

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

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# PHA Plans

5 Year Plan for Fiscal Years 2001 - 2005  
Annual Plan for Fiscal Year 2001

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

**PHA Plan  
Agency Identification**

**PHAName:** Tallahassee Housing Authority

**PHANumber:** FL073

**PHAFiscalYearBeginning:(mm/yyyy)** (07/2001)

**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
- PHA local 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
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the 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)

**5-YEAR PLAN**  
**PHAF ISCAL YEARS 2001 -2005**  
[24CFRPart903.5]

**A.Mission**

State the PHA's mission for serving the needs of low -income, very low income, and extremely low -income families in the PHA's jurisdiction. (select one of the choices below)

- x The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

The PHA's mission is: (state mission here)

**B.Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHA may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD -suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEAR PERIOD.** (Quantifiable measures would include target sets such as: numbers of families served or PHA scores achieved.) PHA should identify these measures in the space to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- x PHA Goal: Expand the supply of assisted housing  
Objectives:

- x Apply for additional rental vouchers:
- x Reduce public housing vacancies:
- x Leverage private or other public funds to create additional housing opportunities:
- x Acquire or build units or developments
- x Other (list below)

The Authority has aggressively applied and received new vouchers as the SuperNOFA's are made available. Funding has been received under the Section 8 program, for Mainstream Persons with Disabilities and Family Unification.

Public Housing vacancy reduction is decreasing in part to the PHA wide upgrade of the on/near site baseline police patrolling and the on site resident training program the Authority and Resident group are offering.

Leverage of funds between the Authority and the City of Tallahassee are being used for the construction of a 8300 sq. ft. community center for resident and community use at the Pinewood Place development.

The Authority developed a non-profit (CHDO) and has been awarded funds from the City of Tallahassee to construct five affordable homes in a target area and has a contract to perform owner/rehabilitation on existing units.

- x PHA Goal: Improve the quality of assisted housing
  - Objectives:
    - x Improve public housing management: (PHAS score) 95
    - x Improve voucher management: (SEMAP score) 95
    - x Increase customer satisfaction:
    - x Concentrate one effort to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
    - x Renovate or modernize public housing units:
    - x Demolish or dispose of obsolete public housing:
    - x Provide replacement public housing:
    - x Provide replacement vouchers:
    - x Other: (list below)
      - Partner with local government in providing leverage of funds for replacement housing through infill in various city local income communities.

The Ebony Gardens development is obsolete in design and functionality. It is built on a three-story courtyard style with exposed outside stairs. The Authority is exploring HOPEVI funding and has received a commitment from the City of Tallahassee for demolition funds. Replacement housing would be in the form of existing public housing, Section 8 and new construction.

There has been a noticeable increase for scores in both the SEMAP and PHAS programs. This can only be attributed to more monitoring and staff training.

- x PHA Goal: Increase assisted housing choices
  - Objectives:
    - x Provide voucher mobility counseling:
    - x Conduct outreach efforts to potential voucher landlords
    - x Increase voucher payment standards
    - x Implement voucher homeownership program:
    - x Implement public housing or other homeownership programs:
      - Implement public housing site-based waiting lists:
      - Convert public housing to vouchers:
      - Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

- x PHA Goal: Provide an improved living environment  
Objectives:
  - x Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
  - x Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - x Implement public housing security improvements:
    - Designated developments or buildings for particular resident groups (elderly, persons with disabilities)
    - Other: (list below)

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

- x PHA Goal: Promote self-sufficiency and asset development of assisted households  
Objectives:
  - x Increase the number and percentage of employed persons in assisted families:
  - x Provide or attract supportive services to improve assistance recipients' employability:
  - x Provide or attract supportive services to increase independence for the elderly or families with disabilities.
  - Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- x PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
  - x Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:
  - x Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability:
  - x Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:

Other:(listbelow)

**OtherPHAGoalsandObjectives:(listbelow)**

**Ourresidentjobtrainingprogramhasincreasedfrom4to7positions.Some residentshavebeeninvolvedintheseprogramsformorethanayearandhave becomeregularTHAemployees.Wehavealsoseenanincreaseofcommunitypride bytheresidentswehaveemployed.Thepositionstheyacquiretrainingininclude clerical,computer,andenergyeducation.**

**TheCapitalFundProjectfiscalyear2000and2001developmentplanshavebeen eithercompletedorbegunaheadofschedule.Wehavecompletedtheinstallationof railingsandstairs,startedrepairingconcretestepsandgenerallandscapingat Springfield,OrangeAvenueandPinewoodPlacedevelopments.Hotwaterheater replacementsareanotheritemwehaves tartedaheadofscheduleandcompletedas statedforFY2000new100ampservicepanels,newGFI's,newimprovedlighting, windowsandplumbibngareawide.**

**Wehavecompetedover80%ofnewairconditioninginstallationandnewfurances. Drainfieldsand septictankshavebeenreplacedaheadofscheduleatsomeofour thirty-six(36)scatteredritelocations.**

**AnnualPHAPlan**  
**PHAFiscalYear2001**  
[24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**StreamlinedPlan:**

- HighPerformingPHA**
- SmallAgency(<250PublicHousingUnits)**
- AdministeringSection8Only**

**TroubledAgencyPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiatives anddiscretionarypolicies,thePHAhasincludedintheAnnualPlan.

**ThisAgencyPlanincludesallrequireddocumentationaswell as developmentchangesasitrelatestothecapitalimprovement activities.Section3,FSSProgramsandDeconcentration/Income Targetingsectionproposedplansincluderesidentincentiveawards.**

**iii. AnnualPlanTableofContents**

[24CFRPart903.79(r)]

ProvideatableofcontentsfortheAnnualPlan ,includingattachments,andalistofsupporting documentsavailableforpublicinspection .

**TableofContents**

	<u>Page#</u>
<b>AnnualPlan</b>	
i. ExecutiveSummary	1
ii. TableofContents	1
1. HousingNeeds	5
2. FinancialResources	10
3. PoliciesonEligibility,SelectionandAdmissions	11
4. RentDeterminationPolicies	21
5. OperationsandManagementPolicies	25
6. GrievanceProcedures	27
7. CapitalImprovementNeeds	27
8. DemolitionandDisp osition	29
9. DesignationofHousing	30

10. ConversionsofPublicHousing	31
11. Homeownership	33
12. CommunityServicePrograms	
35	
13. CrimeandSafety	37
14. Pets(InactiveforJanuary1PHAs)	39
15. CivilRightsCertifications(include dwithPHAPlanCertifications)	39
16. Audit	39
17. AssetManagement	40
18. OtherInformation	40

**Attachments**

Indicatewhichattachmentsareprovidedbyselectingallthatapply.Providetheattachment'sname(A, B,etc.)inthespacetotheleftofthenameoftheattachment.Note:Iftheattachmentisprovidedasa **SEPARATE**filesubmissionfromthePHAPlansfile,providethefilenameinparenthesesinthespace totherightofthetitle.

