

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 the City of LaFayette, Alabama

PHA Number: AL159 STANDARD, PHAS Score 88.9

PHA Fiscal Year Beginning: 07/2001

PHA Plan Contact Information:

Name: Sue Bankston

Phone: 1-334-821-2262 extn. 3010

TDD:

Email (if available): sbankston@auburnhousingauth.org

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.

Contents	<u>Page #</u>
Annual Plan	
i. Executive Summary (optional)	NA
ii. Annual Plan Information	01
iii. Table of Contents	02
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	03
2. Capital Improvement Needs	03
3. Demolition and Disposition	03
4. Homeownership: Voucher Homeownership Program	04
5. Crime and Safety: PHDEP Plan	05
6. Other Information:	05
A. Resident Advisory Board Consultation Process	05
B. Statement of Consistency with Consolidated Plan	06
C. Criteria for Substantial Deviations and Significant Amendments	06
Attachments	
<input checked="" type="checkbox"/> Attachment A : Supporting Documents Available for Review	07
<input checked="" type="checkbox"/> Attachment _B_ : Capital Fund Program Annual Statement	11
<input checked="" type="checkbox"/> Attachment _C_ : Capital Fund Program 5 Year Action Plan	15
<input type="checkbox"/> Attachment ___ : Capital Fund Program Replacement Housing Factor Annual Statement	
<input checked="" type="checkbox"/> Attachment _D_ : Pub Housing Drug Elimination Program (PHDEP PLN) 19	
<input checked="" type="checkbox"/> Attachment _E_ : Resident Membership on PHA Board or Governing Body	25
<input checked="" type="checkbox"/> Attachment _F_ : Membership of Resident Advisory Board or Boards	26
<input type="checkbox"/> Attachment _ : 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)	
Attachment G : Capital Fund P & E Report, Parts I, II, III	27

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

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

NA

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.

NA: There are no changes in our policies or programs from last year's 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? **\$221,656**

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_

(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 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? \$ 25,061
- 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).

NA

1. Consolidated Plan jurisdiction: (provide name here) NA

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)

NA

- 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 NA

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)

NA

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: PREVIOUSLY SUBMITTED.

B. Significant Amendment or Modification to the Annual Plan: PREVIOUSLY SUBMITTED.

(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
	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	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.	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 CHAS DATA BOOK: TABLE 1C	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
	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
	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 Flat rents by reference	Annual Plan: Rent Determination
	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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
X	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
	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 checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	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
	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	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 (PHDEP) 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) In A & O by reference; lease addendum <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
X	Other supporting documents (optional) (list individually; use as many lines as necessary) Community Service	Community Service

Annual Statement/Performance and Evaluation Report (ATTACHMENT B) Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name : LAFAYETTE HOUSING AUTHORITY (AL159)		Grant Type and Number Capital Fund Program: AL09P15950201 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	3500			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	4811			
10	1460 Dwelling Structures	207120			
11	1465.1 Dwelling Equipment—Nonexpendable	5625			
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	600			
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2-20)	221,656			
22	Amount of line 21 Related to LBP Activities	0			

Annual Statement/Performance and Evaluation Report (ATTACHMENT B)					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name : LAFAYETTE HOUSING AUTHORITY (AL159)		Grant Type and Number Capital Fund Program: AL09P15950201 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
23	Amount of line 21 Related to Section 504 Compliance	0			
24	Amount of line 21 Related to Security-Soft Costs	0			
25	Amount of line 21 Related to Security-Hard Costs	0			
26	Amount of line 21 Related to Energy Conservation Measures	0			

Annual Statement/Performance and Evaluation Report (ATTACHMENT B) Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: LAFAYETTE HOUSING AUTHORITY (AL159)			Grant Type and Number Capital Fund Program #: AL09P15950201 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	
AL159-3 JENKINS	SITE IMPROVEMENTS	1450	1LS	4811				
	CONSTRUCTION FOREMAN	1460	1LS	37570				
	KITCHEN	1460	39	16425				
	REWORK BATHS	1460	39	15525				
	FLOORS	1460	39	10800				
	MECHANICAL	1460	39	41265				
	ELECTRICAL	1460	39	8730				
	PLUMBING	1460	39	1125				
	EXT/DOORS/LOCKS/WINDOWS	1460	39	45980				
	OTHER/PAINT/DOORS/WALLS	1460	39	29700				
	REFRIGERATORS & RANGES	1465	9	5625				
	RELOCATION COSTS	1495	1LS	600				
HA WIDE	FEE ACCOUNTANT	1410	1LS	2000				
	TRAVEL & SUNDRY	1410	1LS	1500				
	TOTAL			\$221,656				

Capital Fund Program 5-Year Action Plan (**ATTACHMENT C**)

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.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
AL159-3	JENKINS	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

