

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

Small PHA Plan Update
Annual Plan for Fiscal Year: 02

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: Arkadelphia Housing Authority

PHA Number: AR012

PHA Fiscal Year Beginning: (mm/yyyy) 07/01/2002

PHA Plan Contact Information:

Name: Fred Hatley

Phone: 870-246-4632

TDD:

Email (if available): fred.hatley@pha.arkadelphia.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 (X)

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 (x)

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 (x)

PHA development management offices

Other (list below)

PHA Programs Administered

**Annual PHA Plan
Fiscal Year 2002**

[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

Page #

Annual Plan

Executive Summary (optional)

Annual Plan Information

Table of Contents

Description of Policy and Program Changes for the Upcoming Fiscal Year

Capital Improvement Needs

Demolition and Disposition

Homeownership: Voucher Homeownership Program

Crime and Safety: PHDEP Plan

Other Information:

Resident Advisory Board Consultation Process

Statement of Consistency with Consolidated Plan

Criteria for Substantial Deviations and Significant Amendments

Attachments

Attachment A : Supporting Documents Available for Review

Attachment __: Capital Fund Program Annual Statement

Attachment __: Capital Fund Program 2000 Progress Report 63001

Attachment __: Capital Fund Program 5 Year Action Plan

Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement

Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan

Attachment __: Resident Membership on PHA Board or Governing Body

Attachment __: Membership of Resident Advisory Board or Boards

Attachment __: Comments of Resident Advisory Board or Boards & Explanation of 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

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.

N/A

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?
\$ \$182,886.00(ESTIMATED)

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

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment

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
Disposition 3. Application status (select one) Approved Submitted, pending approval Planned application 4. Date
application approved, submitted, or planned for submission: (DD/MM/YY) 5. Number of units affected: 6.
Coverage of action (select one) Part of the development Total development 7. Relocation resources (select all that
apply) Section 8 for units Public housing for units Preference for admission to other public housing or section
8 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 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.

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)]

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 Arkansas

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. (x)

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)

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

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:

DEFINITION OF “SUBSTANTIAL DEVIATION” AND “SIGNIFICANT AMENDMENT OR MODIFICATION”

The Arkadelphia Housing Authority will consider the following to be changes in its Agency Plan necessary and sufficient to require a full review by the Resident Advisory Board before a corresponding change in the Agency Plan can be adopted:

Any alteration of the [PHA’s mission Statement

Any changes or amendments to a stated Strategic Goal.

Any change or amendment to a stand Strategic Objective except in a case where the change results from the objective having been met.

Any introduction of a new Strategic Gol or new Strategic objective.

Any alteration in the Capital Fund Program (CFP) that affects an expenditure greater than twenty percent (20%) of the CFP Annual Budget for that year.

In defining the above, The Arkadelphia Housing Authority intends by Strategic Goal and Strategic Objective specifically those items in its Five Year Plan and any change in the above items will be considered a substantial deviation from the plan.

Furthermore, the PHA considers the following changes to require a public process before amending said changes and that these items are significant amendments or modifications to the Agency Plan.

Changes to rent or admissions policies or organization of the waiting list.

Additions of non-emergency work items (items not included in the current Annual Statement or 5 Year Action Plan) or change in use of replacement reserve funds under the Capital Fund.

Additions of new activities not included in any PHDEP Plan.

Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments by HUD.

B. Significant Amendment or Modification to the Annual Plan:

No Changes

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
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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Any policy governing occupancy of Police Officers in Public Housing <input checked="" 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 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
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
	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	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
X	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 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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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
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
X	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
X	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

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
	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 checked="" 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)

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

PHA Name: ARKADELPHIA HA	Grant Type and Number AR37P01250100 Capital Fund Program: Capital Fund Program 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:
 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		7,063	7,063	7,063
3	1408 Management Improvements		2,500	2,500	284.90
4	1410 Administration	29,936	16,871	16,871	7,476.13
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs		15,560	15,560	51
8	1440 Site Acquisition				
9	1450 Site Improvement	33,162			
10	1460 Dwelling Structures	91,860	114,722		
11	1465.1 Dwelling Equipment—Nonexpendable		3,000	3,000	3,000
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	9,000	7,500	7,500	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration	7,500	1,500		
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	168,716	168,716	52,494	17,875.63
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

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

PHA Name: ARKADELPHIA HA		Grant Type and Number AR37P01250100 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" 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	
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

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

PHA Name: ARKADELPHIA HA		Grant Type and Number AR37P01250100 Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Operations	1406			7,063	7,063	7,063	Comp
“	Management Improvements	1408			2,500	2,500	284.90	9-2002
	A) Training					1,500	284.90	
	B) Software Upgrades					1,000		
“	Administration	1410		30,600	16,871	16,871	7,476.73	9-2002
	A) Salary						5,651.92	

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

PHA Name: ARKADELPHIA HA		Grant Type and Number AR37P01250100 Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	B) Benefits						1,824.81	
“	Fees & Costs: Cost Assoc. with hiring On A&E to do design work for the Renovations at site 12-002 Pine Courts	1430			15,560	15,560		
“	Site Improvements A) Correct Erosion B) Landscaping	1430		6,760	6,760			7-2002
“	Dwelling Structures	1460		91,680	114,722			7-2003
Ar012-2	Install upstairs screens		50		6,760			10-2002
AR012-1,2,3	Lavatories as needed		94		9,122			7-2002
AR012	Electric upgrade		10		40,000			7-2003
AR012-2	Vinyl Flooring	1460	22		14,000			12-2002
AR012-3	Cabinets	1460	24		31,200			12-2002
AR012-2	Painting	1460	24		13,640			7-2003
PHA Wide	Dwelling Equip (Nonexp)	1465.1	10		3,000	3,000	3,000	Complete
AR012-2	Non dwelling Equip	1475	4	9,000	7,500	7,500		5-2002
PHA Wide	Relocations Costs	1495		7,500	1,500	1,500		7-2003