**RequiredAttachments:**

- X AdmissionsPolicyforDeconcentration -fl073a04
- X FY2001CapitalFundProgramAnnualStatement -fl073b04
- Mostrecentboard-approvedoperatingbudget(RequiredAttachmentforPHAs thataretroubledoratriskofbeingdesignatedtroubledONLY)

**OptionalAttachments:**

- X PHA ManagementOrganizationalChartfl073c04
- X FY2001CapitalFundProgram5YearActionPlan -FL073d04
- X PublicHousingDrugEliminationProgram(PHDEP)Plan -FL073e04
- X CommentsofResidentAdvisoryBoardorBoards(mustbeattachedifnot includedinPHA Plantext)
- X Other(Listbelow,providingeachattachmentname)
- CGP708 -99fl073f04
- CFP501 -00fl073g04

**SupportingDocumentsAvailableforReview**

Indicatewhichdocumentsareavailableforpublicreviewbyplacingamarkinthe“Applicable&On Display”columnintheappropriaterows.Alllisteddocumentsmustbeondisplayifapplicabletothe programactivitiesconductedbythePHA.

<b>ListofSupportingDocumentsAvailableforReview</b>		
<b>Applicable &amp; OnDisplay</b>	<b>SupportingDocument</b>	<b>ApplicablePlan Component</b>
X	PHAPlanCertificationsofCompliancewiththePHAPlans andRelatedRegulations	5YearandAnnualPlans
X	State/LocalGovernmentCertificationofConsistencywith theConsolidatedPlan	5YearandAnnualPlans
X	FairHousingDocumentation: RecordsreflectingthatthePHAhasexamineditsprograms	5YearandAnnualPlans

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	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.	
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) 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), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certification of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents X 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 X check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies X 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	Public housing grievance procedures X check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	Section 8 informal review and hearing procedures X 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 the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI application 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
	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	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program X check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self -Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	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 for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	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 result 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)

# 1.StatementofHousingNeeds

[24CFRPart903.79(a)]

## **A.HousingNeedsofFamiliesintheJurisdiction/sServedby thePHA**

BasedupontheinformationcontainedintheConsolidatedPlan/sapplicabletothejurisdiction,and/or otherdataavailabletothePHA,provideastatementofthehousingneedsinthejurisdictionby completingthefollowingtable.Inthe“Overall” Needscolumn,providetheestimatednumberofrenter familiesthathavehousingneeds.Fortheremainingcharacteristics,ratetheimpactofthatfactoronthe housingneedsforeachfamilytype,from1to5,with1being“noimpact”and5being“severe impact.” UseN/Atoindicate thatnoinformationisavailableuponwhichthePHAcannmakethisassessment.

<b>HousingNeedsofFamiliesintheJurisdiction byFamilyType</b>							
FamilyType	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income<=30% ofAMI	79.80	4	5	2	1	2	2
Income>30%but <=50%ofAMI	75%						
Income>50%but <80%ofAMI	3%						
Elderly	143	1	1	1	1	1	1
Familieswith Disabilities	8	1	1	1	1	2	1
Race/Ethnicity	2/2						
Race/Ethnicity	1/2						
Race/Ethnicity	3/1						
Race/Ethnicity	4/1						

WhatsourcesofinformationdidthePHAusetoconductthisanalysis?(Checkallthat apply;allmaterialsmustbemadeavailableforpublicinspection.)

- x ConsolidatedPlanoftheJurisdiction/s  
Indicateyear:1999
- x U.S.Censusdata:theComprehensiveHousingAffordabilityStrategy  
 (“CHAS”)dataset -2000
- x AmericanHousingSurveydata  
Indicateyear:2000
- x Otherhousingmarketstudy  
Indicateyear:2000
- X Othersources:(listandindicateyearofinformation)  
Surveyonwaitinglistdatafromareasubsidizedcommunities.

## B. Housing Needs of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA -wide waiting list administered by the PHA.** PHA may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	888		146
Extremely low income <= 30% AMI	820	93%	
Very low income (> 30% but <= 50% AMI)	64	7%	
Low income (> 50% but < 80% AMI)	4	.45%	
Families with children	608	68%	
Elderly families	143	16%	
Families with Disabilities	137	15%	
Race/ethnicity(1)	54	6%	
Race/ethnicity(2)	777	89%	
Race/ethnicity(3)	48	5%	
Race/ethnicity(4)	9	.10%	
Characteristics by Bedroom Size (Public Housing)			

Housing Needs of Families on the Waiting List			
Only)			
1BR	314	35%	24
2BR	391	44%	50
3BR	151	17%	73
4BR	22	2%	162
5BR	5	0	4
5+BR	0	0	0
Is the waiting list closed (select one)? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to open the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

##### **Need: Shortage of affordable housing for all eligible populations**

The Authority will continue to work with other governmental, community based groups such as Habitat, Tallahassee Lenders Consortium and the City of Tallahassee Community and Neighborhood Services to combat the affordable housing dilemma. We will reach out into the community for project based developments, work with investors and CHDO's in owner/rehabilitation.

##### **Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off -line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed financed development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease -up rates by establishing payment standards that will enable families to rent throughout the jurisdiction

- x Undertakemeasurestoensureaccesstoaffordablehousingamongfamilies assistedbythePHA,regardlessofunitsizerequired
  - x Maintainorincreasesection8lease -upratesbymarketingtheprogramto owners,particularlythoseoutsideofareasofminorityandpoverty concentration
  - x Maintainorincreasesection8lease -upratesbyeffectivelyscreeningSection8 applicantstoincreaseowneracceptanceofprogram
  - x ParticipateintheConsolidatedPlandevelopmentprocesstoensure coordinationwithbroadercommunitystrategies
- Other(listbelow)

**Strategy2:Increasethenumberofaffordablehousingunitsby:**

Selectallthatapply

- x Applyforadditionalsection8unitsshouldtheybecomeavailable
- x Leverageaffordablehousingresourcesinthecommunitythroughthecreation ofmixed -financehousing
- x PursuehousingresourcesotherthanpublichousingorSection8tenant -based assistance.
- Other:(listbelow)

**Need:SpecificFamilyTypes:Familiesatorbelow30%ofmedian**

**Strategy1:Targetavailableassistancetofamiliesatorbelow30%ofAMI**

Selectallthatapply

- ExceedHUDfederalt argetingrequirementsforfamiliesatorbelow30%of AMIinpublichousing
  - ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30%of AMIintenant -basedsection8assistance
  - x Employadmissionspreferencesaimedatfamil ieswitheconomichardships
  - x Adoptrentpoliciestosupportandencouragework
- Other:(listbelow)

**Need:SpecificFamilyTypes:Familiesatorbelow50%ofmedian**

**Strategy1:Targetavailableassistanceto familiesatorbelow50%ofAMI**

Selectall thatapply

- x Employadmissionspreferencesaimedatfamilieswhoareworking
- Adoptrentpoliciestosupportandencouragework
- Other:(listbelow)

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

- Seek designation of public housing for the elderly
- x Apply for special -purpose voucher targeted to the elderly, should they become available
- x Other: (list below)  
The Section 8 Department will apply for the HUD Main stream Vouchers for Persons with Disabilities. This is an collaborative effort involving the Wakulla County Housing Authority, City of Tallahassee and Leon County. The two city government offices will obligate money to increase the population to be served.