SITE IMPROVEMENTS (1LS)	4811	2002
KITCHENS (9)	16425	
REWORK BATHS (9)	15525	
FLOORS (9)	10800	
MECHANICAL (9)	41265	
ELECTRICAL (9)	8730	
PLUMBING (9)	1125	
EXTERIOR (9)	45980	
OTHER (9)	29700	
FOREMAN (1LS)	37570	
<u>SUBTOTAL</u>	<u>\$211,931</u>	
SITE IMPROVEMENTS (1LS)	4811	2003
KITCHENS (9)	16425	
REWORK BATHS (9)	15525	
FLOORS (9)	10800	
MECHANICAL (9)	41265	
ELECTRICAL (9)	8730	
PLUMBING (9)	1125	
EXTERIOR (9)	45980	
OTHER (9)	29700	
FOREMAN (1LS)	37570	
<u>SUBTOTAL</u>	<u>\$211,931</u>	
SITE IMPROVEMENTS (1LS)	4811	2004
KITCHENS (3)	5475	
REWORK BATHS (3)	5175	
FLOORS (3)	3600	
MECHANICAL (3)	13755	
ELECTRICAL (3)	2910	
PLUMBING (3)	375	
EXTERIOR (3)	23460	
OTHER (3)	9900	
FOREMAN (1LS)	37570	
<u>SUBTOTAL</u>	<u>\$107,031</u>	
SITE IMPROVEMENTS (1LS)	8386	2005
<u>SUBTOTAL</u>	<u>\$8386</u>	
Total estimated cost over next <u>5</u> years	<i>Jenkins (AL159-3)</i>	\$ 751,210

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
AL159-1	GREEN	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
SITE IMPROVEMENTS (1LS)	15000	2005
Total estimated cost over next 5 years	<i>GREEN (AL159-1)</i>	<i>\$ 15,000</i>

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
AL159-2	HILLTOP	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
MECHANICAL (27)	108800	2004
MECHANICAL	70000	2005
FOREMAN	38000	
SITE WATERLINES	86770	
Total estimated cost over next 5 years <i>HILLTOP (AL159-2)</i>	\$ 303,570	

PHA Public Housing Drug Elimination Program Plan

(ATTACHMENT D)

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 \$25,061

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

With our collaborative partners, our strategy will continue to solidify our already successful efforts to provide safer, more vibrant neighborhoods to 226 residents at all our sites in LaFayette, AL. Key elements in our plan include the services of the police department, the drug and violence free messages from the Boys & Girls Club to our youth and a planned event for all our residents designed to further emphasize the merits of a safe, drug free lifestyle.

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)
GREEN/STEPHENS	22	47
HILLTOP	41	122
JENKINS	39	57
TOTAL	102	226

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 ***SEE NOTE !	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995 X	147,010	AL09DEP0500195	0		CLOSED	CLOSED
FY 1996 X	147,010	AL09DEP0500196	0		CLOSED	CLOSED
FY 1997 X	126,900	AL09DEP0500197	0		CLOSED	CLOSED
FY 1998 X	126,900	AL09DEP0500198	0		CLOSING	CLOSING
FY 1999 X	95,821	AL09DEP0500199	25000	Extension if necessary due to long delay in funds receipt per Field Office	June 2000	June 2002
FY 2000 X	25,000	AL09DEP1590100	25000		October 2000	September 2002

*****PHDEP funding through FY 1999 has been a joint application with the Auburn Housing Authority (AL050) who is the managing agency for the LaFayette Housing Authority.**

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.

We, in partnership with our local police department and the Boys & Girls Club, have planned and developed a strategy for reducing/eliminating illicit drug usage in and around our resident neighborhoods. Our targeted areas continue to show the need for protection, diligent monitoring, and continued resident rapport building. Security is dependent on both follow up incident reports from our local police and crime tracking through an in house database. Our local Boys & Girls Club provides a safe recreational and educational outlet for our young people. Their well -designed programs provide solid drug free messages and help to build self enhancement in our youth.

B. PHDEP Budget Summary

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

FFY 2001 PHDEP Budget Summary	
Original statement (X)	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	\$16,000
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	\$3,650
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	\$5,411
TOTAL PHDEP FUNDING	\$25,061

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 PHDEP Funding:		
					\$16,000		
Goal(s)	1) To reduce/eliminate illicit drugs in and around public housing. 2) To insure safe streets and passage in our resident neighborhoods. 3) To build a trusting, confident rapport with our residents.						
Objectives	1) Monitor neighborhood patrol reports and crimes/arrest reports from the city police dept. 2) Monitor and inform police dept. of resident and/or Resident Council concerns regarding loitering, vandals, drug use, burglaries, robberies. 3) Encourage a high profile from our local police at resident meetings, youth programs, and with residents as they patrol the streets.						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.Maintain police patrol in resident neighborhoods as an above baseline service from the City police department			10-2003	9-2005	16,000	0	Decrease in drug related crimes and arrests in and around public housing
2.Invite and encourage police officers to speak to our residents at meetings, on the street, and to interact with our youth			10-2003	9-2005	0	0	Patrol attendance at HA events and programs
3.Monitor/evaluate police reports and safety concerns of residents			10-2003	9-2005	0	0	Meet regularly with patrol and residents and obtain City reports

9160 - Drug Prevention					Total PHDEP Funding: \$		
					\$3,650		
Goal(s)	To provide wholesome recreational and educational programs to our youth as an alternative to undisciplined, drug -laden life on the streets.						
Objectives	(1) To partner with the Boys & Girls Club to provide our youth with expansive, age sensitive educational and recreational programs to enhance self -confidence, esteem and academics. (2) To						

	plan a spring break event for and with all our residents to include speakers delivering a drug free message and closely interacting with the youth and adults in our community.						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.Partnership with Boys and Girls Club	92	Youth	1-2002	1-2003	\$3050	0	Increased membership and program attendance by our young people
2.Spring Event as a rally against violence and drugs	226	Adults & Youth	3-2002	5-2003	\$600	0	Increased participation by all our residents in planning and attending a program delivering a drug and violence free message.

