

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 Magnolia, Arkansas

PHA Number: AR 018

PHA Fiscal Year Beginning: 01/2001

PHA Plan Contact Information:

Name: Richard A. Wyse
Phone: 870-234-5540
TDD: 870-234-5540
Email (if available): mha@arkansas.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 web site
- 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]

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ii. Executive Summary

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 Magnolia Housing Authority has included a pet policy for our non-elderly/non-disabled development in our ACOP. We are also incorporating the community service and self-sufficiency requirements in our leases and policies to be effective 1/1/2001.

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? \$ 297,736.00

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 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: (DD/MM/YY)	
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? \$ 41,260.

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

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

6. Other Information

[24 CFR Part 903.7 9 (r)]

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

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

2. If yes, the comments are Attached at Attachment (File name)
3. In what manner did the PHA address those comments? (Select all that apply)
 - The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 Yes No: below or
 Yes No: at the end of the RAB Comments in Attachment ____.
 - Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
 - Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: State of Arkansas. Statement omitted UP PIH Notice 00-43.
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
 - The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
 - Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
 - Other: (list below)
3. PHA Requests for support from the Consolidated Plan Agency
 Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) none

C. Criteria for Substantial Deviation and Significant Amendments: amendment and deviation definitions 24 CFR Part 903.7(r)

A. Substantial Deviation from the 5-year Plan:

MHA considers the following changes to our agency plan to be a substantial deviation and to require a review by the Resident Advisory Board before implementation:

- any alteration of our mission statement
- any change or amendment to a stated strategic goal
- any change or amendment to a stated strategic objective UNLESS that change is the result of the objective having been met
- inclusion of any new strategic goal or objective
- any alteration in the Capital Fund Program affecting more than 20% of the annual CFP budget for that year

Note: "strategic goal" and "strategic objective" relate to these specific items in our five year plan.

B. Significant Amendment or Modification to the Annual Plan:

MHA considers the following changes to be significant amendments and to require the full public review process before inclusion in our plan:

- changes to the rent or admission policies or in the organization of the waiting list
- addition of non-emergency work items which are not included in the current annual statement or five year plan

- change in the use of replacement reserve funds under the Capital Fund Program
- addition of new activities not previously included in the PHDEP plan
- any change with regard to demolition, disposition or designation

Note: An exception to this definition will be made for any above item changed to reflect new or changed regulatory requirements by HUD. Any such change will be considered a substantial deviation as opposed to a significant amendment.

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
N/A	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
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
N/A	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
N/A	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	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
N/A	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
N/A	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
X	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
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	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
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	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
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
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention

Required Attachment B

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

PHA Name: Housing Authority of the City of Magnolia, Arkansas		Grant Type and Number Capital Fund Program: 2001 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2001	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)			
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0			
2	1406 Operations	10,000			
3	1408 Management Improvements	0			
4	1410 Administration	36,400			
5	1411 Audit	0			
6	1415 liquidated Damages	0			
7	1430 Fees and Costs	20,000			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	0			
10	1460 Dwelling Structures	231,336			
11	1465.1 Dwelling Equipment—Non-expendable	0			
12	1470 Non-dwelling Structures	0			
13	1475 Non-dwelling Equipment	0			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1498 Mod Used for Development	0			
19	1502 Contingency	0			
20	Amount of Annual Grant: (sum of lines 2-19)	297,736			
21	Amount of line 20 Related to LBP Activities	0			
22	Amount of line 20 Related to Section 504 Compliance	0			
23	Amount of line 20 Related to Security	0			
24	Amount of line 20 Related to Energy Conservation Measures	0			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Magnolia, Arkansas			Grant Type and Number Capital Fund Program #: 2001 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	
HA WIDE	Operations	1406	1	10,000				
AR 18-3	Technical Salaries							
	1) Salary for CF coordinator	1410.2	1	24,000				
	2) Salary for inspector	1410.2	1	12,000				
	Advertising for A/E and contractor	<u>1410.19</u>	1	<u>400</u>				
	GRAND TOTAL	1410		36,400				
AR 18-3	A/E Fees							
	Hire A/E to prepare plans and specifications for installation of air conditioners	1430.1	1	20,000				
		-----		-----				
	GRAND TOTAL	1430		20,000				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Magnolia, Arkansas			Grant Type and Number Capital Fund Program #: 2001 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	
AR 18-3	Dwelling Structures							
	Add central air units to present central heat units. Update electrical, add new thermostats. --60 one or two BR apartments-two ton units	1460	1	180,000				
	Overlay vinyl tile floors --52 one BR units --5 two BR units	-----	1	51,336				
	GRAND TOTAL	1460		231,336				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Magnolia, Arkansas		Grant Type and Number Capital Fund Program #: 2001 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	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of the City of Magnolia, Arkansas		Grant Type and Number Capital Fund Program #: 2001 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	3/31/2003			9/30/2004			
AR 18-3	3/31/2003			9/30/2004			

