

Small PHA Plan Update Annual Plan for Fiscal Year: April 1, 2001

GROESBECK HOUSING AUTHORITY

Groesbeck, Texas

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: Groesbeck Housing Authority
PHA Number: TX219v01
PHA Fiscal Year Beginning: (mm/yyyy) 04/01/01
PHA Plan Contact Information: Name: Craig Champion Phone: 254/729-3204 TDD: Email (if available): cchampion@glade.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 2001

[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.

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PHA Response (must be attached if not included in PHA Plan text)	
Other (List below, providing each attachment name)	

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 Groesbeck Housing Authority is a provider of low cost homes

For those unable to find adequate or affordable housing, and we will assist residents in achieving selfsufficiency and upward mobility.

Our residents and others shall be treated with dignity and respect, and we will continually strive to improve the quality of life for all residents of the community.

We are dedicated to achieving our organizational objectives through the pride and commitment to excellence by the board of commissioners and staff.

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 Groesbeck Housing Authorities' plans, budget summary, and policies set forth in this Annual Plan all lead towards the accomplishment of our goals and objectives. They outline a comprehensive approach towards our goals and objectives and are consistent with the Consolidated Plan.

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? \$ 140,226.00_
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 B
(2) Capital Fund Program Annual Statement The Capital Fund Program Annual Statement is provided as Attachment C

HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

3. Demolition an [24 CFR Part 903.7 9 (h)]	
	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 Descriptio	n
	Demolition/Disposition Activity Description Activities Associated with HOPE VI or Conversion Activities)
1a. Development nam	ne:
1b. Development (pro	
2. Activity type: Den	nolition
Dispos	
3. Application status (Approved Submitted, per Planned application status (nding approval
	oproved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units af	
6. Coverage of action	
—	e development
Total deve	<u> </u>
	es (select all that apply)
Section 8 f	
Public hou	using for units
Preference	for admission to other public housing or section 8
Other hous	sing for units (describe below)
8. Timeline for activi	
_	projected start date of activity:
	projected start date of relocation activities:
c. Projected er	nd date of activity:
4. Voucher Hom [24 CFR Part 903.7 9 (k)]	eownership Program
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.)

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HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

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 downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment 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? \$
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
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 as 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 end of the RAB Comments in Attachment
	Other: (list below)
R. Statement	t of Consistency with the Consolidated Plan
	ble Consolidated Plan, make the following statement (copy questions as many times as necessary).
1. Consolidat	ed Plan jurisdiction: (provide name here)
	State of Texas
	has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan sdiction: (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 Requ	uests for support from the Consolidated Plan Agency
☐ Yes ⊠ N	lo: 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 mos important requests below:
	lidated Plan of the jurisdiction supports the PHA Plan with the follwing actions and itments: (describe below)

- A. Promote adequate and affordable housing
- B. Promote economic opportunity
- C. Promote a suitable living environment without discrimination.

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:

In accordance with Federal Register 24 CFR Part 903.21 The basic criteria Groesbeck Housing Authority will use for determining what constitutes a significant amendment or modification to the plan is listed below.

Rent or admissions policies or organization of the waiting list;

Additions of non-emergency work items

Additions of new activities not included in the PHDEP Plan

Or any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities

Pet Policy has been implemented sense last year.

Community Service has been implemented in this public hearing and has been approved by the board.

B. Significant Amendment or Modification to the Annual Plan:

The Groesbeck Housing Authority Plan reflects our mission, goals, and objectives. The Groesbeck Authority has implemented all HUD-mandated changes to the Public Housing Programs. Where feasible and where it is believed the residents will best be served. The Groesbeck Housing Authority had submitted the Admissions and Continued Occupancy Policy, with supporting documentation, to the U.S. Department of Housing and Urban Development last January 2000. These plans are current and comply with the new law and regulations. These policies are reviewed on a regular basis to monitor compliance. This is done on a statewide basis through the state association and the cooperation of HUD.

Comments on Safety:

Upgrade electrical breaker boxes in all units will be completed in the 2001 CFP Install hot water vents in all water closets will be completed in the 2001 CFP

<u>Attachment_A_</u> 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 Rev			
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		
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans		
X	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		
X	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		
N/A	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies		
Х	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 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 Check here if included in the public housing A & O Policy	Annual Plan: Rent Determination		
X	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination		
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		

