

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Housing Authority of Florence</u> PHA Code: <u>SC027</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/20112</u>																										
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>809</u> Number of HCV units: <u>772</u>																										
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1" style="width: 100%;"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
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PHA 2:																											
PHA 3:																											
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
<b>5.1</b>	<b>Mission.</b> 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: <b>Annual Plan – N/A</b>																										
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <b>Annual Plan – N/A</b>																										
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <b>Revision to the ACOP; Revision to the HCV Administrative Plan; Revision to the Reasonable Accommodation Policy and Procedures.</b> (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. <b>Agency Annual Plan is available at our Central Office Cost Center, our Church Hill Admin office, our Parkview Plaza Admin office and our Creekside Village Admin Office.</b>																										
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>  <b>SC027-1, Royal Gardens..... We have submitted our application and been approved for Disposition/Demolition of Royal Gardens (all 50 units); We have submitted an application and been approved for a LIHTC to build 36 units (Phase I of McGowan Commons) utilizing both the existing property as well as additional purchased property surrounding the area to be included in the mixed financing venture. We are moving through the steps necessary to do a mixed financed housing community. We plan to submit PHASE II (McGowan Commons) as early as permissible, and proceed with a PHASE III (McGowan Commons) and possibly a PHASE IV (McGowan Commons) at this same location. This may require some changes to our disposition application for the SC027-1 property.</b>  <b>Additionally, Homeownership Programs are not applicable.</b>  <b>We are planning to use approximately 8-15 Project-based Vouchers at McGowan Commons during PHASE I. We plan to use approximately 8 – 20 Project based vouchers at McGowan Commons during PHASE II.</b>  <b>We have three vacant lots (SC027-20) which have been HUD approved for dispo. We continue to work on final paperwork to complete the dispo. We want to include these three in this plan in case we do not get it completed prior to this plan year.</b>																										
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable. <b>For 8.1 and 8.2 below, See Attachments SC027i01; SC027j01; SC027k01, SC027l01 &amp; SC027m01.</b>																										
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. <b>See 8.0</b>																										

8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). <b>Large capital items must be included in the Five-Year Action Plan.</b>  <b>See 8.0</b></p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input checked="" type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p><b>Housing Needs.</b> 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.  <b>Annual Plan –N/A</b></p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> 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. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b>  <b>Annual Plan – N/A</b></p>
10.0	<p><b>Additional Information.</b> 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.  <b>We are a high performer and this is not required in this Annual Plan</b></p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”  <b>We are a high performer and this is not required in this Annual Plan</b></p>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> 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. <b>Note:</b> 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) <b>See Attachment SC027a01</b></p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) <b>See Attachment SC027b01</b></p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) <b>See Attachment SC027c01</b></p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) <b>See Attachment SC027d01</b></p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) <b>See Attachment SC027d01</b></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.  <b>See Attachment SC027e01</b></p> <p>(g) Challenged Elements, <b>See Attachment SC027f01</b></p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) <b>See 8.0</b></p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) <b>See 8.0</b></p> <p>(j) <b>VAWA – See Attachment SC027g01</b></p> <p>(k) <b>Form HUD-50077-CR, Civil Rights Certification. See Attachment SC27h01</b></p>



**PHA Certifications of Compliance  
with PHA Plans and Related  
R e g u l a t i o n s**

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

**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 X \_\_\_ Annual PHA Plan for the PHA fiscal year beginning October 1, 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.

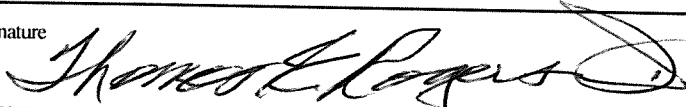
Housing Authority of Florence  
 PHA Name

SC027  
 PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20 - 20

Annual PHA Plan for Fiscal Years 2010- 2014

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, <b>Thomas E. Rogers, Jr.</b>	Title, <b>Chairman</b>
Signature 	Date <b>5-22-12</b>