Required Attachment C

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.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
AR 18-1	Magnolia Gardens	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Overlay vinyl tile floors – 27 units @ \$800 each	21,600	2002
Replace roofs, five residence buildings and three non-residence buildings	27,000	2004
Sidewalk replacement/installation	20,000	2002
Install doorbells	5000	2002
Total estimated cost over next 5 years	73,600	

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.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
AR 18-2	Alcardun Heights	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace roofs – seven residence buildings and one non-residence building	57,000	2002
Install doorbells	10,000	2003
Sidewalk replacement/installation	46,000	2004
Total estimated cost over next 5 years	113,000	

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.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
AR 18-3	Pine Valley Apartments	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace roofs – fifty five residence buildings and two non-residence buildings	100,000	2004
Overlay vinyl tile floors 48 – one BR and 5 – two BR apartments	40,000	2003
Sidewalk replacement/installation	80,000	2002
Install doorbells	15,000	2003
Total estimated cost over next 5 years	235,000	

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.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
	PHA wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace maintenance truck	20,000	2002
Replace two maintenance trucks with lift gates	50,000	2004
Replace TLB	45,000	2003
Replace copy machine in office	15,000	2003
Install 40' x 100' steel maintenance building with air conditioned office	110,000	2003
Demolish/dispose of old storage shed by barn	10,000	2004
Update/replace computer network in office	15,000	2002
Reserve	10,000	2002
Reserve	10,000	2003
Reserve	10,000	2004
Total estimated cost over next 5 years	295,000	

Required Attachment D: PHA Public Housing Drug Elimination Program Plan

Section 1: General Information History

- A. Amount of PHDEP Grant \$ 41,260
- B. Eligibility type (Indicate with an "x") N1_____ N2_____ R XXXX
- 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

During the course of this Grant we expect to continue our current initiatives, which are primarily the residence of an on-site off-duty policeman whose presence has greatly reduced the incidence of crime and blotter reports as well as our after school/summer education and self-esteem program in which we educate the children about drugs and their deleterious effects on the body and the possible legal ramifications of involvement with drugs and or the drug scene.

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)
AR 18-001	28	28
AR 18-002	42	120
AR 18-003	110	120

F. Duration of Program

12 Months_____ 18 Months_____ 24 Months XXXX

G. PHDEP Program History

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

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995	-0-	N/A	N/A	N/A	N/A	N/A
FY 1996	68,500	AR 70DEP08196	-0-	N/A	07-30-1996	12-31-1997
FY 1997	-0-	N/A	N/A	N/A	N/A	N/A
FY1998	54,000	AR 37DEP018098	-0-	N/A	10-01-1998	09-30-2000
FY 1999	39,589	AR 37DEP018099	21019.49	N/A	12-09-1999	OPEN

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

Our program centers on education of the residents and their children and active involvement by our local police through our live-in police officer. The Drug Grant Coordinator works closely with our city government to raze abandoned residences (crack houses) in the vicinity of our family development. We encourage participation in community and school sports leagues for our young people as well as assist with home-work through our after-school tutoring program. We have separate “after hours” meetings for the young people and the adults to educate and advise them of known problem areas as well as upcoming changes or programs which will affect them. We judge our success by the improvements on our young people’s report cards; by their improving attitudes and dress; by the continued lower number of police blotter reports from our development; and., by the peaceful environment we are able to maintain for our residents.