	List of Supporting Documents Available for Rev	
Applicable	Supporting Document	Related Plan
& On Display		Component
On Display X	Results of latest binding Public Housing Assessment System	Annual Plan:
Λ	(PHAS) Assessment	Management and
	(111A3) Assessment	Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction	Annual Plan:
Λ	Survey (if necessary)	Operations and
	Survey (If necessary)	Maintenance and
		Community Service &
		Self-Sufficiency
X	Results of latest Section 8 Management Assessment System	Annual Plan:
	(SEMAP)	Management and
		Operations
N/A	Any required policies governing any Section 8 special housing	Annual Plan:
	types	Operations and
	check here if included in Section 8 Administrative	Maintenance
	Plan	
X	Public housing grievance procedures	Annual Plan: Grievance
	☑ check here if included in the public housing	Procedures
	A & O Policy	
X	Section 8 informal review and hearing procedures	Annual Plan:
Λ		Grievance Procedures
	check here if included in Section 8 Administrative	Grievance i roccuures
X	The HUD-approved Capital Fund/Comprehensive Grant Program	Annual Plan: Capital
Λ	Annual Statement (HUD 52837) for any active grant year	Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any	Annual Plan: Capital
71	active CIAP grants	Needs
N/A	Approved HOPE VI applications or, if more recent, approved or	Annual Plan: Capital
11/11	submitted HOPE VI Revitalization Plans, or any other approved	Needs
	proposal for development of public housing	
N/A	Self-evaluation, Needs Assessment and Transition Plan required	Annual Plan: Capital
	by regulations implementing §504 of the Rehabilitation Act and	Needs
	the Americans with Disabilities Act. See, PIH 99-52 (HA).	
N/A	Approved or submitted applications for demolition and/or	Annual Plan:
	disposition of public housing	Demolition and
		Disposition
N/A	Approved or submitted applications for designation of public	Annual Plan:
	housing (Designated Housing Plans)	Designation of Public
		Housing
N/A	Approved or submitted assessments of reasonable revitalization of	Annual Plan:
	public housing and approved or submitted conversion plans	Conversion of Public
	prepared pursuant to section 202 of the 1996 HUD Appropriations	Housing
	Act, Section 22 of the US Housing Act of 1937, or Section 33 of	
NT/A	Approved or submitted public housing homogyparchip	Annual Dlane
N/A	Approved or submitted public housing homeownership	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program	Annual Plan:
1 N / A	(sectionof the Section 8 Administrative Plan)	Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency	Annual Plan:
1 N / /A	and between the PHA and local employment and training service	Community Service &
	agencies	Self-Sufficiency

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
N/A	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			
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency			
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention			
N/A	PHDEP-related documentation: 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) Check here if included in the public housing A & O Policy	Pet Policy			
N/A	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 PHA Name: Groesbeck Housing Authority Grant Type and Number TX21P21950201 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No: ☑Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual States Final Performance and Evaluation Report Performance and Evaluation Report for Period Ending: Line **Summary by Development Account Total Estimated Cost** No. **Original** Obligated Revised Total non-CFP Funds 1406 Operations 1408 Management Improvements 3 4 1410 Administration 7.310.00 5 1411 Audit 1415 liquidated Damages 6 1430 Fees and Costs 7 26,534.00 8 1440 Site Acquisition 9 1450 Site Improvement 10 1460 Dwelling Structures 106,382.00 1465.1 Dwelling Equipment—Nonexpendable 11 1470 Nondwelling Structures 12 1475 Nondwelling Equipment 13 14 1485 Demolition 1490 Replacement Reserve 15 1492 Moving to Work Demonstration 16 1495.1 Relocation Costs 17 1498 Mod Used for Development 18 19 1502 Contingency 20 Amount of Annual Grant: (sum of lines 2-19) 140,226.00 21 Amount of line 20 Related to LBP Activities 22 Amount of line 20 Related to Section 504 Compliance Amount of line 20 Related to Security 23 24 Amount of line 20 Related to Energy Conservation Measures ATTACHMENT B **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF **Part II: Supporting Pages** PHA Name: Groesbeck Housing Authority **Grant Type and Number** Federal F Capital Fund Program #: TX21P21950201 Capital Fund Program Replacement Housing Factor #: Development General Description of Major Work Dev. Acct No. Quantity Total Estimated Cost Tota Number Categories Name/HA-Wide Original Revised Funds Activities Obligate TX219-001 Upgrade electrical breaker boxes 1460 40 39,480.00 Install a thru vent in all water closets for 40 13,711.00 1460

hot water heaters

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF

Part II: Supporting Pages

	0 0					
PHA Name: Groesbeck Housing Authority		Grant Type and Number Capital Fund Program #: TX21P21950201				Federal F
			Housing Factor #	# :		
Development Number	Development General Description of Major Work Dev. Acct No. Number Categories			Total Estimated Cost		Tota
Name/HA-Wide Activities			Original	Revised	Funds Obligate	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF