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- Seek designation of public housing for families with disabilities
- x Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- x Apply for special -purpose voucher targeted to families with disabilities, should they become available
- x Affirmatively market to local non -profit agencies that assist families with disabilities  
Other: (list below)

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- x Affirmatively market to races/ethnicities shown to have disproportionate housing needs  
Other: (list below)

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- x Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- x Market the section 8 program to owners outside of areas of poverty/minority concentrations

Other:(listbelow)

**OtherH ousingNeeds&Strategies:(listneedsandstrategiesbelow)**

**(2)ReasonsforSelectingStrategies**

Ofthefactorslistedbelow,selectallthatinfluencedthePHA'sselectionofthe strategiesitwillpursue:

- x Fundingconstraints
- x Staffingconstraints
- Limitedavailabilityofsitesforassistedhousing
- x Extenttowhichparticularhousingneedsaremetbyotherorganizationsinthe community
- x EvidenceofhousingneedsasdemonstratedintheConsolidatedPlanandother informationavaila bletothePHA
- InfluenceofthehousingmarketonPHAprograms
- x Communityprioritiesregardinghousingassistance
- x Resultsofconsultationwithlocalorstategovernment
- x ResultsofconsultationwithresidentsandtheResidentAdvisor yBoard
- Resultsofconsultationwithadvocacygroups
- Other:(listbelow)

**2. StatementofFinancialResources**

[24CFRPart903.79(b)]

ListthefinancialresourcesthatareanticipatedtobeavailabletothePHAforthe supportofFederal publichousingandtenant -basedSection8assistanceprogramsadministeredbythePHAduringthePlan year.Note:thetableassumes thatFederalpublichousingortenantbasedSection8assistancegrant fundsareexpendedoneligible purposes;therefore,usesofthesefundsneednotbestated.Forother funds,indicatetheuseforthosefundsasoneofthefollowingcategories:publichousingoperations, publichousingcapitalimprovements,publichousingsafety/security,publichousi ngsupportiveservices, Section8tenant -basedassistance,Section8supportiveservicesorother.

<b>FinancialResources: PlannedSourcesandUses</b>		
<b>Sources</b>	<b>Planned\$</b>	<b>PlannedUses</b>
<b>1. FederalGrants(FY2001grants)</b>		
a) PublicHousingOperatingFund	1,480,935	
b) PublicHousingCapitalFund	1,228,140	
c) HOPEVIRevitalization		
d) HOPEVIDemolition		
e) AnnualContributionsforSection8 Tenant-BasedAssistance	8,688,956	

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	157,488	
g) Resident Opportunity and Self - Sufficiency Grants	38,640	
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
		.
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
<b>FL29P073707-98</b>	0	
FL29P073708-99	0	
FL29P0733501-00	851,184	Energy efficient measures and capital improvements
<b>3. Public Housing Dwelling Rental Income</b>	794,800	
<b>4. Other income (list below)</b>		
Work orders, late fees, laundry mat	45,600	To be used in the operation of public housing developments and laundry utilities.
<b>5. Non -federal sources (list below)</b>		
<b>Total resources</b>	13,285,743	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

## A. Public Housing

Exemptions: PHA that do not administer public housing are not required to complete subcomponent 3A.

### (1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (Select all that apply)

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- x Other: (describe)  
Based on date and time after last enrolled applicant.

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- x Criminal or Drug-related activity
- x Rental history
- x Housekeeping
- Other (describe)

c. x Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. x Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. x Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (Either directly or through an NCIC authorized source)

### (2) Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- x Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

b. Where may interested persons apply for admission to public housing?

- x PHA main administrative office
- PHA development site management office
- Other (list below)

c. If the PHA plan to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) **Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously HUD-approved site-based waiting list plan)? If yes, how many lists?

3.  Yes  No: May families be on more than one list simultaneously? If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site-based waiting lists
- At the development to which they would like to apply
- Other (list below)

### **(3) Assignment**

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (Select one)

- One  
 Two  
x  Three or more

b. x Yes  No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

### **(4) Admissions Preferences**

a. Income targeting:

x Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfer take precedence over new admissions? (list below)

- Emergencies
- Overhoused
- Underhoused
- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)  
If under criminal partnership between THA/local law enforcement in the best interest of the family.

c. Preferences

1. x Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either the former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Household that contribute to meeting income goals (broad range of incomes)
- Household that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s)

3.IfthePHAwillemployadmissionspreferences,pleaseprioritizebyplacinga“1”inthepacethatrepresentsyourfirstpriority,a“2”intheboxrepresentingyoursecondpriority,andsoon.Ifyougiveequalweighttooneormoreofthesechoices(eitherthroughanabsolutehierarchyorthroughapointsystem),placethesamenumbernexttoeach.Thatmeansyoucanuse“1”morethanonce,“2”morethanonce,etc.

1DateandTime

FormerFederalpreferences:

- InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousingOwner,Inaccessibility,PropertyDisposition)
- Victimsofdomesticviolence
- Substandardhousing
- Homelessness
- Highrentburden

Otherpreferences(selectallthatapply)

- Workingfamiliesandthoseunabletoworkbecauseofageordisability
- Veteransandveterans’families
- Residentstholiveand/orworkinthejurisdiction
- Thoseenrolledcurrentlyineducational,training,orupwardmobilityprograms
- Householdsthatcontributeincomegoals(broadrangeofincomes)
- Householdsthatcontributeincomerequirements(targeting)
- Thosepreviouslyenrolledineducational,training,orupwardmobilityprograms
- Victimsofreprisalsorhatecrimes
- Otherpreference(s)(listbelow)

4.Relationshipofpreferencetoincometargetingrequirements:

- ThePHAappliespreferenceswithinincometiers
- Notapplicable:thepoolofapplicantfamiliesensuresthatthePHAwillmeetincome-targetingrequirements

**(5)Occupancy**

a.Whatreferencematerialscanapplicantsandresidentsusetooobtaininformationabouttherulesofoccupancyofpublichousing(selectallthatapply)?

- ThePHA-residentlease
- ThePHA’sAdmissionsand(Continued)Occupancypolicy
- PHAbriefingseminarsorwrittenmaterials
- Othersource(list)
- SiteOfficerresidentbulletinboards

b. How often must residents notify the PHA of changes in family composition?