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: ARKADELPHIA HA		Grant Type and Number AR37P01250101 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<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	19,813	19,813		
3	1408 Management Improvements	2,000	2,000		
4	1410 Administration	17,145	17,145		
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	2,000	2,000		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	123,000	123,000		
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	7,500	7,500		
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	171,458	171,458		

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				
24	Amount of line 20 Related to Energy Conservation Measures				

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

PHA Name: ARKADELPHIA HA		Grant Type and Number AR37P01250101 Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Operations	1406		19,813	19,813			
	Management Improvements	1408		2,000	2,000			
	Administration	1410		17,145	17,145			
	Fees & Costs (Insurance)	1430		2,000	2,000			
AR012-1,2	Dwelling Structures	1460		123,000	123,000			
AR012-1	Replace Flooring		40	20,400	20,400			
	Security Screens		50	6,600	6,600			
AR012-2	Electrical Upgrade, Cabinets, Painting, Plumbing		16	96,000	96,000			
PHA Wide	Relocations Costs	1495		7,500	7,500			

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

PHA Name: ARKADELPHIA HA	Grant Type and Number Capital Fund Program: AR37P0129050102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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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	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	5,000			
3	1408 Management Improvements	1,000			
4	1410 Administration	16,626			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	40,000			
10	1460 Dwelling Structures	100,000			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	16,260			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	4,000			
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	182,886			
21	Amount of line 20 Related to LBP Activities				

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

PHA Name: ARKADELPHIA HA		Grant Type and Number AR37P0129050102 Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		5,000				
“	Management Improvements: Costs associated with attending the Two maintenance conference and one Nan McKay conference	1408		1,000				
“	Administration Salary Benefits	1410		16,626 13,300.80 3,325.20				
AR012-3	Site Improvements 6’ 3 gauge classic style steel fence Site measured at approx. 1000 ft. Approx. 130 panels at \$125,15 + 3 gates, posts and brackets			40,000 20,926.65				
AR012-1,2	Paint all exterior columns (4 per apt)			1,545.08				
AR01-1	Plant 6’ shrubs to help control erosion Problem (about 120)			4,300				
PHA Wide	Dirt, Erosion Control, Chain Link Fence for Pine Court			13,228.27				
PHA Wide	Dwelling Structures	1460		100,000				

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

PHA Name: ARKADELPHIA HA		Grant Type and Number AR37P0129050102 Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
AR012-1	Install Carrier Weather Maker TKB Air conditioning units to all apts at Carpenter Hills Books for \$2,000 a unit. (50 Units)							
PHA Wide	Non-dwelling Equipment 2002 Car is needed for inspections & conferences	1475		16,260				
PHA Wide	Relocation Costs	1495		4,000				

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Arkadelphia		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY: 2003	Work Statement for Year 3 FFY Grant: PHA FY: 2004	Work Statement for Year 4 FFY Grant: PHA FY: 2005	Work Statement for Year FFY Grant: PHA FY: 2006
01/Carpenter	Annual Statement	\$69,765.19	\$64,000	.00	\$70,000
03/Southview		67,010.00	100,000	.00	60,000
02/Pine Court		52,000		45,000.00	40,000
PHA Wide			16,166	140,000	
CFP Funds Listed for 5-year planning		188,765.19	180,166.00	185,000.00	170,000.00
Replacement Housing Factor Funds					

Required Attachment ____: 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: 11-01-02

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Hank Perry II - Chairman

Required Attachment _____: 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.)

Linda Ledbetter Theresa Eley
 Betty Ashley Dorothy Howard
 Priscilla Heard

Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. Yes No: Have any of the PHA’s developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act?

Conversion of Public Housing Activity Description
1a. Development name: Arkadelphia HA 1b. Development (project) number: AR012
2. What is the status of the required assessment? <input checked="" type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway

5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)

- Units addressed in a pending or approved demolition application (date submitted or approved:
- Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:)
- Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:)
- Requirements no longer applicable: vacancy rates are less than 10 percent
- Requirements no longer applicable: site now has less than 300 units
- Other: (describe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

Component 10 (B) Voluntary Conversion Initial Assessments

- a) How many of the PHA's developments are subject to the Required Initial Assessment? 2
- b) How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not General occupancy projects)? 1
- c) How many Assessments were conducted for the PHA's covered developments? 2
- c) Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments. Carpenter Hill 43 Pine Court 22
- d) If the PHA has not completed the Required Initial Assessments, describe the Status of these assessments
Assessment is on file at PHA Office. The PHA states that it is not appropriate because removal of the developments would not meet the required occupancy of the PHA, it's work of the voucher system in the county, community and adjoining cities. Cost would not be feasible and the assessment revealed would not work for a PHA small in size like Arkadelphia.

Required Attachment ____: 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)

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

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: November 01.

Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Hank Perry II - Chairman, Constance H. Knox - Vice Chairman, Phyllis Powell - Treasurer, Lon Ware-Board Member, Alan LeVar- Board Member.

Required Attachment ____X__ : 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.) Linda Ledbetter- President, Betty Ashley- Vice- President, Priscilla Heard-Secretary, Dorothy Howard, Treasurer.