Part II: Supporting Pages

PHA Name: Groesbeck Housing Authority		Grant Type and Number				Federal F
		Capital Fund Program #: TX21P21950201 Capital Fund Program Replacement Housing Factor #:				
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Tot
Name/HA-Wide Activities				Original	Revised	Funds Obligate
TX219-002	Upgrade electrical breaker boxes	1460	40	39,480.00		
	Install a thru vent in all water closets for hot water heaters	1460	40	13,711.00		
						+

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF

Part II: Supporting Pages

PHA Name: Groesbeck Housing Authority		Grant Type and Nu	Federal F			
		Capital Fund Progra				
		Capital Fund Program				
		Replacement I				
Development	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Tot
Number						
Name/HA-Wide				Original	Revised	Funds
Activities						Obligate
TX219-HA	Hire non technical help	1410		6,310.00		
	Provide funds for sundry items	1410		1,000.00		
	Hire an on-site inspector to oversee construction	1430		7,712.00		
	Provide funds for reproduction	1430		800.00		
	Hire a consultant to assist in develop in plans	1430		4,000.00		
	Hire an architect to develop plans and specifications	1430	_	14,022.00	_	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHE

Part III: Implementation Schedule

PHA Name: Groesbeck Housing Authority Grant Type and Number							Federal FY of Grant:
	-		al Fund Progra				
			al Fund Progra				
Development Number	All	Fund Obligate	ed	A	ll Funds Expended	l	Reasons
Name/HA-Wide		art Ending Da			uarter Ending Date		
Activities		-			-		
	Original	Revised	Actual	Original	Revised	Actual	
TX219-001	3/31/03			3/31/04			
TX219-002	3/31/03			3/31/04			
ТХ219-НА	3/31/03			3/31/04			

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

ATTACHMENT C

	CFP 5-Year Action Plan		
⊠ Original stateme	nt Revised statement		
Development			
Number	(or indicate PHA wide)		
Tx219-001	Groesbeck Housing Authority		
Description of Need Improvements	led Physical Improvements or Management	Estimated Cost	Planned Start Date (HA Fiscal Year)
Fix one unit – when retaining wall.	it rains water leaks into unit; needs grading and	10,000.00	2002
	at 3 units must go through the foundation to get to lines cause commodes and bath tubs to back up.	17,292.00	2002
Upgrade existing sa	fety call lights in all the elderly units.	15,380.00	2002
Replace existing bar	th tubs and lavatory fixtures in all units	6,000.00	2002
Replace existing cer	ramic tile in all bathrooms.	12,480.00	2002
Replace existing fas	cia board and soffits with new	22,880.00	2003
Remove existing roo	ofing including decking with new composition shingles.	75,400.00	2003
Provide landscaping	g.	7,000.00	2004
Make units ready fo	or rent.	16,600.00	2002-2005
Purchase 5 ranges,	refrigerators and hot water heaters	20,960.00	2002-2005
Total estimated cost	t over next 5 years	203,992.00	

ATTACHMENT C

⊠ Original staten	☑Original statement ☐ Revised statement					
Development						
Number	(or indicate PHA wide)					
Tx219-002	Groesbeck Housing Authority					
Description of Ne	Description of Needed Physical Improvements or Management		Planned Start Date			
Improvements			(HA Fiscal Year)			

Replace existing bath tubs and lavatory fixtures in all units	6,000.00	2002
Replace existing ceramic tile in all bathrooms.	12,480.00	2002
Replace existing fascia board and soffits with new	22,880.00	2002
Remove existing roofing including decking with new composition shingles.	75,400.00	2002-2003
Provide landscaping.	7,000.00	2003
Make units ready for rent.	16,600.00	2002-2005
Purchase 5 ranges, refrigerators and hot water heaters	20,960.00	2002-2005
Total estimated cost over next 5 years	161,320.00	

	CFP 5-Year Action Plan		
⊠Original stateme	ent Revised statement		
Development			
Number	(or indicate PHA wide)		
Тх219-НА	Groesbeck Housing Authority		
Description of Need Improvements	led Physical Improvements or Management	Estimated Cost	Planned Start Date (HA Fiscal Year)
	nity building; enlarge boardroom; add classrooms and	30,000.00	2005
renovate outside.			
Purchase furniture	for community room and office	6,000.00	2005
Purchase printer, c	omputer, fax and software	5,000.00	2005
Provide training fo	r Executive Director	8,000.00	2002-2005
Hire non technical	help	25,240.00	2002-2005
Provide funds for s	undry items	4,000.00	2002-2005
Hire an on-site insp	pector	30,848.00	2002-2005
Hire an architect to develop plans and specifications		56,088.00	2002-2005
Provide funds for r	eproduction	3,200.00	2002-2005
Hire a consultant to	o assist in developing plans	16,000.00	2002-2005
Total estimated cos		195,592.00	

