

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>Not applicable</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>See attached</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

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

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

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

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

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

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

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

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

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

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

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

8.2 Capital Fund Program Five-Year Action Plan

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

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

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

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

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

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

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

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

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

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

**PHA PLAN –ANNUAL PLAN TEMPLATE AND ATTACHEMENTS
2012 ANNUAL PLAN
HOUSING AUTHORITY OF THE COUNTY OF LUZERNE**

6.0 PHA Plan Update

a) Since its last annual plan, the Authority has changed the following:

In Public Housing:

The Authority is proposing that flat rents be increased by 2%. The maximum increase for the largest bedroom size is no more than \$10. Efficiency rents will remain the same as a marketing strategy

In the Housing Choice Voucher Program:

No changes have been made

b) The Plan will be available at the AMP site offices: Kingston Gardens, Tripp Street, and Dundee, as well as the Central Office.

7.00 Homeownership Programs/Project Based

The Authority operates a Section 8 homeownership program with no restrictions on the number of participants.

The Authority has 30 project based vouchers used in its West Hazleton Senior Housing.

8.0 Capital Improvements

See attached HUD required sheets

9.0 Housing Needs

The Consolidated Plan for Luzerne County presents data that shows that the low income and minority population experiences problems related to the affordability, supply, quality and size of units. Their data presents displays that outline the needs of households with housing problems (defined as households occupying units without a complete kitchen or bathroom, that contain more than one person per room, or that pay more than 30 % of their income to cover housing expenses.)

The table below provides a breakdown of the percentage of renting households with housing problems by income levels.

Housing Problem	Income Level	Percentage
Any Problem	30% or less	64.5%
	31% to 50%	57.5%
	51% to 80%	24.0%
Cost Burden Over 30%	30% or less	64.1%
	31% to 50%	56.2%
	51% to 80%	22.3%
Cost Burden Over 50%	30% or less	47.2%
	31% to 50%	14.3%
	51% to 80%	1.3%

The table below also shows that the minority population in Luzerne County experience similar problems:

Any Housing Problem	Percentage w/problem	Percentage in community
White	32.1%	96.6%
African American	45.1%	1.7%
Hispanic	36.7%	1.2%
Native American	61.6%	.1%
Asian	50.3%	.6%

In addition, the Plan notes the need for affordable rental housing (particularly supportive housing) for the elderly and frail elderly, as well as persons with various disabilities

9.1 Strategies for Addressing Housing Needs

Instructions note that “Small, Section 8 only and High Performing PHAs complete only for Annual Plan submission with the 5 –Year Plan.” The PHA is a High Performer.

10.0 Additional Information

a) Progress in meeting mission and goals

Goal 1: Increase the availability of decent, safe and affordable housing

The Authority opened its 30 unit elderly/handicapped development in West Hazleton. This project was made possible through a partnership with the Office of Community Development (HOME funds), Federal Home Loan Bank, and Luzerne National Bank. The Authority has attached Project Based Section 8 assistance to the units which enhances their affordability.

The Authority has also acquired a parcel of land in Plains Township which it plans on developing into elderly housing when a funding package can be developed. A possible source of funds is gaming revenue from the Mohegan Sun Casino, located in Plains Township.

Goal 2: Improve the quality of assisted housing and community life

The Authority has maintained its status as a High Performer in both Public Housing and Section 8 assessment systems; has installed security cameras in its elderly housing, has continued to comprehensively rehab its public housing units and continues its participation in the Energy Performance Contract.

Goal 3: Increase housing choices

The Authority continues its use of the Section 8 Homeownership Program.

Goal 4: Promote self sufficiency of elderly residents

The Authority has been successful in securing a ROSS grant for FY 2009.

b) Definition of Significant Amendment and Substantial Deviation/Modification

When the Authority completes its 5 year plan for the Capital Fund Program, we anticipate what work items will be done in the next five years. These items may change over the years and other work items may become important.

HUD allows the Authority to define "substantive deviations" from the Plan which would allow the ability to add work items that are not in the Plan. Normally, changes in items are not allowed if they are greater than 10% of the Capital Fund grant amount for that year.

Therefore, the 2012 Annual Plan will define “significant amendments” and “substantive deviations” as those work items that are not in the Authority five year Capital Plan and if implemented, would be greater than 10% of the Capital Fund amount for that year.