(Select all that apply)

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

**(6) Deconcentration and Income Mixing**

a. x Yes  No: Did the PHA's analysis of its family (general occupancy) developmentsto determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. x Yes  No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- Adoption of site -based waiting lists  
If selected, list targeted developments below:  
Ebony Gardens, Springfield Apartments and Orange Avenue Apartments.
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below :  
Ebony Gardens, Springfield Apartments and Orange Avenue Apartments.
- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- Other (list policies and developmentst argeted below)

d. x Yes  No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- x Additional affirmative marketing
- x Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- x Adoption of rent incentive to encourage deconcentration of poverty and income-mixing
- Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher -income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- x List (any applicable) developments below:

Ebony Gardens, Springfield Apartments and Orange Avenue Apartments

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower -income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- x

(Pinewood Place)

## B. Section 8

Exemptions: PHA that do not administer section 8 are not required to complete sub -component 3B. Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

### (1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- x Criminal or drug -related activity only to the extent required by law or regulation
- Criminal and drug -related activity, more extensively than required by law or regulation
- More general screening than criminal and drug -related activity (list factors below)
- Other (list below)

b. x Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. x Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. x Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- Criminal or drug -related activity  
x Other (describe below)  
(Rental and Owner history)

### **(2) Waiting List Organization**

a. With which of the following program waiting lists is the section 8 tenant -based assistance waiting list merged? (select all that apply)

- x None  
 Federal public housing  
 Federal moderate rehabilitation  
 Federal project -based certificate program  
 Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant -based assistance? (select all that apply)

- x PHA main administrative office  
 Other (list below)

### **(3) Search Time**

a. x Yes  No: Does the PHA give extensions on standard 60 -day period to search for a unit?

If yes, state circumstances below:

(Medical limitations prevent timely lease up, portability under another PHA jurisdiction, and unable to secure appropriate housing due to large family size.)

### **(4) Admissions Preferences**

a. Income targeting

- Yes x No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. Yes x No: Has the PHA established preferences for admission to section 8 tenant -based assistance? (other than date and time of application) (if

no,skiptosubcomponent (5)Specialpurposesection8  
assistanceprograms )

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- 1 Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- 1 Those enrolled currently in educational, training, or upward mobility programs
- 1 Household that contributes to meeting income goals (broad range of incomes)
- Household that contributes to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a points system), place the same number next to each. That means you can use a "1" more than once, "2" more than once, etc.

1 Date and Time

Former Federal preferences

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 1 Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- 1 Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- 1 Those enrolled currently in educational, training, or upward mobility programs
- Household that contribute to meeting income goals (broad range of incomes)
- 1 Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- 1 Date and time of application
- Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- This preference has previously been reviewed and approved by HUD
- The PHA requests approval for this preference through this PHA Plan

6. Relationship of preference to income targeting requirements: (select one)

- The PHA applies preferences within income tiers
- x Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

**(5) Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admission to any special purpose section 8 program administered by the PHA contained? (select all that apply)

- x The Section 8 Administrative Plan
- Briefing sessions and written materials
- Other (list below)

b. How does the PHA announce the availability of any special purpose section 8 programs to the public?

- x Through published notices
- x Other (list below)

(Additional direct notice to social service and advocacy groups)

**4.PHARentDeterminationPolicies**

[24CFRPart903.79(d)]

**A.PublicHousing**

Exemptions:PHAsthatdonotadministerpublichousinga rentrequiredto completesub -component 4A.

**(1)IncomeBasedRentPolicies**

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

The PHA will not employ any discretionary rent -setting policies for income based rent in public housing. Income -based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub -component (2))

---or---

x The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- \$0
- x  \$1-\$25
- \$26-\$50

2. x Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below :

- **Household has last eligibility for a federal, state, or local assistance program**

- **Household has applied for federal, state, or local assistance program and is waiting for a determination by program officials as to its eligibility for assistance.**
- **Household would face eviction if forced to pay minimum rent**
- **Household income has decreased or**

**When death has occurred in the family**

c. Rents set at less than 30% than adjusted income

1.  Yes  No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusion policies does the PHA plan to employ (select all that apply)

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent -setting policy)  
If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent -setting policy)  
If yes, state percentage/s and circumstances below:

For household heads

For other family members

For transportation expenses

For the non-reimbursed medical expenses of non-disabled or non-elderly families

Other (describe below)

1. Enrolled in a qualified training program

2. Permitted deductions for family members working 25 hrs. per week or more – deductions are for federal tax and medical insurance

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- Yes for all developments
- Yes but only for some developments
- x No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- For all developments
- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95<sup>th</sup> percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent determination:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the change results in an adjustment to rent? (select all that apply)

- Never
- At family option
- x Anytime the family experiences an income increase
- Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \_\_\_\_\_
- Other (list below)

g. x Yes  No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

**(2) Flat Rents**

1. In setting the market -based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- This section 8 rent reasonable study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below)  
Analysis of leased families

**B. Section 8 Tenant -Based Assistance**

Exemptions: PHA that do not administer Section 8 tenant -based assistance are not required to complete sub -component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

**(1) Payment Standards**

Describe the voucher payment standards and policies .

a. What is the PHA's payment standard? (select the category that best describes your standard)

- At or above 90% but below 100% of FMR
- 100% of FMR
- Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)

d. How often are repayment standards reevaluated for adequacy? (select one)

- Annually  
 Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families  
 Rent burdens of assisted families  
 Other (list below)

(The Authority will continue to rely on the fair market rents per HUD/Federal Register relating to the 40<sup>th</sup> percentile)

## **(2) Minimum Rent**

a. What amount best reflects the PHA's minimum rent? (select one)

- \$0  
 \$1-\$25  
 \$26-\$50

b. Yes x No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[24CFR Part 903.79(e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached. FI073c04  
 A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	583	75
Section 8 Vouchers	1088	50
Section 8 Certificates	Combined with Vouchers	
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)	398	
Other Federal Programs (list individually)		

**C. Management and Maintenance Policies**

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)  
 The Public Housing Resident Guide is the "Admissions and Continued Occupancy Policy Manual", Tenant Handbook and the Rules and Regulations Booklet. The Maintenance Department also has a Manual that describes the general operation of that department as it pertains to personnel, work orders, unit turnaround and pest infestation procedures.

(2) Section 8 Management: (list below)  
 The Section 8 Department has an Administrative Management Plan that governs its operation. Clients are given packets annually at each recertification and new applicants as part of their briefing packet all HUD information as it relates to

fairhousing, fairmarketrents, locatingagoodunit, securitydeposits, occupancystandards, etc. Landlordshaveahandbookthatoutlines their obligations of the program and it outlines fairhousing policies and their obligationstoscreen their tenants.

## **6. PHA Grievance Procedures**

[24CFRPart903.79(f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8 - Only PHAs are exempt from sub - component 6A.

### **A. Public Housing**

1. Yes x No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24CFRPart966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA offices should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- x PHA main administrative office
- x PHA development management offices
- Other (list below)

### **B. Section 8 Tenant - Based Assistance**

1. Yes x No: Has the PHA established informal review procedures for applicants to the Section 8 tenant - based assistance program and informal hearing procedures for families assisted by the Section 8 tenant - based assistance program in addition to federal requirements found at 24CFR982?

If yes, list additions to federal requirements below:

2. Which PHA offices should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- x PHA main administrative office
- Other (list below)

## **7.CapitalImprovementNeeds**

[24CFRPart903.79(g)]

ExemptionsfromComponent7:Section8onlyPHAsarenotrequiredto completethiscomponentand mayskiptoComponent8.

