

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

Small PHA Plan Update
Annual Plan for Fiscal Year: **2001**

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Housing Authority of Fort Mill

PHA Number: SC036

PHA Fiscal Year Beginning: (mm/yyyy) 07/2001

PHA Plan Contact Information:

Name: L. Thomas Rowe

Phone: 803-547-6787 Ext. 23

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Email (if available): TROWE@InfoAve.Net

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- Main administrative office of the PHA
- PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- Main administrative office of the local, county or State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

PHA Programs Administered:

- Public Housing and Section 8 Section 8 Only Public Housing Only

Annual PHA Plan
Fiscal Year 20
 [24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Contents	<u>Page #</u>
Annual Plan	
Annual Plan Information	I
i. Table of Contents	1
ii. Executive Summary	2
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2. Capital Improvement Needs	3
3. Demolition and Disposition	3
4. Homeownership: Voucher Homeownership Program	4
5. Crime and Safety: PHDEP Plan	5
6. Other Information:	
A. Resident Advisory Board Consultation Process	5
B. Statement of Consistency with Consolidated Plan	6
C. Criteria for Substantial Deviations and Significant Amendments	7
Attachments	
<input checked="" type="checkbox"/> Attachment A : Supporting Documents Available for Review	
<input checked="" type="checkbox"/> Attachment <u>B</u> : Capital Fund Program Annual Statement	
<input checked="" type="checkbox"/> Attachment <u>C</u> : Capital Fund Program 5 Year Action Plan	
<input checked="" type="checkbox"/> Attachment <u>D</u> : Public Housing Drug Elimination Program (PHDEP) Plan	
<input checked="" type="checkbox"/> Attachment <u>E</u> : Resident Membership on PHA Board or Governing Body	
<input checked="" type="checkbox"/> Attachment <u>F</u> : Membership of Resident Advisory Board or Boards	
<input type="checkbox"/> Attachment <u> </u> : Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
SC036g01 – Annual Statement/Performance and Evaluation Report CIAP 1999	
SC036h01 – Annual Statement/Performance and Evaluation Report Capital Fund 2000.	

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

The Annual Plan for the Housing Authority of Fort Mill, South Carolina covers the period beginning July 1, 2001 and runs through June 30, 2002. The Annual Plan for FFY 2001 updates the Five Year Capital Needs Plans and plans for the Capital Improvements that will be covered in the FFY 2001 Capital Funding Allocations. The Plan also covers the anticipated programs for the PHDEP 2001 Funding, which will provide for Security and an After-School Program for the Learning Center.

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Public Housing Admissions and Continued Occupancy Plan were updated to bring all definitions in line with the new Federal Regulations. The admission preferences, rent policies, waiting list management, and selections and exceptions policies remained as stated in the prior year Annual Plan. The ACOP did incorporate the community service requirements and pet policy requirements.

The Section 8 Administrative Plan referencing Payment Standards have been modified from the previous Annual Plan whereby the Housing Authority of Fort Mill's Payment Standard is now at 100% of the FMR.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ Est. \$247,840

C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C
In an Excel Spreadsheet

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component ; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/>	
Disposition <input type="checkbox"/>	
3. Application status (select one)	
Approved <input type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	
Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>	
5. Number of units affected:	
6. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input type="checkbox"/> Total development	
7. Relocation resources (select all that apply)	
<input type="checkbox"/> Section 8 for units	
<input type="checkbox"/> Public housing for units	
<input type="checkbox"/> Preference for admission to other public housing or section 8	
<input type="checkbox"/> Other housing for units (describe below)	
8. Timeline for activity:	
a. Actual or projected start date of activity:	
b. Actual or projected start date of relocation activities:	
c. Projected end date of activity:	

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner down-payment requirement of at least 3 percent and requiring that at least 1 percent of the down-payment comes from the family's resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

=

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ Est. \$32,550

C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. Yes No: The PHDEP Plan is attached at Attachment D

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are Attached at Attachment (File name)

3. In what manner did the PHA address those comments? (select all that apply)

- The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 - Yes No: below or
 - Yes No: at the end of the RAB Comments in Attachment ____.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
- Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (State of South Carolina)

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

- Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

Substantial Deviation from the 5-year Plan is defined as changes in the goals and objectives of the Housing Authority of Fort Mill.

B. Significant Amendment or Modification to the Annual Plan:

Significant Amendment or Modification to the Annual Plan will be defined as follows:

- Changes to rent or admission policies or organization of the waiting list.
- Additions of non-emergency work items (not included in the Capital Fund Annual Statement or Five Year Action Plan).
- Addition of new activities not included in the current PHDEP Plan.
- Any changes or demolition, designation, homeownership programs, or conversion activities.

“Significant Amendment or Modification” does not include any changes in HUD regulations or requirements.