Emergency work items as defined by the Authority would be exempt from the above requirements.

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

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

Part I: Summary		Grant Type and Number	FFY of Grant: CFP2012
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		Capital Fund Program Grant No: Date of CFP: P24P0575012	FFY of Grant Approval: 01/01/2012
Type of Grant		Replacement Housing Factor Grant No:	
Original Annual Statement		Revised Annual Statement (revision no:)	
Performance and Evaluation Report for Period Ending:		Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Obligated
			Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	337,012.00	
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)	168,506.00	
5	1411 Audit	500.00	
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures	1,178,045.00	
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1483 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities ⁴		
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 – 19)	1,855,063.00	
21	Amount of line 20 Related to LBF Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security – Soft Costs		
24	Amount of line 20 Related to Security – Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		

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

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 3/31/2014

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: PA280528012		Replacement Housing Factor Grant No: _____		FFY of Grant: CFF2012 FFY of Grant Approval: 01/01/2012	
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		Reserve for Disasters/Emergencies Original Annual Statement Performance and Evaluation Report for Period Ending: _____		Revised Annual Statement (revision no:) Final Performance and Evaluation Report			
Summary by Development Account		Total Estimated Cost		Total Actual Cost ¹		Expended	
Signature of Executive Director <i>David J. Fowler</i>		Original Revised Date 8/25/11		Signature of Public Housing Director		Date	

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/30/2011

Part I: Summary				
PHA Name/Number	Locality (City/County & State)	Original 5-Year Plan	Revision No:	
Development Number and Name	Work Statement for Year 1 FFY _____	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015
	Work Statement for Year 5 FFY 2016			
A.	Annual Statement			
B.	Physical Improvements Subtotal			182,000.00
C.	Management Improvements			
D.	PHA-Wide Non-dwelling Structures and Equipment			
E.	Administration	168,500.00	168,500.00	168,500.00
F.	Other	500.00	500.00	500.00
G.	Operations	337,000.00	337,000.00	337,000.00
H.	Demolition			
I.	Development	1,179,000.00	1,179,000.00	997,000.00
J.	Capital Fund Financing – Debt Service			
K.	Total CFP Funds	1,685,000.00	1,685,000.00	1,685,000.00
L.	Total Non-CFP Funds			
M.	Grand Total	1,685,000.00	1,685,000.00	1,685,000.00

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2001

Work Statement for Year 1 FFY	Work Statement for Year 2 FFY 2013		Work Statement for Year 3 FFY 2014			
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	PA57-1, Lee Park Towers			PA57-1, Lee Park Towers		
	PA57-2, Dan Flood Apts.			PA57-2, Dan Flood Apts.		
	PA57-3, Exeter Gardens			PA57-3, Exeter Gardens		
	PA57-4, Luzerne Towers			PA57-4, Luzerne Towers		
	PA57-5, Shickshinny Apts.			PA57-5, Shickshinny Apts.		
	PA57-7, Dundee Apts.			PA57-7, Dundee Apts.		
	PA57-8, Swoyersville Apts.			PA57-8, Swoyersville Apts.		
	PA57-10, Exeter Gardens			PA57-10, Exeter Gardens		
	PA57-12 Luzerne (Main & Walnut St.)			PA57-12 Luzerne(Main & Walnut St.)		
	PA57-13 Luzerne (Ann Ct. & Hughes)			PA57-13 Luzerne(Ann Ct. & Hughes)		
	PA57-33, Plains Manor			PA57-33, Plains Manor		
	Replace Roofs	710 Units	1,179,000.00	Replace Roofs	710 Units	169,556.00
				PA57-7, 8, 12, 13		
				PA57-14, Fairview Park Apts.		
				PA57-15, Meadowcrest Apts.		
				PA57-20, Glen Lyon Apts.		
				PA57-22, Plymouth Apts.		
				Security Cameras	422 Units	341,444.00
	Subtotal of Estimated Cost		\$ 1,179,000.00	Subtotal of Estimated Cost		\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2001

