Board of as determined that the Section 8 Housing Choice Voucher wait list will close to all but homeless families and individuals when it e Public Housing wait list is open. Public Housing does not have a site-based wait list. Both programs have a preference for					
	As stated above, th need identified her resources to maint state and local sou local partners, Gre Women's Recover Hospitality Netwo	to of the entire effort undertaken by the Housing Coalition of Greene County to address our jurisdiction's affordable housing needs. The need for housing includes assistance for low-income families that are rent burdened. While we cannot ourselves meet the entire re, in accordance with our goals included in this Plan, we will try to address some of the identified needs by using appropriate ain and preserve our existing stock. When appropriate and feasible, we will apply for additional grants and loans from federal, rces, including private sources to help add to the affordable housing available in our community. We intend to work with our tene County Department of Job and Family Services, American Red Cross, Family Violence Prevention Center of Greene County, ry, Community Action Partnership, Children's Service Board, TCN Behavioral Health Services, Habitat For Humanity, Interfaith rk, Homecroft, Veterans Services, Greene County Department of Development, Greene County Fair Housing, the City of of Xenia and Western Ohio Legal Services Association to try to meet these identified needs.					
	those resources to time for Section 8 programs often cha there are program	ect to receive \$10,610,000 our existing Public Housing, Section 8, and other housing related programs. We will continue to use house people. The wait time on our public housing waiting list has decreased from 29 months a year ago to 19 months. Wait list is 11 months. We anticipate using \$450,000 for modernization of our Public Housing units. Priorities and guidelines for ange from year to year and our decisions to pursue certain opportunities and resources may also change over the coming year if changes beyond our control. Our Section 8 waiting list has increased from last year. With financial assistance from Jobs and oundations, financial institutions, and grants, we expanded our Individual Development Account program					
	Additional Inform	nation. Describe the following, as well as any additional information HUD has requested.					
		eeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-					
	During FY 2011, GMHA continued to make progress towards accomplishing its mission to provide quality, affordable housing, and services in an efficient and creative manner in the following areas in meeting the goal on the 2010-2014 Five Year Plan:						
	Our goals and ob	jectives continue to serve as a benchmark as to measure progress.					
	Goal One:	Manage the Greene Metropolitan Housing Authority in a manner that results in full compliance with applicable statues and regulations.					
	Update:	The Greene Metropolitan Housing Authority continues to manage the Authority in a manner that results in full compliance with applicable statues and regulation. Currently, the occupancy rate is over 95%.					
	Goal Two:	Assist our community to increase the availability of affordable, suitable housing for families in the very-low income range, cited as a need in our Consolidated Plan.					
	Update:	The Greene Metropolitan Housing Authority through our non-profit Sensible Shelter Inc. continues to operate an IDA program targeted at increasing homeownership. There have been 2 families assisted in 2011 with purchasing homes in Greene County.					
	Goal Three:	Manage the Greene Metropolitan Housing Authority's tenant-based program in an efficient and effective manner there by qualifying as a high-performer under SEMAP.					
	Update:	The Greene Metropolitan Housing Authority continues to recruit new landlords through community outreach and landlord meetings conducted by Greene Metropolitan staff. Currently lease up is at 99%.					
	Goal Four:	Ensure full compliance with all applicable standards and regulations including government generally accepted accounting principles.					
	Update:	The Greene Metropolitan Housing Authority was awarded the "Ohio Auditor of State Award" for 2011. The award is presented for exemplary financial reporting in accordance with the Generally Accepted Accounting Principles.					
	Goal Five:	Enhance the image of public housing in our community.					
10.0	Update:	The Greene Metropolitan Housing Authority continues to meet with civic, religious, or fraternal groups within the community. Feature stories are submitted to the local media for publication.					
		Page 4 of 2 form HUD-50075 (4/2008)					
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- (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" Not Applicable A substantial deviation from the housing authority's 5- year plan is defines as any change to the overall mission or to the goals or objectives as outlines in the plan. A significant amendment or modification of the 5- year plan or annual plan includes a major deviation from any activity, proposed activity, or policy provided in the agency plan that would affect services or program provided residents. This definition does not included budget revisions, changes in organizational structure; changes resulting from HUD imposed regulations, or minor policy changes. 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only) (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only) (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only) (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)