Attachment SC027b01 (1 of 2)  
**Certification for  
a Drug-Free Workplace**

U.S. Department of Housing  
and Urban Development

Applicant Name

Housing Authority of Florence

Program/Activity Receiving Federal Grant Funding

Capital Funds

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 Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

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

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

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

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

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

See Attachment

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

Cynthia W. Williams

Title

Executive Director

Signature

Date

5/29/12

**HOUSING AUTHORITY OF FLORENCE  
EAST 400 PINE STREET  
FLORENCE, SOUTH CAROLINA 29506**

**2. Sites for Work Performance**

**Central Admin./ Maint.  
400 East Pine Street  
Florence, South Carolina 29506  
(Florence County)**

**Royal Gardens Apartments (NA)  
East Coker Street  
Florence, South Carolina 29506  
(Florence County)**

**Churchhill Apartments  
Prout Drive & June Lane  
Florence, South Carolina 29506  
(Florence County)**

**Oakland Place Apartments  
Oakland Ave., Layton St., & Rose St.  
Florence, South Carolina 29506  
(Florence County)**

**Waverly Acres Apartments  
Waverly Avenue  
Florence, South Carolina 29506  
(Florence County)**

**Pine Park Apartments  
Pine Street & Johns Street  
Florence, South Carolina 29506  
(Florence County)**

**Clyde Court Apartments  
Clyde St., Jarrott St., & Gaillard St.  
Florence, South Carolina 29506  
(Florence County)**

**Creekside Village Apartments  
2711 West Palmetto Street  
Florence, South Carolina 29506  
(Florence County)**

**Pine Acres Apartments  
First Ave., Second Ave. & Elm St.  
Pamplico, South Carolina 29583  
(Florence County)**

**Lakota Place Apartments  
Lakota Drive  
Florence, South Carolina 29505  
(Florence County)**

**Scattered Site Houses (160 Units)  
Various Addresses  
Florence, South Carolina 29501  
(Florence County)**

**Bridgeland Apartments  
Davenport Drive & Greene Drive  
Timmons ville, SC 29161  
(Florence County)**

**Parkview Plaza Apartments  
Clements Street  
Florence, South Carolina 29506  
(Florence County)**

# Certification of Payments to Influence Federal Transactions

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

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

Attachment SC027c01

Applicant Name

Housing Authority of Florence

Program/Activity Receiving Federal Grant Funding

Capital Fund

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

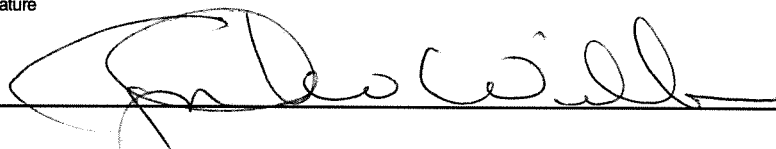
Cynthia W. Williams

Title

Executive Director

Signature

Date (mm/dd/yyyy)



5/29/12




**DISCLOSURE OF LOBBYING ACTIVITIES**

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	<b>2. Status of Federal Action:</b> <input checked="" type="checkbox"/> a. bid/offer/application b. initial award c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Housing Authority of Florence 400 East Pine Street Florence, SC 29506  <b>Congressional District, if known:</b> 4c	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>   <b>Congressional District, if known:</b>	
<b>6. Federal Department/Agency:</b>  Public Housing	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> <i>(if individual, last name, first name, MI):</i>	<b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	<b>Signature:</b>  <b>Print Name:</b> Cynthia W. Williams <b>Title:</b> Executive Director <b>Telephone No.:</b> 843-669-4163 <b>Date:</b> 5/29/12	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

Attachment SC027e01, Resident Advisory Board Comments  
Housing Authority of Florence

RESIDENT ADVISORY BOARD COMMENTS  
REGARDING THE ANNUAL AGENCY PLAN FOR 2012  
HOUSING AUTHORITY OF FLORENCE

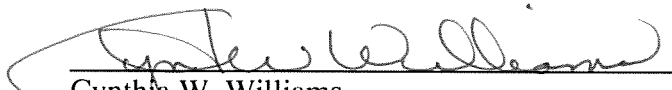
The staff met with the Resident Advisory Board to discuss information pertaining to the 2012 Annual Agency Plan for the period October 1, 2012 through September 30, 2013.