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

Work Statement for Year 1 FFY	Work Statement for Year 3 FFY 2014			Work Statement for Year: 4 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
Sec	PA57-1, Lee Park Towers			PA57-1, Lee Park Towers		
Annual	Replace Garbage Compactor	1	15,000.00	Conversion of Efficiencies to 1 BR	94 Units	480,000.00
Statement	Rebuild Generator	1	50,000.00			
	PA57-1, 2, 3			PA57-1, 2, 4, 5, 6, 11		
	Pave Parking Lots	130,000sqft	100,000.00	Phone Answering System-ADA Compliant	13 Systems	65,000.00
	PA57-14, Fairview Park			PA57-1, Lee Park Towers		
	Replace Boilers	100 Units	100,000.00	Sheetrock Bathrooms	149 Units	25,000.00
	PA57-15, Meadowcrest			PA57-4, 6, 7, 10, 33		
	Replace Boilers	100 Units	100,000.00	Pave Parking Areas	184,200sqft	138,000.00
	PA57-1, Lee Park Towers			PA57-1 Lee Park Towers		
	PA57-2, Dan Flood Apts.			Replace Power Boxes	149 Units	131,888.00
	PA57-4, Luzerne Towers			PA57-7, 8, 12, 13, 14, 15, 20, 22		
	PA57-5, Shickshinny Apts.			Security Cameras	422 Units	99,112.00
	PA57-6, Kingston Manor					
	PA57-11, Kingston Gardens			PA57-3, Exeter Gardens - Floor Tile	85,570sqft	240,000.000
	Replace Entrance Doors		303,000.00	Subtotal of Estimated Cost		\$ 1,179,000.00
	Subtotal of Estimated Cost		\$ 1,179,000.00			

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2001

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

Work Statement for Year 1 FFY	Work Statement for Year 5		Work Statement for Year 5		Estimated Cost	Quantity	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	Development Number/Name General Description of Major Work Categories	Quantity	Development Number/Name General Description of Major Work Categories	Quantity					
See Annual Statement	Management Improvements PA-572, 5	4 Units	PA57-1, 2, 3 Pave Parking Areas	130,900 sq ft	182,000.00				100,000.00
	PA57-2, Dan Flood Apts. Floor Tile	8,000 sq ft	PA57-1, Lee Park Towers Floor Tile	16,500 sq ft	60,000.00				114,000.00
	PA57-1, 2, 4, 11 Replace Windows	60 Windows	PA57-3, Exeter Gardens Floor Tile	85,570 sq ft	320,000.00				178,332.00
	PA57-1, Lee Park Towers Replace Power Boxes	149 Units			2,668.00				
	PA57-3, Exeter Gardens Replace Power Boxes	91 Units			82,000.00				
	PA57-1, 2 Replace Shower Faucets, Sinks	248 Units			80,000.00				
	Subtotal of Estimated Cost		Subtotal of Estimated Cost		\$			Subtotal of Estimated Cost	\$ 997,000.00

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

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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: Date of CFFP: PA25P05750111	Replacement Housing Factor Grant No:	FFY of Grant: CFP2011
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704				FFY of Grant Approval: 01/01/2011
Type of Grant	Reserve for Disasters/Emergencies	Revised Annual Statement (revision no:)	Final Performance and Evaluation Report	
Original Annual Statement Performance and Evaluation Report for Period Ending:		Total Estimated Cost	Obligated	Expended
Line	Summary by Development Account	Original	Revised ²	Total Actual Cost ¹
1	Total non-CFFP Funds			
2	1406 Operations (may not exceed 20% of line 21) ³	337,012.00		
3	1408 Management Improvements			
4	1410 Administration (may not exceed 10% of line 21)	168,506.00		
5	1411 Audit	500.00		
6	1415 Liquidated Damages			
7	1430 Fees and Costs	100,000.00		
8	1440 Site Acquisition			
9	1450 Site Improvement	100,000.00		
10	1460 Dwelling Structures	979,045.00		
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment			
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities ⁴			
18a	1501 Collateralization or Debt Service paid by the PHA			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment			
19	1502 Contingency (may not exceed 8% of line 20)			
20	Amount of Annual Grant. (sum of lines 2 – 19)	1,685,063.00		
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Activities			
23	Amount of line 20 Related to Security – Soft Costs			
24	Amount of line 20 Related to Security – Hard Costs			
25	Amount of line 20 Related to Energy Conservation Measures			