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 \$	_	
B. Eligibility type (Indicate with an "x")	N1 N2_	R
C. FFY in which funding is requested		
D. Executive Summary of Annual PHDEP		
n the space below, provide a brief overview of the PHE indertaken. It may include a description of the expected entences long		
E. Target Areas		
Complete the following table by indicating each PHDEF onducted), the total number of units in each PHDEP Tatarticipate in PHDEP sponsored activities in each Target vailable in PIC.	arget Area, and the total numl	per of individuals expec
PHDEP Target Areas	Total # of Units within	Total Population to
Name of development(s) or site)	the PHDEP Target Area(s)	be Served within the PHDEP Target Area(s)
Name of development(s) or site)		the PHDEP Target
Name of development(s) or site)		the PHDEP Target
F. Duration of Program Indicate the duration (number of months funds will be re	Area(s)	the PHDEP Target Area(s) am proposed under this
F. Duration of Program Indicate the duration (number of months funds will be rean "x" to indicate the length of program by # of months. 12 Months 18 Months	Area(s) equired) of the PHDEP Progr For "Other", identify the #	the PHDEP Target Area(s) am proposed under this
F. Duration of Program Indicate the duration (number of months funds will be really in "x" to indicate the length of program by # of months.	Area(s) equired) of the PHDEP Progr For "Other", identify the #	the PHDEP Target Area(s) am proposed under this
F. Duration of Program Indicate the duration (number of months funds will be real in "x" to indicate the length of program by # of months.	Area(s) equired) of the PHDEP Progr For "Other", identify the #	the PHDEP Target Area(s) am proposed under this
F. Duration of Program Indicate the duration (number of months funds will be refined in "x" to indicate the length of program by # of months. 12 Months 18 Months	equired) of the PHDEP Progr For "Other", identify the # S 24 Months the PHDEP Program (place and interpretation).	am proposed under this of months).

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						
FY1998						
FY 1999						

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.

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.

B. PHDEP Budget Summary

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

FFY 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						
9130 - Employment of Investigators						
9140 - Voluntary Tenant Patrol						
9150 - Physical Improvements						
9160 - Drug Prevention						
9170 - Drug Intervention						
9180 - Drug Treatment						
9190 - Other Program Costs						
TOTAL PHDEP FUNDING						

C. 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.

9110 - Reimbursement of Law Enforcement					Total PH	DEP Funding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDE	Other Funding	Perfo
	Persons	Population	Date	Complete	P	(Amount/	
	Served			Date	Funding	Source)	
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Pe
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perform	
1.								
2.								
3.								

9120 - Security Personnel				Total PHDEP F	unding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	Perf
	Persons	Population	Date	Complete	Funding	(Amount /Source)	
	Served	_		Date			
1.							
2.							
3.							

9130 – Employment of Investigators				Total PHDEP F	Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	Per
	Persons	Population	Date	Complete	Funding	(Amount /Source)	
	Served			Date			
1.							
2.							
3.							

9140 – Voluntary Tenant Patro	ol	Total PHDEP Funding: \$
Goal(s)		
Objectives		

Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	Per
	Persons	Population	Date	Complete	Funding	(Amount /Source)	
	Served			Date			
1.							
2.							
3.							

9150 - Physical Improvements				Total PHDEP F	Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons	Target Population	Start Date	Expected Complete	PHEDEP Funding	Other Funding (Amount /Source)	Perfor
1.	Served			Date			
2.							
3.							

9160 - Drug Prevention					Total PHDE	P Funding: \$	
Goal(s)					•		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perfo
1.							
2.							
3.							

9170 - Drug Intervention						Funding: \$	
Goal(s)					JL		
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	Per
-	Persons	Population	Date	Complete	Funding	(Amount /Source)	
	Served	•		Date			
1.							
2.							
3.							

9180 - Drug Treatment				Total PHDE	P Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perforr

1.]	1 '	1
2.					
3.		<u> </u>		<u> </u>	
					-

9190 - Other Program Costs				Total PHDEP	Funds: \$		
Goal(s)					,		
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perfor
1.							
2.							
3.							

Required Attachment $\underline{\mathbf{D}}$: 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:
	Mr. James Tatum
В.	How was the resident board member selected: (select one)?
	⊠Appointed
C.	The term of appointment is (include the date term expires):
	2 year term expires April 1, 2002
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):
В.	Date of next term expiration of a governing board member:
	April 1, 2002
C.	Name and title of appointing official(s) for governing board (indicate appointing official for the next position):
	Mayor Jim Longbotham

Required Attachment $\underline{E}:$ 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.)

Ms. Peggy Coyle and Ms. Mary Rawls

No comments were made

Attachment <u>F:</u> EXPLANATION OF PHA RESPONSE TO COMMENTS OF RESIDENT ADVISORY