Attachment A
Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
X	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

ATTACHMENT B

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Housing Authority of Fort Mill 105 Bozeman Drive Fort Mill, SC 29715		Grant Type and Number Capital Fund Program: 2001 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line 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					
4	1410 Administration					
5	1411 Audit					
6	1415 liquidated Damages					
7	1430 Fees and Costs	18,200				
8	1440 Site Acquisition					
9	1450 Site Improvement	5,890				
10	1460 Dwelling Structures	223,750				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2-19)	247,840				
21	Amount of line 20 Related to LBP Activities	-0-				
22	Amount of line 20 Related to Section 504 Compliance	-0-				
23	Amount of line 20 Related to Security	-0-				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: Housing Authority of Fort Mill 105 Bozeman Drive Fort Mill, SC 29715	Grant Type and Number Capital Fund Program: 2001 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement

 Reserve for Disasters/ Emergencies

 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending:

 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures	223,750			

ATTACHMENT D

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

A. Amount of PHDEP Grant \$32,550

B. Eligibility type (Indicate with an “x”)

N1 _____ N2 _____ R X

C. FFY in which funding is requested 2001

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

The Housing Authority of Fort Mill will use the PHDEP funds to support funding of our evening Security Officers and our Learning and Resource Center. The Housing Authority contracts with the Town of Fort Mill’s off duty police officers to provide security services to the four developments; the security is provided five nights per week at six hours per night. We have seen crime reduced and police calls to the communities become almost non-existent since employing the police officers. The Housing Authority offers an afternoon tutoring program for the children of our developments, where the children of all ages may come and received assistance with their studies, as well as work-studies on drugs, crime and teen pregnancy. We monitor the children’s grades, and have seen them bring “d & E’s” up to A & B’s; we have the support of the local school system for our program.

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
36-001	46	89
36-002	48	97
36-004	28	61
36-009	20	67

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an “x” to indicate the length of program by # of months. For “Other”, identify the # of months).

12 Months_____ **18 Months**_____ **24 Months** X

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997 X	50,000	SC16DEP0360197	-0-	6 Months	1/3/1997	6/2/2000
FY1998 X	50,000	SC16DEP0360198	-0-	N/A	12/24/1998	12/25/2000
FY 1999 X	33,412	SC16DEP0360199	3,710.90	N/A	1/24/2000	1/4/2002

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

The Housing Authority of Fort Mill has taken and continues to take a pro-active stance on the battle of drugs and crime in public housing. We work to maintain a drug/crime-free community, and this accomplished by employing the off duty police officers for security.

There are several objectives for the security patrol in the four communities:

- Closely scrutinize parking decals/license tags
- Eliminate pass-through traffic
- Give the FMHA an “eye” in the targeted communities
- Eliminate the incidence of drug activity (including alcohol) in the streets
- Give the targeted community residents a greater sense of security and a safer place to live, especially the children and youth. This objectives is realized when the PHDEP Survey is reviewed and the level of safety and satisfaction the residents feel.

- Initiate a positive relationship with the youth of the targeted communities; helping them to understand the need for a safe community and working with law enforcement officials.

Additionally the security officers are required to forward incident reports and relative documentation to the proper management representatives of the Housing Authority of Fort Mill. Evaluation of this component will be accomplished through resident surveys and summary data of police nightly reports and incident reports of our communities.

The Learning Center offers program services on a twelve- month basis, however this grant is centered around the after school program for the children and youth, which covers the school year.

Adult leadership and consistency will be afforded to the children and youth of our communities. Many of our children and youth seek the desire of stability and leadership in their life, but lack the resources or ability to achieve the asset of life. It is the goal of the Learning Center to assist our children and youth in achieving these goals. Goals will be measured through the program and user evaluations of the programs. Grades will be monitored, which will be the greatest evaluation tool available.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY <u>2001</u> PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	24,920
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	7,630
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	32,550

PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9120 - Security Personnel					Total PHDEP Funding: \$ 24,920		
Goal(s)	Continue to reduce crime in public housing. Continue to take a pro-active stance on the battle of drugs and crime in public housing developments and strive to maintain a crime free development.						
Objectives	<ul style="list-style-type: none"> • Eliminate pass-through traffic • Closely scrutinize parking decals/license tags in order to eliminate illegal guest and visitors • Give the FMHA an “EYE” in the targeted communities. • Eliminate the incidence of drug activity (including alcohol) in the streets • Give the targeted community residents a greater sense of security and a safer place to live, especially the children and youth. • Initiate a positive relationship with the youth of the targeted communities; helping them to understand the need for a safe community and working with law enforcement officials. • Strive to eliminate groups hanging out on the streets at night. • Make the communities of FMHA a positive place to live. 						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Employment of Security Officers			Jan. 2002	Dec. 2002	\$24,920	\$16,000 Patrol cruiser & equipment furnished by Town	Crime reduced from that of surrounding neighborhoods. Residents degree of feeling safe in the community.
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$ 7,630		
Goal(s)		<p>The cornerstone of the Learning Center is to be a partner with other local organizations in order to assist residents with achieving the ultimate goal of self-sufficiency through education, motivation and their willingness to succeed.</p> <p>To clearly demonstrate the Learning Center’s ability to promote and strengthen the overall effectiveness in preventing the development of traits and characteristics that lead to drug and alcohol abuse among young people.</p>					
Objectives		<ul style="list-style-type: none"> • Provide an atmosphere at the Learning Center that will function as a haven of leadership and stability; a quality many children do not have at home. • Instill in our residents attending the Center a sense of pride and accomplishment, enforcing that they can do, and presently do things well. • Provide a sense of usefulness. • Strive to provide an environment where young people know they have a safe place where they fit in and are accepted by their peers. • Promote and strengthen the overall effectiveness in preventing drug abuse among the children, youth and adults who attend the Center. • Provide educational tools for the students to assist them with their studies, and work with the students to improve their grades. 					
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Employee personnel to direct the After School Program for the Learning & Resources Center	20	School age Children ages 6-18	Jan. 2002	Dec. 2002	\$7,630	\$7,000 PHA Operating Budget	Improvement in Grades Attendance & Participation Parent Evaluations
2.							
3.							

Required Attachment E: Resident Member on the PHA Governing Board

1. Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

B. How was the resident board member selected: (select one)?

Elected

Appointed

C. The term of appointment is (include the date term expires):

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain):

B. Date of next term expiration of a governing board member: 09/16/2001

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

Charles E. Powers, Mayor – Town of Fort Mill

Required Attachment F : Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Harold L. Fields
Barbara A. Benjamin
Gloria D. Graham
Anita R. Taylor
Shalon Davis

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages--Work Activities

Activities for Year 1	Activities for Year : _____ FFY Grant: PHA FY:			Activities for Year: _____ FFY Grant: PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual						
Statement						
		Total CFP Estimated Cost	\$			\$

ATTACHMENT C

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name: Housing Authority of Fort Mill		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFT Grant: 2001 PHA FY: 2002	Work Statement for Year 3 FFY Grant: 2002 PHA FY: 2003	Work Statement for Year 4 FFY Grant: 2003 PHA FY: 2004	Work Statement for Year 5 FFY Grant: 2004 PHA FY: 2005
36-1 Bozeman Drive	Annual	\$ 45,300.00	\$ 157,470.00	\$ -	\$ -
36-2 Bozeman Drive	Statement	85,425.00	33,500.00	113,300.00	
36-4 Rea Circle/Scattered Sites		16,420.00	130,750.00	62,286.00	20,000.00
36-9 Anderson St. Homes		31,800.00			
HA-Wide		36,750.00			
CFP Funds Listed for 5-Year Planning		\$ 215,695.00	\$ 321,720.00	\$ 175,586.00	\$ 20,000.00
Replacement Housing Factor Funds					

ATTACHMENT C

**Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages--Work Activities**

Activities for Year : <u>2</u> FFY Grant: 2001 PHA FY: 2002			Activities for Year: <u>3</u> FFY Grant: 2002 PHA FY: 2003		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
36-1- Bozeman Drive	Water Saving Toilets	10,860	36-1 Bozeman Drive	Floor Tile & Cove Base	\$106,870
	Replace bath vanities, sinks & hardware with new	34,440		Replace exterior door hardware	25,600
				New Fence -Sanders St. Side	25,000
Subtotal		45,300	Subtotal		157,470
36-2 Bozeman Drive	Water Saving Toilets	11,330	36-2 Bozeman Drive	Replace Ranges & Refrigerators	33,500
	Replace bath vanities, sinks & hardware with new	39,935			
	Replace bathroom exhaust fans	8,600			
	Replace exterior door hardware	25,560			
Subtotal		85,425	Subtotal		33,500
36-4-Rea Circle/Scattered Sites	Enhance Landscaping around buildings	7,000	36-4 Rea Circle/Scattered Sites	Replace Exterior door hardware	15,750
	Water Saving Toilets	6,620		Replace all sliding glass doors on 15 buildings	55,000
	Replace bathroom exhaust fans	2,800		Replace all storm and exterior doors	60,000
Subtotal		16,420	Subtotal		130,750
36-9 Anderson St. Homes	Cycle Painting	31,800			
Subtotal		31,800			
HA - Wide	Upgrade computers & printers	36,750			
Total CFP Estimated Cost		\$215,695			\$321,720

CAPTIAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name:		Grant Type and Number		Federal FY of Grant:	
		Capital Fund Program Grant No:			
		Replacement Housing Factor Grant No:			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line 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				
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 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				

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CAPITAL FUND PROGRAM TABLES START HERE
ATTACHMENT G

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of Fort Mill		Grant Type and Number Capital Fund Program Grant No: SC169036911-99 Replacement Housing Factor Grant No:		Federal FY of Grant: 1999	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/00 <input type="checkbox"/> Final Performance and Evaluation Report					
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 Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	23,263.00		21,263.00	20,726.80
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	237,656.00		237,656.00	198,691.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: Housing Authority of Fort Mill	Grant Type and Number Capital Fund Program Grant No: SC169036911-99 Replacement Housing Factor Grant No:	Federal FY of Grant: 1999
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/00 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	260,919.00		258,382.80	219,417.80
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	54,043.00			
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of Fort Mill		Grant Type and Number Capital Fund Program Grant No: SC16P036911-99 Replacement Housing Factor Grant No:				Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	Status of Work	
36-1-Bozeman Drive	Replace Bi-Fold Close doors		1460	20 units	41,013.00		41,013.00	Completed	
	Subtotal 36-1				41,013.00		41,013.00		
36-2 Bozeman Drive	Replace heating systems with new HVAC Systems – Elderly Bldg.		1460	20 units	46,043.00		46,043.00	Completed	
	Install new water heaters and drain pans – Elderly Bldg.		1460	20 units	8,000.00		8,000.00	Completed	
	Install ceiling lights in the bedroom of elderly building units		1460	20 units	1,282.00		1,282.00	Completed	
	Install new cabinets, countertops, faucets and double sinks in two story units		1460	28	82,362.00		82,362.00	Completed	
	Install new cabinets, countertops, faucets and double sinks in elderly building units		1460	20	58,956.00			Final completion stages	
	Subtotal 36-2				196,643.00		137,687.00		

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of Fort Mill		Grant Type and Number Capital Fund Program Grant No: SC16P036911-99 Replacement Housing Factor Grant No:				Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	Status of Work	
36-1 & 2	A & E Fee 36-1 & 2		1430		21,000		21,000.00	Final stages of contract	
36-1 & 2	Sundry Planning Cost 36-1 & 2		1430.19	68	263.00		263.00	Completed	
	CIAP App. Fee		1430.2	68	2,000.00		-0-	Completed	
	Subtotal Acct. 1430				23,263.00		21,263.00		

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Housing Authority of Fort Mill		Grant Type and Number Capital Fund Program Grant No: SC16P03650100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000	
<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: 12/31/2000 <input type="checkbox"/> Final Performance and Evaluation Report						
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 Soft Costs	2,000.00		-0-	-0-	
	Management Improvements Hard Costs					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	21,604.00		-0-	-0-	
8	1440 Site Acquisition					
9	1450 Site Improvement	25,232.00		3,667.000	3,667.00	
10	1460 Dwelling Structures	174,000.00		-0-	-0-	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	25,000.00		8,546.25	8,546.25	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: Housing Authority of Fort Mill	Grant Type and Number Capital Fund Program Grant No: SC16P03650100 Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2000 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	247,836.00			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs	20,000.00			
	Amount of line XX Related to Energy Conservation Measures	14,000.00			
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of Fort Mill		Grant Type and Number Capital Fund Program Grant No: SC16P03650100 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost	Total Actual Cost		Status of Work
36-1	Upgrade Playground Equipment		1475		25,000.00			Revising
	Replace terra cotta sewer lines at 7 apts. with PVC piping due to constant problems with roots and etc.		1460		10,000.00			Revising
	Install stainless steel range hoods vented through the roof for the 2 & 3 bedroom units		1460	26	14,000			Planning
	36-1 Subtotal				49,000			
36-2	Complete Kitchen renovations in Elderly building		1460	4	10,000			Revising to remove- handle in 1999 CIAP
	Upgrade landscaping around units to enhance curb appeal		1450	48	5,232.00			Planning
	Subtotal 36-2				15,232.00			
36-4	Install Privacy fence and chain link fence		1450	24	20,000.00			Chain Link

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of Fort Mill		Grant Type and Number Capital Fund Program Grant No: SC16P03650100 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
	to separate development from a drug infested tax credit development, that join FMHA property								installed working on Privacy
	Replace existing heating systems with new HVAC systems		1460	28		140,000.00			Planning stages, working on revision
	Subtotal 36-4					160,000.00			
H/A Wide	A & E Fees & Sundry Cost 36-1/4		1430			21,604.00			Securing contract
H/A Wide	Management Improvements – Computer		1408			2,000.00			Planning
	TOTAL CAPITAL FUND BUDGET					247,836.00			

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					