**PHAWidereplacementofwaterheaterswithhighefficientmodels**

**Installationofcarpetandunitrepairofvacantapartments**

**Residentjobandleadershiptraining**

**PHAWidereplacementofappliances**

**Repairconcretesteps(Ebony,SpringfieldandOrangeAvenueApts)**

**Generalsidewalkrepair**

**Generallandscapingandelectricalupgrades**

### **A.CapitalFundActivities**

Exemptionsfromsub -component7A:PHAs thatwillnotparticipateintheCapitalFundProgrammay skiptocomponent7B.AllotherPHAsmustcomplete7Aasinstructed.

### **(1)CapitalFundProgramAnnualStatement**

UsingpartsI,II,andIIIoftheAnnualStatementfortheCapitalFundProgram(CFP),identifycapital activities thePHAisproposingfortheupcomingyeartoensurelong -termphysicalandsocialviability ofitspublichousingdevelopments.ThisstatementcanbecompletedbyusingtheCFPAnnual Statementtablesprovided inthetablelibraryattheendofthePHAPlantemplate **OR**,atthePHA's option,bycompletingandattachingaproperlyupdatedHUD -52837.

Selectone:

TheCapitalFundProgramAnnualStatementisprovidedasanattachmentto thePHAPlanatAttachment(statename)(FL073b04)

-or-

TheCapitalFundProgramAnnualStatementisprovidedbelow:(ifselected, copytheCFPAnnualStatementfromtheTableLibraryandinsertthere)

### **(2)Optional5 -YearActionPlan**

Agenciesareencouragedtoincludea5 -YearActionPlancoveringcapitalworkitems.Thisstatement canbecompletedbyusingthe5YearActionPlantableprovidedinthetablelibraryattheendofthe PHAPlantemplate **OR**bycompletingandattachingaproperlyupdatedHUD -52834.

a.x Yes  No:Is thePHAprovidinganoptional5 -YearActionPlanfortheCapital Fund?(ifno,skiptosub -component7B)

b.If yestoquestiona,selectone:

TheCapitalFundProgram5 -YearActionPlanisprovidedasanattachmentto thePHAPlanatAttachment(statenameFL073d04)

-or-

- The Capital Fund Program 5 - Year Action Plan is provided below: (if selected, copy the CF P optional 5 Year Action Plan from the Table Library and insert here)

## **B. HOPEVI and Public Housing Development and Replacement Activities (Non -Capital Fund)**

Applicability of sub -component 7B: All PHAs administering public housing. Identify any approved HOPEVI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- Yes x No: a) Has the PHA received a HOPEVI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPEVI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
- Revitalization Plan submitted, pending approval
- Revitalization Plan approved
- Activities pursuant to an approved Revitalization Plan underway

Yes x No: c) Does the PHA plan to apply for a HOPEVI Revitalization grant in the Plan year? 2002

If yes, list development name/s below:

Ebony Gardens

Yes x No: d) Will the PHA be engaging in any mixed -financed development activities for public housing in the Plan year?

If yes, list developments or activities below:

Yes x No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?

If yes, list developments or activities below:

**8. Demolition and Disposition**

[24CFR Part 903.79(h)]

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

1. x 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 component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

Yes x No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

<b>Demolition/Disposition Activity Description</b>	
1a. Development name:	Ebony Gardens
1b. Development (project) number:	FL073 -04
2. Activity type:	Demolition <input checked="" type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one)	Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission:	(06/30/2002)
5. Number of units affected:	102
6. Coverage of action (select one)	<input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity:	a. Actual or projected start date of activity (06/30/2003) b. Projected end date of activity (06/01/05)

**9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

[24CFR Part 903.79(i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. x.yesNo: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below.

<b>Designation of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly	<input type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input type="checkbox"/>
3. Application status (select one)	
Approved; included in the PHA's Designation Plan	<input type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>          (DD/MM/YY)</u>	
5. If approved, will this designation constitute a (select one)	
<input type="checkbox"/> New Designation Plan	
<input type="checkbox"/> Revision of a previously approved Designation Plan?	
6. Number of units affected:	
7. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input type="checkbox"/> Total development	

**10. Conversion of Public Housing to Tenant -Based Assistance**

[24 CFR Part 903.79(j)]

**A. Assessment of Reasonable Revitalization Pursuant to section 202 of the HUD FY1996 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 FY1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete as a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

<b>Conversion of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	73 -1/3, 73-2, 73-4, 73-6, 73-16, 73-17
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 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)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPEVI demolition application (date submitted or approved: _____)

Units addressed in a pending or approved HOPEVI 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**

**C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937**

**11. Homeownership Programs Administered by the PHA**

[24CFR Part 903.79(k)]

Public Housing Section 5(h) Homeownership Plan  
 Section 8 Homeownership Plan

**A. Public Housing**

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. x Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z -4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

x Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: Scattered Sites 1b. Development (project) number: FL07316&18
2. Federal Program authority: <input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (21/01/1977)
5. Number of units affected: 36. Coverage of action: (select one) Part of the development <input checked="" type="checkbox"/> Total development

## B. Section 8 Tenant Based Assistance

1. x 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 component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

Homeownership will be offered to all eligible families or certain families. All existing holders of section 8 vouchers in good standing who meet the minimum criteria established by HUD are eligible to participate. New clients to the program must have one year as a tenant in public housing immediately preceding the issuance of a voucher, and maintaining a status of good standing.

In case of special purpose Section 8 allocations such as the Mainstream Program for persons with disabilities, person on fixed incomes who already own a home but whose housing expense exceeds 50% of their income may be eligible to utilize the

homeownership option upon entry to the Section 8 program in order to maintain their housing. There will be established minimum income requirements and homeownership counseling arrangements.

a. Size of Program

Yes  No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- 25 or fewer participants
- 26- 50 participants
- 51 to 100 participants
- more than 100 participants

b. PHA -established eligibility criteria

Yes  No : Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria:

## **12. PHA Community Service and Self -sufficiency Programs**

[24 CFR Part 903.79(1)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8 - Only PHAs are not required to complete sub -component C.

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

x Yes  No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed?

**10/21/98**

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- x Client referrals
- x Information sharing regarding mutual clients (for rent determinations and otherwise)
- x Coordinate the provision of specific social and self -sufficiency services and programsto eligible families

- Jointly administer programs
- Partner to administer a HUD Welfare -to-Work voucher program
- Joint administration of other demonstration program
- Other (describe)

**B. Services and programs offered to residents and participants**

**(1) General**

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing home ownership option participation
- Preference/eligibility for section 8 home ownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

Yes  No: Does the PHA coordinate, promote or provide any program to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office/ PHA main office/ other provider name)	Eligibility (public housing or section 8 participants or both)

<i>Section3Training</i>	6	<i>Notices</i>	<i>THAMainOffice</i>	<i>PublicHousing</i>
TANF/WAGESTraining	4	Notices	THAMainOffice	Publichousing

**(2)FamilySelfSufficiencyprogram/s**

a.ParticipationDescription

FamilySelfSufficiency(FSS)Participation		
Program	RequiredNumberofParticipants (startofFY2001Estimate)	ActualNumberofParticipants (Asof:03/16/01)
PublicHousing	25	25
Section8	43	54

b.x Yes  No: IfthePHAisnotmaintainingtheminimumprogramsizerequiredbyHUD,doesthemostrecentFSSActionPlanaddressthestepsthePHAplantoachieveatleasttheminimumprogramsiz?