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

RECEIVED
 11/2 - 5 2011
 HOUSING AUTHORITY OF LUZERNE COUNTY

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 3/31/2014

Part I: Summary		FFY of Grant: CFP2011	
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		FFY of Grant Approval: 01/01/2011	
Grant Type and Number Capital Fund Program Grant No: Date of CFFP: PA28P05750111		Replacement Housing Factor Grant No:	
Type of Grant Original Annual Statement Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies	Revised Annual Statement (revision no:) Final Performance and Evaluation Report	
Line Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹	Expended
Signature of Executive Director <i>David J. Taylor</i>	Original Revised	Obligated	Date 8/3/11
	Date 7/25/11	Signature of Public Housing Director <i>Diana L. Bell</i>	

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 3/31/2014

Part II: Supporting Pages		Grant Type and Number		Federal FFY of Grant:	
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		Capital Fund Program Grant No: PA 26P05750111		CFPP (Yes/No): CFP2011	
Development Number Name/PHA-Wide Activities		General Description of Major Work Categories		Replacement Housing Factor Grant No:	
		Development Account No.		Quantity	
		Total Estimated Cost		Status of Work	
		Original		Revised ¹	
		Funds Obligated		Funds Expended ²	
AMP 2 - PA5723	Edwardsville Scattered Sites	Site Improvements	1450	3,400 sq ft	50,000.00
		Sidewalks, Driveways, Demolition, Landscaping, Fencing			
AMP 3 - PA5714	Fairview Park	Site Improvements	1460	3,400 sq ft	50,000.00
		Sidewalks, Driveways, Demolition, Landscaping, Fencing			
		Total Site Improvements		100,000.00	
AMP 2 - PA5723	Edwardsville Scattered Sites	Dwelling Structures Comprehensive Rehab	1460	24 Units	666,194.00
		Roofs, Siding, Kitchens, Baths, Plumbing, Electrical Fixtures, Per Work Write-Up			
AMP 3 - PA5719	Glen Lyon Scattered Sites	Comprehensive Rehab	1460	11 Units	312,851.00
		Roofs, Siding, Kitchens, Baths, Plumbing, Electrical Fixtures, Per Work Write-Up			
		Total Dwelling Structures		979,045.00	

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

² To be completed for the Performance and Evaluation Report.

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

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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: PA26P05750110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: CFP2010 FFY of Grant Approval: 01/01/2010	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/11	<input type="checkbox"/> Reserve for Disasters/Emergencies Date of CFFP:	<input checked="" type="checkbox"/> Revised Annual Statement (revision no:1) <input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost ¹
Line	Summary by Development Account	Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	380,500.00	380,500.00	380,500.00	190,250.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	190,250.00	190,250.00	190,250.00	126,834.00
5	1411 Audit	500.00	500.00	500.00	
6	1415 Liquidated Damages				
7	1430 Fees and Costs	130,000.00	129,540.00	129,540.00	26,555.00
8	1440 Site Acquisition				
9	1450 Site Improvement	50,000.00	74,800.00	74,800.00	67,851.86
10	1460 Dwelling Structures	1,098,716.00	1,074,376.00	301,948.32	276,773.91
11	1465.1 Dwelling Equipment-Nonexpendable	52,500.00	52,500.00	-	-
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

Part I: Summary		FFY of Grant: CFF2010 FFY of Grant Approval: 01/01/2010	
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingsford, PA 18704		Grant Type and Number Capital Fund Program Grant No: PA26P05750110 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/11		<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)	
Summary by Development Account		Total Estimated Cost	
Line		Original	Revised ²
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,902,466.00	1,902,466.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
Date 6/30/11		Date	