Primary focus was on the Capital Fund line items. These were discussed in detail. There were no additional requests to be considered for inclusion in this plan.

The Executive Director went over areas that would be revised for fiscal year beginning October 1, 2012:

- Revisions to the ACOP, HCV Admin Plan, 504 Reasonable Accommodations Policy.
- Capital Fund Plan extensively.

Various comments were made by the board and staff. There were several recommendations/comments for routine maintenance work to be addressed. With the discussion of the proposed work included in the plan, there were no additional items recommended to be considered for inclusion in our Annual Plan.

  
Cynthia W. Williams  
Executive Director

Attachment SC027f01, Challenged Elements  
Housing Authority of Florence


HOUSING AUTHORITY OF FLORENCE

ANNUAL AGENCY PLAN

BEGINNING OCTOBER 1, 2012

**CHALLENGED ELEMENTS**

There were NO challenged elements during the Public Hearing nor the Resident Advisory Board Meetings.

  
\_\_\_\_\_  
Cynthia W. Williams  
Executive Director

## **Attachment SC027g01**

### Housing Authority of Florence

Pursuant to HUD's requirement that our Five-Year and Annual Plan contain information regarding our goals, objectives, policies, or programs that will enable us to serve the needs of child and adult victims of domestic violence, dating violence, sexual assault, or stalking we have including the following:

The following is taken from our ACOP based on The Violence Against Women and Justice Department Reauthorization Act of 2005 that protects qualified tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them.

#### **10.4 DOMESTIC VIOLENCE POLICY**

The pervasiveness and seriousness of domestic violence has illuminated it as an issue of national importance. In many instances, victims of domestic violence suffer not only the physical abuse, but also the devastation of being displaced from their homes. As a result, affordable housing issues become a serious consequence of domestic violence.

As a provider of low income affordable housing, the Housing Authority recognizes the need to establish provisions to enable victims of Domestic Violence to attain decent, safe and sanitary housing in an environment and under conditions that would help them to address their housing needs while removing themselves and families member from the abusive situation.

- A. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be construed as serious or repeated violations of the lease or other "good cause" for termination of the assistance, tenancy, or occupancy rights of such a victim.
- B. Criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of domestic violence, dating violence, or stalking.
- C. Notwithstanding any restrictions on admission, occupancy, or terminations of occupancy or assistance, or any Federal, State or local law to the contrary, a PHA, owner or manager may "bifurcate" a lease, or otherwise remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others. This action may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by Federal, State, and local law for the termination of leases or assistance.
- D. Nothing in this section may be construed to limit the authority of a public housing agency, owner, or manager, when notified, to honor court orders addressing rights of access or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members in cases where a family breaks up.
- E. Nothing in this section limits any otherwise available authority of an owner or manager to evict or the public housing agency to terminate assistance to a tenant for any violation of a lease not premised on the act or acts of violence in question against the tenant or a member of the tenant's household, provided that the owner, manager, or public housing agency does not subject an individual who is or has been a victim of domestic violence, dating violence, or stalking to a more demanding standard than other tenants in determining whether to evict or terminate.
- F. Nothing in this section may be construed to limit the authority of an owner or manager to evict, or the public housing agency to terminate assistance, to any tenant if the owner, manager, or public housing agency can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant is not evicted or terminated from assistance.
- G. Nothing in this section shall be construed to supersede any provision of any Federal, State, or local law that provides greater protection than this section from victims of domestic violence, dating violence, or stalking.