Ifno,liststepsthePHAwilltakebelow:

(Section8hasjustbeenawardedagr anttohireafull -timeSection8FamilySelf - SufficiencyCoordinator)

**C.WelfareBenefitReductions**

1.ThePHAiscomplyingwiththestatutoryrequirementssection12(d)oftheU.S.HousingActof1937(relatingtothetreatmentofincomechanges resultingfromwelfareprogramrequirements)by:(selectallthatapply)

- AdoptingappropriatechangestothePHA’spublichousingrentdeterminationpoliciesandtrainstafftocarryoutthosepolicies
- x Informingresidentsofnewpolicy onadmissionandreexamination  
Activelynotifyingresidentsofnewpolicyattimesinadditiontoadmissionandreexamination.  
EstablishingorpursuingacooperativeagreementwithallappropriateTANFagenciesregardingtheexchangeofinformationand coordinationofservices
- x EstablishingaprotoforexchangeofinformationwithallappropriateTANFagencies

Other:(listbelow)

**D.ReservedforCommunityServiceRequirementpursuanttoSection12(c)of  
theU.S.HousingActof19 37**

**13.PHASafetyandCrimePreventionMeasures**

[24CFRPart903.79(m)]

ExemptionsfromComponent13:HighperformingandsmallPHAsnotparticipatinginPHDEPand  
Section8OnlyPHAsmayskiptocomponent15.HighPerformingandsmallPHAs thatar e  
participatinginPHDEPandaesubmittingaPHDEPPlanwiththisPHAPlanmayskiptosub  
componentD. -

**A.Needformeasurestoensurethesafetyofpublichousingresidents**

1.Describetheneedformeasurestoensurethesafetyofpublichousingr esidents  
(selectallthatapply)

- x Highincidenceofviolentand/or drug -relatedcrimeinsomeorallofthePHA's  
developments
- x Highincidenceofviolentand/or drug -relatedcrimeintheareassurroundingor  
adjacenttothePHA'sdevelopments
- x Residentsfearfulfortheirsafetyand/orthesafetyoftheirchildren
- x Observedlower -levelcrime,vandalismand/orgraffiti  
Peopleonwaitinglistunwillingtomoveintooneormoredevelopmentsdueto  
perceivedand/oractuallevelsofviolentand/or drug -relatedcrime
- Other(describellow)

2.WhatinformationordatadidthePHAusedtodeterminetheneedforPHAactions  
toimprovesafetyofresidents(selectallthatapply).

- x Safetyandsecuritysurveyofresidents
- x Analysisofcrimes taticsovertimeforcrimescommitted“inandaround”  
publichousingauthority
- Analysisofcosttrendsovertimeforrepairofvandalismandremovalofgraffiti
- x Residentreports
- PHAemployeereports
- x Policereports
- x Demonstrable,quantifiablesuccesswithpreviousorongoinganticrime/anti  
drugprograms
- Other(describellow)

3.Whichdevelopmentsaremostaffected?(listbelow)

PinewoodPlace,EbonyGardens,SpringfieldandOrangeAvenueApart ments

**B. Crime and Drug Prevention activities the PHA has undertaken or plan to undertake in the next PHA fiscal year**

1. List the crime prevention activities the PHA has undertaken or plan to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug -prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at -risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

2. Which developments are most affected? (list below)

**Springfield Apartments –1700 Joe Louis Street**  
**Orange Avenue Apartments –2710 Country Club Drive**

**C. Coordination between PHA and the police**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

2. Which developments are most affected? (list below)

**Springfield Apartments**  
**Orange Avenue Apartments**  
**Ebony Gardens Apartments**  
**Pinewood Apartments**

**D. Additional information as required by PHDEP/PHDEP Plan**

PHA eligible for FY2001 PHDEP funds must provide 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?

X Yes No: Has the PHA included the PHDEP Plan for FY 2001 in this PHA Plan?

Yes x No: This PHDEP Plan is an Attachment. (Attachment Filename: fl073e04\_\_)

## **14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

Pet policy is applicable to elderly/disabled residents only - Attachment FL073h04

## **15. Civil Rights Certifications**

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

[24CFR Part 903.79(o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

## **16. Fiscal Audit (See attachment FL073x01)**

[24CFR Part 903.79(p)]

1.  Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)

2.  Yes  No: Was the most recent fiscal audit submitted to HUD?

3.  Yes x No: Were there any findings as the result of that audit?

4.  Yes No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? (Not Applicable) \_\_\_

5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?

If not, when are they due (state below)? (Not Applicable)

## **17. PHA Asset Management**

[24CFR Part 903.79(q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1.  Yes x No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital

investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

- Not applicable
- Private management
- Development-based accounting
- Comprehensive stock assessment
- Other: (list below)

3.  Yes  No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

### **18. Other Information**

[24 CFR Part 903.79(r)]

#### **A. Resident Advisory Board Recommendations**

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: (if comments were received, the PHA **MUST** select one)  
Attached at Attachment (Filename) fl073i04

Provided below:

Residents met at public hearings with Legal Aid Staff and PHA personnel. Some concerns were the effects of deconcentration (income targeting) possible Hope VI application for one of four older development, social service programs and capital improvements.

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

Considered comments, but determined that no changes to the PHA Plan were necessary.

The PHA changed portions of the PHA Plan in response to comments

List changes below:

Other: (list below)

#### **B. Description of Election process for Residents on the PHA Board**

1.  Yes  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2.  Yes  No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub component C.)

### 3. Description of Resident Election Process

#### a. Nomination of candidates for place on the ballot: (select all that apply)

- Candidates were nominated by resident and assisted family organizations  
 Candidates could be nominated by any adult recipient of PHA assistance  
 Self-nomination: Candidates registered with the PHA and requested a place on ballot  
 Other: (describe) This position is appointed by the Mayor of the City of Tallahassee

#### b. Eligible candidates: (select one)

- Any recipient of PHA assistance  
 Any head of household receiving PHA assistance  
 Any adult recipient of PHA assistance  
 Any adult member of a resident or assisted family organization  
 Other (list)

#### c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant based assistance)  
 Representatives of all PHA resident and assisted family organizations  
 Other (list)

### C. 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: (provide name here)

(Tallahassee/Leon County)

#### 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)

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

Other:(listbelow)

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

The Consolidated Plan supports the Authority through interaction among various housing programs and the awarding of funds. The City of Tallahassee has committed funds under the CDGB program and endorsed the formulation of a "Community Housing Development Organization (CHDO) as well as we are negotiating the transfer of street ownership at our developments to them.