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

Part II: Supporting Pages		Federal FFY of Grant: CFFP2010						
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		Grant Type and Number Capital Fund Program Grant No: PA26P05750110 CFFP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA- Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide	ADMINISTRATION							
	Salaries	1410.1	N/A	122,560.00	122,560.00	122,560.00	81,482.00	In process
	Benefits	1410.9		31,832.00	31,832.00	31,832.00	21,327.00	
	Legal	1410.4		4,740.00	4,740.00	4,740.00	3,176.00	
	Phones	1410.16		1,540.00	1,540.00	1,540.00	1,032.00	
	Sundry	1410.19		28,348.00	28,348.00	28,348.00	18,993.00	
	Advertising			1,230.00	1,230.00	1,230.00	824.00	
				190,250.00	190,250.00	190,250.00	126,834.00	
HA Wide	AUDIT	1411	N/A	500.00	500.00	500.00	-0-	
	FEES AND COSTS							
AMP 1								
PA57-24 Duryea	Comprehensive Rehab	1430		-0-	19,777.50	19,777.50	18,840.00	
PA57-25 Swoyersville	Comprehensive Rehab	1430		-0-	9,762.50	9,762.50	7,715.00	
				-0-	29,540.00	29,540.00	26,555.00	

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		Federal FFY of Grant: CFP2010						
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		Grant Type and Number Capital Fund Program Grant No: PA26P05750110 CFPP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 2	FEES AND COSTS							
PA57-1 Lee Park	A&E Fees - Hot Water Lines	1430	N/A	30,000.00	-0-	-0-	-0-	
PA57-23 Edwardsville Scattered	A&E Fees - Comprehensive Rehab	1430	N/A	31,000.00	31,000.00	31,000.00	-0-	
				61,000.00	31,000.00	31,000.00	-0-	
AMP 3								
PA57-19 Glen Lyon Scattered	A&E Fees - Comprehensive Rehab	1430	N/A	69,000.00	69,000.00	69,000.00	-0-	
	TOTAL A&E FEES			130,000.00	129,540.00	129,540.00	26,555.00	
AMP 1	SITE IMPROVEMENTS							
PA57-24 Duryea	Paving	1450	23,000sqft	27,000.00	40,400.00	40,400.00	36,640.00	
	Sidewalks	1450	4,530sqft	23,000.00	34,400.00	34,400.00	31,211.86	
	TOTAL SITE IMPROVEMENTS			50,000.00	74,800.00	74,800.00	67,851.86	

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

² To be completed for the Performance and Evaluation Report.

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

Part II: Supporting Pages		Federal FFY of Grant: CFP2010						
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		Grant Type and Number Capital Fund Program Grant No: PA26P05750110 CFPP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1 57-24 Duryea	DWELLING STRUCTURES Comprehensive Rehab Entry Interior Doors,Kitchens,Bathrooms Fixtures,Sliding Doors,Fl. Tile, Electrical	1460	100 Units	470,000.00	108,466.63	108,466.63	83,312.22	
PA57-25 Swoyersville	Comprehensive Rehab	1460	29 Units	-0-	147,994.42	147,994.42	147,994.42	
PA57-3,10 Exeter	Mold Testing, Abatement	1460	154 Units	181,250.00	-0-	-0-	-0-	
PA57-3,10,24,25	Security Cameras TOTAL DWELLING STRUCTURES	1460		-0-	20,288.62	20,288.62	20,288.62	
AMP 2				651,250.00	276,749.67	276,749.67	251,575.26	
PA57-1 Lee Park	Replace Hot WaterLines	1460	3000LF	250,000.00	-0-	-0-	-0-	
PA57-23 Edwardsville Scattered Sites	Comprehensive Rehab Roofs, Siding, Sitemap, Kitchens, Baths, Plumbing, Electrical Fixtures	1460	24 Units	58,882.00	417,111.00	-0-	-0-	
PA57-1,4,21,33	Security Cameras TOTAL DWELLING STRUCTURES	1460		-0-	12,598.21	12,598.21	12,598.21	
				308,882.00	429,709.21	12,598.21	12,598.21	