**Civil Rights Certification**

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

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

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

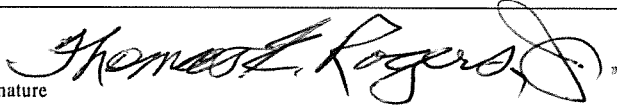
The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further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

Housing Authority of Florence

SC027

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	
Name of Authorized Official	Title
Thomas E. Rogers, Jr.	Chairman
Signature	Date
	5-22-12

**Part I: Summary**

**PHA Name:** Housing Authority of Florence  
**Grant Type and Number:** Capital Fund Program Grant No: SC16P02750112 Replacement Housing Factor Grant No:  
**FFY of Grant:** 2012  
**FFY of Grant Approval:** 2012  
**Date of CFFP:** \_\_\_\_\_

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	\$3,000			
4	1410 Administration	\$108,230.08			
5	1411 Audit	\$2,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$130,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$432,355			
11	1465.1 Dwelling Equipment—Nonexpendable	\$10,000			
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment	\$22,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$374,716.92			
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$1,082,302			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security—Soft Costs				
24	Amount of line 20 Related to Security--Hard Costs	\$3,000			
25	Amount of line 20 Related to Energy Conservation Measures	\$10,000			



**Part II: Supporting Pages**

PHA Name:		Grant Type and Number		FFY of Grant:				
Housing Authority of Florence		Capital Fund Program Grant No: SC16P02750112 Replacement Housing Factor Grant No:		2012				
		CFFP (Yes/No): No						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Management	Security Patrols	1408	1 Officer	\$3,000	\$3,000	\$3,000	\$736	
HA Wide Administration	1) IFB/RFP Advertising Costs 2) CFP Management Fee	1410 1410	N/A N/A	\$4,876 \$104,000	\$4,230 \$104,000.08	\$104,000.08	0 0	
HA Wide Audit	CFP Audit Costs	1411	4 Years	\$2,000	\$2,000	\$2,000	0	
HA Wide Fees/Costs	1) Annual UPCS Inspections 2) Reproduction Costs 3) Construction Inspection Costs	1430 1430 1430	1 Firm N/A 2 Staff	\$8,000 \$2,000 \$120,000	\$8,000 \$2,000 \$120,000	0 0 \$120,000	0 0 0	
27-3 Church Hill	Roofing	1460	43 Bldgs	\$336,709	\$314,709	0	0	
27-4 Oakland	Roofing	1460	17 Bldg	\$117,000	\$117,646	0	0	
HA Wide Dwelling Equip.	Appliances	1465	25 Units	\$10,000	\$10,000	0	0	
HA Wide Non-Dwelling Equipment	Purchase of Vehicle	1475	1 Vehicle	0	\$22,000	0	0	
HA Wide Debt Service	CFP Bond Debt Service	9000	N/A	\$374,717	\$374,716.92	\$374,716.92	0	