#### **D. Other Information Required by HUD**

Use this section to provide any additional information requested by HUD.

## **Attachments**

Use this section to provide any additional attachments referenced in the Plans.

# PHA Plan Table Library

## Component 7 Capital Fund Program Annual Statement Parts I, II, and III

### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number FL29P073501 -00FFY of Grant Approval: 10/2000

x Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non -CGP Funds	
2	1406 Operations	\$84,073
	1408 Management Improvements	\$50,000
4	1410 Administration	\$62,372
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	\$35,000
8	1440 Site Acquisition	
9	1450 Site Improvement	135,971
10	1460 Dwelling Structures	424,572
11	1465.1 Dwelling Equipment - Nonexpendable	48,750
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2 - 19)</b>	<b>\$840,738.00</b>
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	424,572.00

**AnnualStatement**  
**CapitalFundProgram(CFP)PartII:SupportingTable**

Development Number/Name HA-WideActivities	GeneralDescriptionofMajorWork Categories	Development Account Number	Total Estimated Cost

**AnnualStatement  
CapitalFundProgram(CFP)PartIII:ImplementationSchedule**

Development Number/Name HA-WideActivities	AllFundsObligated (QuarterEndingDate) (12/31/99)	AllFundsObligated (QuarterEndingDate) (12/31/99)
FL29P073705A	1,704.782.84	1,654.515.86
FL29P073706	788.933.00	547,082.10
FL29P073707	727,734.00	78,614.81
FL29P073708	-0-	-0-
FL29P073709	-0-	-0-

## Optional Table for 5 -Year Action Plan for Capital Fund (Component 7)

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.

Optional 5 -Year Action Plan Tables					
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development		
Description of Needed Physical Improvements or Management Improvements				Estimated Cost	Planned Start Date (HA Fiscal Year)
(See Attachment #)					
Total estimated cost over next 5 years					



**PHDEP01**

ACCT#	DESCRIPTION		Original BUDGET	Revised BUDGET
9110	Off-DutyPoliceOfficers		69,338.00	
9140	VoluntaryTenantPatrol			
9150	PhysicalImprovements			
9160	DrugPrevention			
	Games	20,000.00		
	TuitionReimburse	5,000.00		
	Training	5,000.00	30,000.00	
	<u>YouthPrograms:</u>			
	TeenCenters			
	payroll	30,000.00		
	activities	5,000.00		
	YouthSports			
	Shirts	200.00		
	RegistrationFees	250.00		
	VanUsage			
	Drivers	13,500.00		
	Insurance	9,000.00		
	Up-Keep	200.00	58,150.00	
			157,488.00	-

**Annual Statement/  
Performance and Evaluation Report**  
Part I: Summary  
Capital Fund Grant Program (CFG)

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

OMB Approval 2577-0157 (Exp. 7/31/98)

<b>HAName</b> <b>TALLAHASSEE HOUSING AUTHORITY</b>		<b>Capital Fund Project Number</b> <b>FL29P073502-01</b>		<b>FFY of Grant Approval</b> <b>2001</b>	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement/Revision Number _____	
<input type="checkbox"/> Final Performance and Evaluation Report		<input type="checkbox"/> Performance and Evaluation Report for Program Year Ending _____			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised()	Obligated	Expended
1	Total Non-CGPF Funds				
2	1406 Operations (May not exceed 10% of line 19)	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$45,000.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$56,500.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$70,000.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$125,000.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$862,890.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$48,750.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$20,000.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
17	1498 Development	\$0.00	\$0.00	\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-18)	\$1,228,140.00	\$0.00	\$0.00	\$0.00
20	Amount of line 16 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 16 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 16 Related to Security	\$25,000.00	\$0.00	\$0.00	\$0.00
23	Amount of line 16 Related to Energy Conservation Measures	\$164,000.00	\$0.00	\$0.00	\$0.00
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.		(2) To be completed for the Performance and Evaluation Report.			
Signature of Executive Director and Date		Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Capital Fund Program

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

OMB Approval 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHAWide	<b>1408 Management Improvements</b>						
	Staff training in HUD regulations	1408	\$5,000.00	\$0.00	\$0.00	\$0.00	
	Maintenance Skills Training	1408	\$5,000.00	\$0.00	\$0.00	\$0.00	
	Resident job and leadership training	1408	<u>\$35,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1408</b>		<b>\$45,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
PHAWide	<b>1410 Administration</b>						
	Executive Director	1410	\$5,000.00	\$0.00	\$0.00	\$0.00	
	Executive Secretary	1410	\$2,500.00	\$0.00	\$0.00	\$0.00	
	Maintenance Manager	1410	\$16,000.00	\$0.00	\$0.00	\$0.00	
	Capital Funds Coordinator	1410	\$28,000.00	\$0.00	\$0.00	\$0.00	
	Finance Director	1410	\$3,500.00	\$0.00	\$0.00	\$0.00	
	Bookkeeper	1410	<u>\$1,500.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1410</b>		<b>\$56,500.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
PHAWide	<b>1430 Fees and Cost</b>						
	A&E Fees	1430	\$20,000.00	\$0.00	\$0.00	\$0.00	
	Hope VI Consultant	1430	<u>\$50,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1430</b>		<b>\$70,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
FL29P073-001 & FL29P073-003 Springfield	<b>1450 Site Improvements</b>						
	General Landscaping	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Installation of security systems at all sites	1450	<u>\$25,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal 1450</b>		<b>\$35,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.			(2) To be completed for the Performance and Evaluation Report.				
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date				

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Capital Fund Program

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

OMB Approval 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>FL29P073-001&amp;</b>	<b>1460 Dwelling Structure</b>						
<b>FL29P073-003 Springfield</b>	Rewire 3, 4, and 5 BR Apartments including 100 amp service	1460	\$118,883.00	\$0.00	\$0.00	\$0.00	
	Replace front security screen doors	1460	\$25,000.00	\$0.00	\$0.00	\$0.00	
	Installation of mini-blinds for uniformity	1460	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Replace front entrance door with metal insulated	1460	\$55,000.00	\$0.00	\$0.00	\$0.00	
	Installation of carpeting and unit repair in vacant apartments (approx 125)	1460	\$55,007.00	\$0.00	\$0.00	\$0.00	
	<b>Subtotal 1460</b>		<b>\$263,890.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1465 Dwelling Equipment</b>						
	Replace Ranges & Refrigerators	1465	\$20,000.00	\$0.00	\$0.00	\$0.00	
	<b>Total 1465</b>		<b>\$20,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1470 Non-Dwelling Structures</b>						
	Installation of laundry facilities	1470	\$20,000.00	\$0.00	\$0.00	\$0.00	
	<b>Subtotal 1470</b>		<b>\$20,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Total Cost for Springfield</b>		<b>\$338,890.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>FL29P073-002 Orange Avenue</b>	<b>1450 Site Improvements</b>						
	General Landscaping	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	<b>Subtotal 1450</b>		<b>\$10,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1460 Dwelling Structure</b>						
	-Replace existing natural gas fired forced air furnace with new unit, new closet, ductwork, A/C	1460	\$100,000.00	\$0.00	\$0.00	\$0.00	
	Rewire 1, 2, 3, 4, and 5 BR Apartments including 100 amp service	1460	\$160,000.00	\$0.00	\$0.00	\$0.00	
	Installation of mini-blinds for uniformity	1460	\$5,000.00	\$0.00	\$0.00	\$0.00	
	Replace front security screen doors	1460	\$25,000.00	\$0.00	\$0.00	\$0.00	
	Replace front entrance door with metal insulated	1460	\$55,000.00	\$0.00	\$0.00	\$0.00	
	Installation of carpeting and unit repair in vacant apartments (approx 125)	1460	\$64,000.00	\$0.00	\$0.00	\$0.00	
	<b>Subtotal 1460</b>		<b>\$409,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	