9190 - Other Program Costs					Total PHDEP Funds: \$		
					\$5,411		
Goal(s)	(1) To evaluate effectiveness of above baseline policing services (2) To monitor programs and contractors for compliance						
Objectives	(1) To survey residents annually using HUD required Resident Safety Survey (2) Oversee programming by monitoring reports, visitation and discussion with resident attendees						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.Survey HUD required percentage of residents			9-2002	11-2002	\$1000	0	Completion/evaluation of survey for in house and annual reporting to HUD
2. Program admin/mgmt			10-2002	1-2004	\$4411	0	Compliant contractor performance

Section 3: Expenditure/Obligation Milestones

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended (sum of the activities)	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated (sum of the activities)
<i>e.g Budget Line Item # 9120</i>	<i>Activities 1, 3</i>		<i>Activity 2</i>	
9110	Activities 1, 2, 3	\$4000	Activities 1, 2, 3	\$8000
9120				
9130				
9140				
9150				
9160	Activities 1, 2	\$913	Activities 1, 2	\$1825
9170				
9180				
9190	Activities 1, 2	\$1353	Activities 1, 2	\$2706
TOTAL		\$6266		\$12531

Section 4: Certifications

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the PHA Certifications of Compliance with the PHA Plan and Related Regulations.

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): All residents have been made a part of the Resident Advisory Board. To date, no resident has actively participated in the plans formulation or expressed an interest in the Board.

B. Date of next term expiration of a governing board member: **02/04**

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Robert C. Finley, Mayor, City of LaFayette

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.)

The LaFayette Housing Authority is a small HA consisting of 102 public housing units. Notices describing the intent of a resident advisory board regarding our plans formulation and development with a readily available draft copy have yet to bring forth either the anticipated participation or the comment for which we had hoped. Therefore we have named all our residents as resident advisors. We remain optimistic that we may yet receive highly valued input either by oral or written comment from our Authority wide resident advisors during the public review and hearing process. Should this occur, careful consideration would be given to any and all recommendations.

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

PHA Name: LAFAYETTE HOUSING AUTHORITY (AL159)	Grant Type and Number Capital Fund Program Grant No: AL09P15950100 Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
--	--	--

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: (1))
 Performance and Evaluation Report for Period Ending: 31 DEC 2000 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	0	0	0	0
2	1406 Operations	600	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	3500	3500	3500	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	3425	3425	3425	0
10	1460 Dwelling Structures	204120	204120	204120	613.78
11	1465.1 Dwelling Equipment—Nonexpendable	5625	5625	5625	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	600	600	0
18	1499 Development Activities	0	0	0	0
19	1501 Collateralization or Debt Service	0	0	0	0
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 - 20)	217,270	217,270	217,270	613.78
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 compliance	0			
24	Amount of line 21 Related to Security –Soft Costs	0			
25	Amount of Line 21 Related to Security-- Hard Costs	0			
26	Amount of line 21 Related to Energy Conservation Measures	0			

PHA Name: LAFAYETTE HOUSING AUTHORITY (AL159)	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
				ORIGINAL	REVISED	FUNDS		
						OBLIGATED	EXP	
501	FEE ACCOUNTANT	1410	1LS	2000	0	2000	0	
501	TRAVEL & SUNDRY	1410	1LS	1500	0	1500	0	
501	SIDEWALKS/TREES	1450	1LS	3000	0	3000	0	
501	GRASS/CLOTHESLINE/SIDEWALK	1450	1LS	425	0	425	0	
501	KITCHENS	1460	9	15425	0	15425	64.23	
501	BATHS	1460	9	14525	0	14525	294.71	
501	FLOORS	1460	9	10800	0	10800	0	
501	MECHANICAL	1460	9	36265	0	36265	0	
501	ELECTRICAL	1460	9	8730	0	8730	0	
501	PLUMBING	1460	9	2125	0	2125	0	
501	EXT DOORS/ROOF/LOCKS/SIDE	1460	9	40980	0	40980	0	
501	OTHER/PAINT/DOORS/WALLS	1460	9	28700	0	28700	0	
501	POWER & GAS	1460	1LS	2000	0	2000	0	
501	TERMITES	1460	9	4000	0	4000	0	
501	CONSTRUCTION FOREMAN	1460	1LS	38000	0	38000	0	
501	MISC OTHER	1460	1LS	2570	0	2570	254.84	
501	DWELLING EQUIPMENT	1465	9	5625	0	5625	0	
501	RELOCATION COSTS	1495	1LS	600	0	600	0	