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 4/30/2011

Part II: Supporting Pages—Physical Needs Work Statement(s)		Work Statement for Year: 4			Work Statement for Year: 5		
Work Statement for Year 1	Work Statement for Year: 4 FFY Grant: 2015	Quantity	Estimated Cost	Work Statement for Year: 5 FFY Grant: 2016	Quantity	Estimated Cost	
	Development Number/Name PHA Wide			Development Number/Name PHA Wide			
Assess	Operations	N/A	\$50,000	Operations	N/A	\$50,000	
Assess	CFP Management Fee	N/A	\$104,000.08	CFP Management Fee	N/A	\$104,000.08	
Assess	Advertising Costs	N/A	\$4,230	Advertising Costs	N/A	\$4,230	
Assess	Audit Costs	4 Years	\$2,000	Audit Costs	4 Years	\$2,000	
Assess	Construction Inspection Costs	2 Staff	\$85,000	Construction Inspection Costs	2 Staff	\$100,000	
Assess	Annual UPCS Inspections	1 Firm	\$8,000	Annual UPCS Inspections	1 Firm	\$8,000	
Assess	Reproduction Costs	N/A	\$2,000	Reproduction Costs	N/A	\$2,000	
Assess	Computer Hardware	N/A	\$5,000	27-10 Bridgeland			
Assess	Appliances	15 Units	\$10,000	A&E Services (Lift Station)	1 Firm	\$2,000	
Assess	5 Year Energy Audit	1 Firm	\$4,500	Site Work – Lift Station	1 Site	\$7,000	
Assess	CFPP Debt Service	N/A	\$374,716.92	Site Work – Clothespole Pads / Landscaping	1 Site	\$15,000	
Assess	27-2 / Pine Park – Clyde Court			Interior Flooring	50 Units	\$10,000	
Assess	A&E Services – HVAC	1 Firm	\$15,000	Interior Doors	50 Units	\$5,000	
Assess	HVAC / Electrical Upgrade	72 Units	\$216,727	A/C Knockout Panels	50 Units	\$10,000	
Assess	27-11 / Parkview Plaza			Fencing	1 Site	\$5,000	
Assess	A&E Services – HVAC	1 Firm	\$7,000	27-2 / Pine – Clyde – Lakota			
Assess	HVAC / Electrical Upgrade	26 Units	\$125,000	Site Work – Clothespole Pads / Landscaping	3 Sites	\$15,000	
Assess	27-12 / Creekside Village			Interior Flooring	2 Sites	\$10,000	
Assess	Electric Meter Conversion	100 Units	\$19,878	Fencing (Pine Park)	1 Site	\$5,000	
Assess	Water Heater s (2-300 Gal. Storage Tanks)	2 Each	\$46,250	Interior Doors	2 Sites	\$2,000	
Assess				Exterior Metal Stairs/Railings	1 Site	\$5,000	
Assess				27-3 / Church Hill			
Assess				Site Work – Clothespole Pads / Landscaping	1 Site	\$15,000	
Assess				Site Work – Sewer / Storm Drains	1 Site	\$5,000	
Assess				Interior Flooring	166 Units	\$30,000	
Assess				Interior Doors	166 Units	\$5,000	
Assess				Bathroom Renovations	166 Units	\$6,355	
Assess				Exterior Metal Stairs/Railings	1 Site	\$5,000	
Assess							
Assess	Subtotal of Estimated Cost		\$1,079,302				







**Part I: Summary**

<p><b>PHA Name:</b> Housing Authority of Florence</p>	<p><b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16RO27501-12 Date of CFFP _____</p>	<p><b>FFY of Grant: 2012</b> <b>FFY of Grant Approval:</b> 2012</p>
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Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
		<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
1	Total non-CFFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities	\$8,291			
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)				
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
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				





















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

<b>Part I: Summary</b>		<b>Grant Type and Number</b>		<b>FFY of Grant: 2011</b>	
PHA Name: Housing Authority of Florence		Capital Fund Program Grant No: SC16P02750111		FFY of Grant Approval: 2011	
		Replacement Housing Factor Grant No:			
		Date of CFFP:			

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012	Summary by Development Account	Original	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
				Revised <sup>2</sup>	Final Performance and Evaluation Report <sup>3</sup>		Expended	
1		Total non-CFF Funds						
2		1406 Operations (may not exceed 20% of line 21) <sup>4</sup>	\$144,000			\$144,000		
3		1408 Management Improvements	\$3,000			\$3,000		\$3,000
4		1410 Administration (may not exceed 10% of line 21)	\$120,443			\$115,000		\$115,000
5		1411 Audit	\$2,000			\$2,000		
6		1415 Liquidated Damages						
7		1430 Fees and Costs	\$140,000			\$128,000		\$147,70
8		1440 Site Acquisition						
9		1450 Site Improvement	\$120,000					
10		1460 Dwelling Structures	\$264,000	\$2,100		\$177,971		
11		1465.1 Dwelling Equipment—Nonexpendable	\$10,000			\$10,000		\$10,000
12		1470 Non-dwelling Structures	\$45,000			\$8,763		
13		1475 Non-dwelling Equipment						
14		1485 Demolition	\$5,000					
15		1492 Moving to Work Demonstration						
16		1495.1 Relocation Costs						
17		1499 Development Activities <sup>4</sup>						