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		Federal FFY of Grant: CFP2010						
PHA Name: ouing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		Grant Type and Number Capital Fund Program Grant No: PA26P05750110 CFPP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 3								
PA57-7 Dundee	Mold Testing Abatement	1460	94 Units	104,750.00	-0-	-0-	-0-	
PA57-20 Glen Lyon	Mold Testing Abatement							
PA57-19 Glen Lyon	Comprehensive Rehab	1460	11 Units	33,834.00	355,316.68	-0-	-0-	
Scattered Sites	Roofs, Siding, Sitework, Kitchens, Baths, Plumbing, Electrical, Fixtures							
PA57-2,5,6	Security Cameras	1460		-0-	12,600.44	12,600.44	12,600.44	
	TOTAL DWELLING STRUCTURES			138,584.00	367,917.12	12,600.44	12,600.44	
	TOTAL DWELLING STRUCTURES DWELLING EQUIPMENT			1,098,716	1,074,376	301,948.32	276,773.91	
AMP 2								
PA57-23 Edwardsville Scattered Sites	Ranges & Refrigerators	1465.1	48 Units	18,000.00	18,000.00	-	-	
AMP 3								
PA57-19 Glen Lyon Scattered Sites	Ranges & Refrigerators	1465.1	22 Units	34,500.00	34,500.00	-	-	
	TOTAL RANGES&REFRIGERATORS			52,500.00	52,500.00	-	-	

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

²To be completed for the Performance and Evaluation Report.

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

Part III: Implementation Schedule for Capital Fund Financing Program							Federal FFY of Grant: CFP2010
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704							Reasons for Revised Target Dates ¹
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	Original Expenditure End Date	Actual Expenditure End Date	
PA57-24 Comp. Rehab	9-30-10	9-30-10	9-30-11	9-30-11	-	-	
PA57-1 Hot Water Lines	9-30-11	-	9-30-12	9-30-12	-	-	
PA57-19,23 Comp. Rehab	9-30-11	-	9-30-12	9-30-12	-	-	
PA57-3,10,7,20 Mold	9-30-11	-	9-30-12	9-30-12	-	-	
PA57-19,23 Ranges & Ref	9-30-11	-	9-30-12	9-30-12	-	-	

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

Michael Molitoris

From: Rose Yarmel [ryarmel@luzctyha.org]
Sent: Thursday, November 10, 2011 10:17 AM
To: Michael Molitoris
Subject: FW: Luzerne HA - 2012 PHA Plan Review.

From: King, Kou-Chung [mailto:KouChung.King@hud.gov]
Sent: Thursday, November 10, 2011 9:53 AM
To: PHA, Luzerne County
Cc: Duca, Santo
Subject: Luzerne HA - 2012 PHA Plan Review.

I am reviewing the subject documents and have the following comments –

2011 CFP	Page 2	Delete signature and date for “Dennis Bellingtier”
	Page 3	Revise BLI from 1450 to 1430 for AMP2/A&E Fees.
2010 CFP	Page 1	Revise “Total Estimated Cost/Revised” \$380,500 to \$380493 FOR BLI 1406. (exceeds Max. 20%)
	Page 3	Revise \$190,250 to \$190246 FOR BLI 1410. (exceeds Max. 10%) Revise BLI from 1430 to 1460 for AMP1/Comprehensive Rehab. (2 places)

Please revise them accordingly and send affected pages to me by e-mail. Thanks.

Kou-Chung King

General Engineer
Office of Public Housing
Philadelphia Office, HUD
100 Penn Square East
Philadelphia, PA 19107-3380
TEL: 215-861-7680 (Monday, Wednesday, Thursday)
TEL: 856-751-0367 (Tuesday & Friday)
FAX: 215-656-3424



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Michele Stanitis

From: King, Kou-Chung <KouChung.King@hud.gov>
Sent: Thursday, November 10, 2011 3:50 PM
To: 'Michele Stanitis'
Subject: RE: Scanned image from Housing Authority of Luzerne County

O.K. However, I don't see 2010 CFP page 3 yet. Only 2 pages in the attachment. Thanks.

-----Original Message-----

From: Michele Stanitis [<mailto:micheles@luzctyha.org>]
Sent: Thursday, November 10, 2011 3:36 PM
To: King, Kou-Chung
Subject: FW: Scanned image from Housing Authority of Luzerne County

Hi Kou Chung!

Attached are the revised 2010 & 2011 CFP forms.

The \$190,250 and the \$380,500 were not changed because they are 10.00% and 20.00% of the total grant and were previously approved. This might be a rounding difference.

If you have any questions, please don't hesitate to contact Michael of our office at (570) 287-9661 x223.