B. PHDEP Budget Summary

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

FFY 2001 PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	18,720
9115 - Special Initiative	-0-
9116 - Gun Buyback TA Match	-0-
9120 - Security Personnel	-0-
9130 - Employment of Investigators	-0-
9140 - Voluntary Tenant Patrol	-0-
9150 - Physical Improvements	-0-
9160 - Drug Prevention	4,370
9170 - Drug Intervention	-0-
9180 - Drug Treatment	-0-
9190 - Other Program Costs	18,170
	-0-
TOTAL PHDEP FUNDING	41,260

C. PHDEP Plan Goals and Activities

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$ 18,720		
Goal(s)		Crime reduction in all HA developments					
Objectives		Maintain peaceful, safe developments for our residents					
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
Salary for one off-duty police officer to work in developments			10/01/2001	09/30/2003	18,720	-0-	Continued reduction in numbers of police blotter reports originating in our developments
9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
9116 - Gun Buyback TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators

1.							
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9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							

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

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
9160 - Drug Prevention					Total PHDEP Funding: \$ 4,370		
Goal(s)							
Purchase materials necessary for drug prevention activities							
Objectives							
Prevent involvement of our residents in drug related activities							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Purchase program supplies	120	Resident families	10/01/2001	09/30/2003	1,000	-0-	Continued improvement of grades of resident children as evidenced by report cards
2. Purchase books and activity prizes	120	Resident families	10/01/2001	09/30/2003	1,000	-0-	Continued improvement of grades of resident children as evidenced by report cards
3.	120	Resident families	10/01/2001	09/30/2003	2,370	-0-	Continued improvement of grades of resident children as evidenced by report cards
9170 - Drug Intervention					Total PHDEP Funding:		
Goal(s)							
Objectives							

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

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							

9190 - Other Program Costs					Total PHDEP Funds: \$ 18,170		
Goal(s)							
Provide coordinator for drug grant related activities							
Objectives							
Continue/expand drug prevention programs as finances allow							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Drug Grant Coordinator salary			10/01/2001	09/30/2003	18,170	-0-	Continued improvement of grades of resident children as evidenced by report cards
2.							
3.							

Required Attachment E: Resident Member on the PHA Governing Board

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

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

Mr. Harold N. Phillips

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

Elected

Appointed

C. The term of appointment is (include the date term expires): 5 years

07-09-1999 through 07-12-2004

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:

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

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.)

Denville Reeves
Darlene Harris
Pamela Brewer
Melba Rhinehart

Required Attachment G: Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)		
a) Public Housing Operating Fund	133,111	
b) Public Housing Capital Fund	297,736	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	41,260	
g) Resident Opportunity and Self- Sufficiency Grants	54,250	
h)		
i) Community Development Block Grant		
j) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
PHMAP		
3. Public Housing Dwelling Rental Income	342,840	PHO *
4. Other income (list below)		
Excess Utilities	30,370	PHO
Other	2,100	PHO
4. Non-federal sources (list below)		
Investment Income	22,760	PHO
Reserves	445,924	
Total resources	1,370,351	

- PHO = Public Housing Operations

Required Attachment H: Progress Report

The Magnolia Housing Authority is working to ensure 100% utilization of our units. We work to maintain an active waiting list for all of our housing, elderly/disabled and non-elderly, as well. This is an attempt to minimize turn-around time.

As a part of our overall program, we have worked to include residents in the information loop by increasing the information content at our resident council meetings as well as special called meeting for important issues such as the RASS survey.

With the constant upheaval due to implementation of the various portions of the PHRA of 1998, as a small agency, we are having a few problems keeping up with the required documentation due to our limited staff.

Security of our residents is always a paramount issue. We must make them feel safe in their homes. We have improved our fences and worked to eliminate dark areas by increasing security lighting.

In an attempt to help with family self-sufficiency, we have structured our flat rent program to favor those non-elderly/non-disabled families who work. We work with our local TANF and Adult Education agencies to help make our residents more employable. We are continuing our association with the Area Agency of Aging to provide chore service and meals to our elderly and disabled residents. We have recently received a ROSS grant to make up the shortfall in our chore service and meals budget between funded amount and actual cost.

Our efforts through the PHDEP continue to be worthwhile, not only in reducing the drug and criminal activity in the vicinity of our development, but also by retaining children in our after-school and summer tutoring programs. We are finally seeing a positive attitude change in the resident children.