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

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

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

**Part I: Summary**

PHA Name: Housing Authority of Florence	Grant Type and Number Capital Fund Program Grant No: SCI6P02750111 Replacement Housing Factor Grant No: Date of CFPP:	FFY of Grant: 2011 FFY of Grant Approval: 2011
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Line	Type of Grant	Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012 <input type="checkbox"/> Reserve for Disasters/Emergencies	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment			\$374,716,827.70		\$374,716,827.70	
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 - 19)			\$1,228,160		\$776,717	\$137,086
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			\$3,000			
25	Amount of line 20 Related to Energy Conservation Measures			\$105,000			
Signature of Executive Director <i>Cynthia W. Williams</i>				Date April 1, 2012	Signature of Public Housing Director <i>Eric A. Biekeley</i>		Date <i>6/22/12</i>

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

*Eric A. Biekeley*  
 Director  
 Public Housing Program Center



<sup>2</sup> To be completed for the Performance and Evaluation Report.  
 Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

Part III: Implementation Schedule for Capital Fund Financing Program						Federal FFY of Grant: 2011	Reasons for Revised Target Dates
PHA Name: Housing Authority of Florence							
Development Number Name/PHA-Wide Activities	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date			
HA Wide Operations	8/2/2013	9/30/2011	8/2/2015				
HA Wide Management	8/2/2013	9/30/2011	8/2/2015				
HA Wide Administration	8/2/2013	9/30/2011	8/2/2015				
HA Wide Audit	8/2/2013		8/2/2015				
HA Wide Fees & Costs	8/2/2013		8/2/2015				
27-1 Royal Gardens	8/2/2013		8/2/2015				
27-3 Church Hill	8/2/2013		8/2/2015				
27-10 Bridgeland	8/2/2013		8/2/2015				
27-11 Parkview Plaza	8/2/2013		8/2/2015				
27-12 Creekside Village	8/2/2013		8/2/2015				
HA Wide Dwelling Equipment	8/2/2013	12/31/2011	8/2/2015				
HA Wide Debt Service	8/2/2013	9/30/2011	8/2/2015				

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

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

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

Part I: Summary

PHA Name:  
 Housing Authority of Florence

Grant Type and Number  
 Capital Fund Program Grant No: SC16P02750110  
 Date of CFFP

Replacement Housing Factor Grant No:

FFY of Grant:  
 2010  
 FFY of Grant Approval:  
 2010

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$144,000		\$144,000	\$144,000
3	1408 Management Improvements	\$3,000		\$3,000	\$3,000
4	1410 Administration	\$142,991	08 2320	\$142,991	08 232
5	1411 Audit	\$2,000		\$2,000	\$500
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$133,000		\$133,000	\$42,477
8	1440 Site Acquisition				
9	1450 Site Improvement	\$134,682		\$134,682	\$134,682
10	1460 Dwelling Structures	\$436,021		\$130,829	\$130,829
11	1465.1 Dwelling Equipment—Nonexpendable	\$29,968		\$29,968	\$29,968
12	1470 Non-Dwelling Structures	\$3,100		\$3,100	\$3,100
13	1475 Non-Dwelling Equipment				
14	1485 Demolition	0		0	0
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$26,440		\$26,440	\$26,440
17	1499 Development Activities				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$374,716	98 232	\$374,716	98 232
19	1502 Contingency	0		0	0
20	Amount of Annual Grant (sum of lines 2-19)	\$1,429,919		\$1,124,727	\$657,987
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security—Soft Costs				
24	Amount of line 20 Related to Security—Hard Costs	\$3,000		\$3,000	\$3,000
25	Amount of line 20 Related to Energy Conservation Measures	\$29,968		\$29,968	\$29,968

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

<b>Part I: Summary</b>		
PHA Name: Housing Authority of Florence	Grant Type and Number Capital Fund Program Grant No: SC16P02750110 Date of CFFP _____	FFY of Grant: 2010 FFY of Grant Approval: 2010
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012 <input type="checkbox"/> Final Performance and Evaluation Report		
Signature of Executive Director  Cynthia W. Williams	Date April 1, 2012	Signature of Public Housing Director  Eric A. Bickley
		Date 6/26/12