Thanks,
Michele
Luzerne County Housing Authority

-----Original Message-----

From: marion@luzctyha.org [<mailto:marion@luzctyha.org>]
Sent: Thursday, November 10, 2011 4:37 PM
To: micheles@luzctyha.org
Subject: Scanned image from Housing Authority of Luzerne County

DEVICE NAME: Not Set
DEVICE MODEL: MX-M550N
LOCATION: Not Set

FILE FORMAT: PDF MMR(G4)
RESOLUTION: 300dpi x 300dpi

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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 3/31/2014

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

Part I: Summary		FFY of Grant: CFE2011	
BEA Name: Housing Authority of the County of Luzerne	Grant Type and Number Capital Fund/Program Grant No: Date of CTEP: P428567011	Replacement Housing Factor Grant No:	
Reserve for Disasters/Emergencies	Revised Annual Statement (revision no:) Final Performance and Evaluation Report	Total Actual Cost ¹	Expended
Original Annual Statement Performance and Evaluation Report for Period Ending:	Total Estimated Cost	Obligated	Date
Line Summary by Development Account	Original Revised		
Signature of Executive Director <i>David Jayda</i>	Date 7/25/11	Signature of Public Housing Director <i>[Signature]</i>	

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 3/31/2014

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

Part II: Supporting Pages		Grant Type and Number		Federal FFY of Grant:				
PHA Name:		Capital Fund Program Grant No: PA26P0575011 IFFP (Yes/No):		CFP2011				
Housing Authority of the County of Luzerne 250 Fifth Ave., Kingston, PA 18704		Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide	Administration							
	Salaries	1410.1	N/A	106,914.00				
	Benefits	1410.9	N/A	27,804.00				
	Legal	1410.4	N/A	4,162.00				
	Phone	1410.16	N/A	1,328.00				
	Sundry	1410.19	N/A	25,236.00				
	Advertising	1410	N/A	1,062.00				
				168,506.00				
	Audit	1411		500.00				
HA Wide								
	Fees & Costs	1430						
Amp 2	A&E Fees	1430	94 Units	100,000.00				
Lee Park Towers	Efficiency Conversion							
PA57-1	to 1BR Units							

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.

Michele Stanitis

From: Michele Stanitis <micheles@luzctyha.org>
Sent: Friday, November 11, 2011 9:18 AM
To: KouChung.King@hud.gov
Subject: FW: Scanned image from Housing Authority of Luzerne County
Attachments: marion@luzctyha.org_20111111_102135.pdf

Good morning Kou Chung!

As per your email, attached is pg. 3 of the 2010 CFP.

Have a great day!
Michele
Luzerne County Housing Authority

-----Original Message-----

From: marion@luzctyha.org [<mailto:marion@luzctyha.org>]
Sent: Friday, November 11, 2011 10:22 AM
To: micheles@luzctyha.org
Subject: Scanned image from Housing Authority of Luzerne County

DEVICE NAME: Not Set
DEVICE MODEL: MX-M550N
LOCATION: Not Set

FILE FORMAT: PDF MMR(G4)
RESOLUTION: 300dpi x 300dpi

Attached file is scanned image in PDF format.
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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

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

Part II: Supporting Pages		Federal FFY of Grant: CRFP2010						
PHA Name: Housing Authority of the County of Luzerne 250 First Ave., Kingston, PA 18704		Grant Type and Number Capital Fund Program Grant No: PA26P05750110 CHFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide	ADMINISTRATION							
	Salaries	1410.1	N/A	122,560.00	122,560.00	122,560.00	81,482.00	In process
	Benefits	1410.9		31,832.00	31,832.00	31,832.00	21,327.00	
	Legal	1410.4		4,740.00	4,740.00	4,740.00	3,176.00	
	Phones	1410.16		1,540.00	1,540.00	1,540.00	1,032.00	
	Sundry	1410.19		28,348.00	28,348.00	28,348.00	18,993.00	
	Advertising			1,230.00	1,230.00	1,230.00	824.00	
				190,250.00	190,250.00	190,250.00	126,834.00	
HA Wide	AUDIT	1411	N/A	500.00	500.00	500.00	-0-	
	FEES AND COSTS							
AMP 1								
PA57-24 Duryea	Comprehensive Rehab	1460		-0-	19,777.50	19,777.50	18,840.00	
PA57-25 Swoyersville	Comprehensive Rehab	1460		-0-	9,762.50	9,762.50	7,715.00	
				-0-	29,540.00	29,540.00	26,555.00	

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.