Eric A. Bickley  
 Director  
 Public Housing Program Center

Part II: Supporting Pages		Grant Type and Number		FFY of Grant:				
PHA Name:		Capital Fund Program Grant No: SC16P02750110		2010				
Housing Authority of Florence		Replacement Housing Factor Grant No:		CFPP (Ycs/No): No				
Development Number/PHA-Wide Activities	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Ha Wide Operations	Operations	1406	N/A	\$144,000		\$144,000	\$144,000	Complete
Ha Wide Operations	Security Patrols	1408	1 Officer	\$3,000		\$3,000	\$3,000	Complete
Management								
HA Wide Administration	1) IFB/RFP Advertising Costs	1410	N/A	\$4,491		\$4,491	\$4,491	Complete
	2) CFP Management Fee	1410	N/A	\$138,500	<del>2,342</del>	\$138,500	\$138,500	Complete
HA Wide Audit	CFP Audit Costs	1411	4 Years	\$2,000		\$2,000	\$500	Ongoing Expenditure
HA Wide Fees/Costs	1) Annual UPSC Inspections	1430	1 Firm	\$7,009		\$7,009	\$7,009	Complete
	2) Reproduction Costs	1430	N/A	\$1,841		\$1,841	\$1,841	Complete
	3) Construction Inspection Costs	1430	2 Staff	\$120,000		\$120,000	\$29,476	Ongoing Expenditure
	4) A&E Services - Waverly Site	1430	1 Firm	\$4,150		\$4,150	\$4,150	Complete
27-1 Royal Gardens	1) Asbestos Abatement	1460	50 Units	\$25,035		\$25,035	\$25,035	Complete
	2) Relocation Costs	1495.1	50 Units	\$26,440		\$26,440	\$26,440	Complete
27-2 Clyde Court	Site Work - Storm Drainage	1450	1 Site	\$10,800		\$10,800	\$10,800	Complete
27-3 Church Hill	Roofing	1460	43 Bldgs	\$305,192		0	0	Shift From 5-Year Plan
27-5 Waverly	Site Work - Sewer Lines	1450	1 Site	\$57,141		\$57,141	\$57,141	Complete
27-10 Bridgeland	1) Site Work - Erosion Control	1450	1 Site	\$64,821		\$64,821	\$64,821	Complete
	2) AMC Storefront Entrance	1470	1 Bldg	\$3,100		\$3,100	\$3,100	Complete
27-11 Parkway	Site Work - Water Lines	1450	1 Site	\$1,920		\$1,920	\$1,920	Complete
27-20 Houses	Kitchen Renovations	1460	40 Units	\$105,794		\$105,794	\$105,794	Complete
HA Wide	Appliances	1465	50 Units	\$29,968		\$29,968	\$29,968	Complete
Dwelling Equip.								
HA Wide Debt Service	CFP Bond Debt Service	9000	N/A	\$374,711	<del>678</del>	\$374,711	<del>98,200</del> 0	Ongoing Expenditure





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

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

Part I: Summary

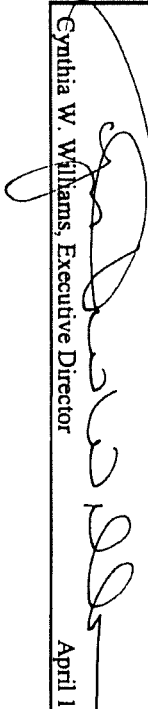

PHA Name: Housing Authority of Florence	Grant Type and Number Capital Fund Program Grant No: SC16P02750109 Date of CFFP	Replacement Housing Factor Grant No:	FFY of Grant: 2009
			FFY of Grant Approval: 2009

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$153,000	153,000	153,000	153,000
3	1408 Management Improvements	\$3,000	3,000	3,000	3,000
4	1410 Administration	\$143,561	143,561	143,561	143,561
5	1411 Audit	\$2,000	2,000	2,000	1,500
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$150,169	150,169	150,169	150,169
8	1440 Site Acquisition				
9	1450 Site Improvement	\$66,571	66,571	66,571	66,571
10	1460 Dwelling Structures	\$545,257	545,257	545,257	545,257
11	1465.1 Dwelling Equipment--Nonexpendable	\$1,064	1,064	1,064	1,064
12	1470 Non-Dwelling Structures	\$1,120	1,120	1,120	1,120
13	1475 Non-Dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$374,716	374,716	374,716	218,585
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$1,440,459		\$1,440,459	\$1,286,827
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security--Soft Costs				
24	Amount of line 20 Related to Security--Hard Costs	\$3,000		\$3,000	\$3,000
25	Amount of line 20 Related to Energy Conservation Measures	\$4,045		\$4,045	\$4,045

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

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

Part I: Summary

PHA Name: Housing Authority of Florence		Grant Type and Number Capital Fund Program Grant No: SC16P02750109 Date of CFFP _____		Replacement Housing Factor Grant No:		FFY of Grant: 2009	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )		<input type="checkbox"/> Final Performance and Evaluation Report		FFY of Grant Approval: 2009	
Signature of Executive Director				Date		Signature of Public Housing Director	
 Cynthia W. Williams, Executive Director				April 1, 2012		 Eric A. Bickley Director Public Housing Program Center	

Annual Statement/Performance and Evaluation Report  
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 Expires 4/30/2011

**Part II: Supporting Pages**

PHA Name:		Grant Type and Number		FFY of Grant:				
Housing Authority of Florence		Capital Fund Program Grant No: SC16P02750109 Replacement Housing Factor Grant No:		2009				
		CFFP (Yes/No): No						
Development Number/PHA-Wide Activities	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Operations	Operations	1406	N/A	\$153,000, <del>00</del> <sup>7374</sup>		\$153,000, <del>00</del> <sup>7374</sup>		complete
HA Wide Operations	Security Patrols	1408	1 Officer	\$3,000		\$3,000		Complete
Management								
HA Wide Administration	1) IFB/RFP Advertising Costs 2) CFP Management Fee	1410 1410	N/A N/A	\$2,561 \$141,000		\$2,561 \$141,000		Complete Complete
HA Wide Audit	CFP Audit Costs	1411	4 Years	\$2,000		\$1,500		Ongoing Expenditure
HA Wide Fees/Costs	1) Annual UPCS Inspections 2) Energy Audit (5 Year) 3) Reproduction Costs 4) Construction Inspection Costs 5) Soil & Concrete Testing	1430 1430 1430 1430 1430	1 Firm 1 Firm N/A 2 Staff 1 Firm	\$7,474 \$4,045 \$1,691 \$125,768 \$11,191		\$7,474 \$4,045 \$1,691 \$125,768 \$11,191		Complete Complete Complete Complete Complete
27-3 Church Hill	Refinish Interior Stairs	1460	130 Units	\$106,400		\$106,400		Complete
27-4 Oakland	1) Refinish Interior Stairs 2) Electrical Upgrade 3) Appliances	1460 1460 1465	48 Units 12 Units 64 Units	\$39,120 \$2,880 \$1,064		\$39,120 \$2,880 \$1,064		Complete Complete Complete
27-5 Waverly	Refinish Interior Stairs	1460	20 Units	\$16,300		\$16,300		Complete
27-11 Parkview	1) Site Work - Parking Lots 2) Fire Alarm System Upgrade	1450 1460	1 Site 1 Bldg	\$66,571 \$28,548		\$66,571 \$28,548		Complete Complete
27-12 Creekside	1) Elevator Upgrade 2) Fire Alarm System Upgrade	1460 1460	1 Bldg 1 Bldg	\$100,354 \$75,044		\$100,354 \$75,044		Complete Complete
27-20 Scattered Site	1) Interior Flooring 2) Bath Renovations	1460 1460	159 Units 40 Units	\$170,553 \$6,058		\$170,553 \$6,058		Complete Complete
Non-Dwelling Structures	Territe Treatment	1470	1 Bldg	\$1,120		\$1,120		Complete
HA Wide Debt Service	CFP Bond Debt Service	9000	N/A	\$374,716 <sup>92 7374</sup>		\$374,716 <sup>92 7374</sup>	\$218,585	Ongoing Expenditure