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Signature of Executive Director and Date	Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Capital Fund Program

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

OMB Approval 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost		Total Actual Cost		Status of Proposed Work(2)
			Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
FL29P073-002 Orange Avenue	1465 Dwelling Equipment Replace Ranges & Refrigerators	1465	\$20,000.00	\$0.00	\$0.00	\$0.00	
	Total 1465		\$20,000.00	\$0.00	\$0.00	\$0.00	
	<b>Total Cost for Orange Avenue</b>		<b>\$439,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
FL29P073-004 Ebony Gardens	1450 Site Improvements General Landscaping	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Subtotal 1450		\$10,000.00	\$0.00	\$0.00	\$0.00	
	1465 Dwelling Equipment Replace Ranges & Refrigerators	1465	\$2,000.00	\$0.00	\$0.00	\$0.00	
	Total 1465		\$2,000.00	\$0.00	\$0.00	\$0.00	
	<b>Total Cost for Ebony Gardens</b>		<b>\$12,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
FL29P073-006 Pinewood Place Place	1450 Site Improvement General Landscaping	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Subtotal 1450		\$10,000.00	\$0.00	\$0.00	\$0.00	
	1460 Dwelling Structure Roofing replacement/repair	1460	\$75,000.00	\$0.00	\$0.00	\$0.00	
	Subtotal 1460		\$75,000.00	\$0.00	\$0.00	\$0.00	
	1465 Dwelling Equipment Replace Ranges & Refrigerators	1465	\$3,000.00	\$0.00	\$0.00	\$0.00	
	Total 1465		\$3,000.00	\$0.00	\$0.00	\$0.00	
	<b>Total Cost for Pinewood Place</b>		<b>\$88,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
FL29P073-015 Scattered Sites	1450 Site Improvement Resurface Drives	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Repair Septic Tank Drain Fields	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Landscaping	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Subtotal 1450		\$30,000.00	\$0.00	\$0.00	\$0.00	

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Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**AnnualStatement/  
PerformanceandEvaluationReport**  
PartII: SupportingPages  
CapitalFundProgram

**U.S.DepartmentofHousing  
andUrbanDevelopment**  
OfficeofPublicandIndianHousing

OMBApproval2577-0157(Exp.7/31/98)

Development Number/Name HA-Wide Activites	GeneralDescriptionofMajor WorkCategories	Development Account Number	TotalEstimatedCost		TotalActualCost		StatusofProposedWork(2)
			Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
<b>FL29P073-015 ScatteredSites</b>	<b>1460DwellingStructure</b>						
	Repairsiding,repaintexteriors	1460	\$15,000.00	\$0.00	\$0.00	\$0.00	
	InstallVinylsidingoverT-111	1460	\$20,000.00	\$0.00	\$0.00	\$0.00	
	ReplaceRoofing	1460	\$4,500.00	\$0.00	\$0.00	\$0.00	
	EnergyEfficiencyMeasures	1460	\$2,000.00	\$0.00	\$0.00	\$0.00	
	ReplaceHVACsystems	1460	<u>\$11,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal1460</b>		<b>\$52,500.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1465DwellingEquipment</b>						
	ReplaceRanges&Refrigerators	1465	<u>\$1,250.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total1465</b>		<b>\$1,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>TotalCostforScatteredSites</b>			<b>\$83,750.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>FL29P073-016 ScatteredSites</b>	<b>1450SiteImprovement</b>						
	ResurfaceDrives	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	RepairSepticTankDrainFields	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Landscaping	1450	<u>\$10,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal1450</b>		<b>\$30,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1460DwellingStructure</b>						
	Repairsiding,repaintexteriors	1460	\$15,000.00	\$0.00	\$0.00	\$0.00	
	InstallVinylsidingoverT-111	1460	\$20,000.00	\$0.00	\$0.00	\$0.00	
	ReplaceRoofing	1460	\$4,500.00	\$0.00	\$0.00	\$0.00	
	EnergyEfficiencyMeasures	1460	\$2,000.00	\$0.00	\$0.00	\$0.00	
ReplaceHVACsystems	1460	<u>\$11,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>		
<b>Subtotal1460</b>		<b>\$52,500.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
(1)TobecompletedforthePerformanceandEvaluationReportoraRevisedAnnualStatement.			(2)TobecompletedforthePerformanceandEvaluationReport.				
SignatureofExecutiveDirectorandDate			SignatureofPublicHousingDirector/OfficeofNativeAmericanProgramsAdministratorandDate				

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Capital Fund Program

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

OMB Approval 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>FL29P073-016 Scattered Sites</b>	<b>1465 Dwelling Equipment</b> Replace Ranges & Refrigerators	1465	<u>\$1,250.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1465</b>		<b>\$1,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Total Cost for Scattered Sites</b>		<b>\$83,750.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>FL29P073-017 Hidden Pines</b>	<b>1460 Dwelling Structures</b> Replace exterior doors	1450	<u>\$10,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal 1460</b>		<b>\$10,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1465 Dwelling Equipment</b> Replace Ranges & Refrigerators	1465	<u>\$1,250.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1465</b>		<b>\$1,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>Total Cost for Hidden Pines</b>		<b>\$11,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
<b>TOTAL CFP 502</b>			<b>\$1,228,140.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.			(2) To be completed for the Performance and Evaluation Report.				
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date				

**Annual Statement/  
Performance and Evaluation Report  
Part III: Implementation Schedule  
Capital Fund Program**

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

OMB Approval No. 2577-015

Development Number/Name	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1408	12/31/2002			6/30/2004			
1410	12/31/2002			6/30/2004			
1430	12/31/2002			6/30/2004			
1450	12/31/2002			6/30/2004			
1460	12/31/2002			6/30/2004			
1465	12/31/2002			6/30/2004			
FL29-1&3	12/31/2002			6/30/2004			
FL29-2	12/31/2002			6/30/2004			
FL29-4	12/31/2002			6/30/2004			
FL29-6	12/31/2002			6/30/2004			
FL29-15	12/31/2002			6/30/2004			
FL29-16	12/31/2002			6/30/2004			
FL29-17	12/31/2002			6/30/2004			

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

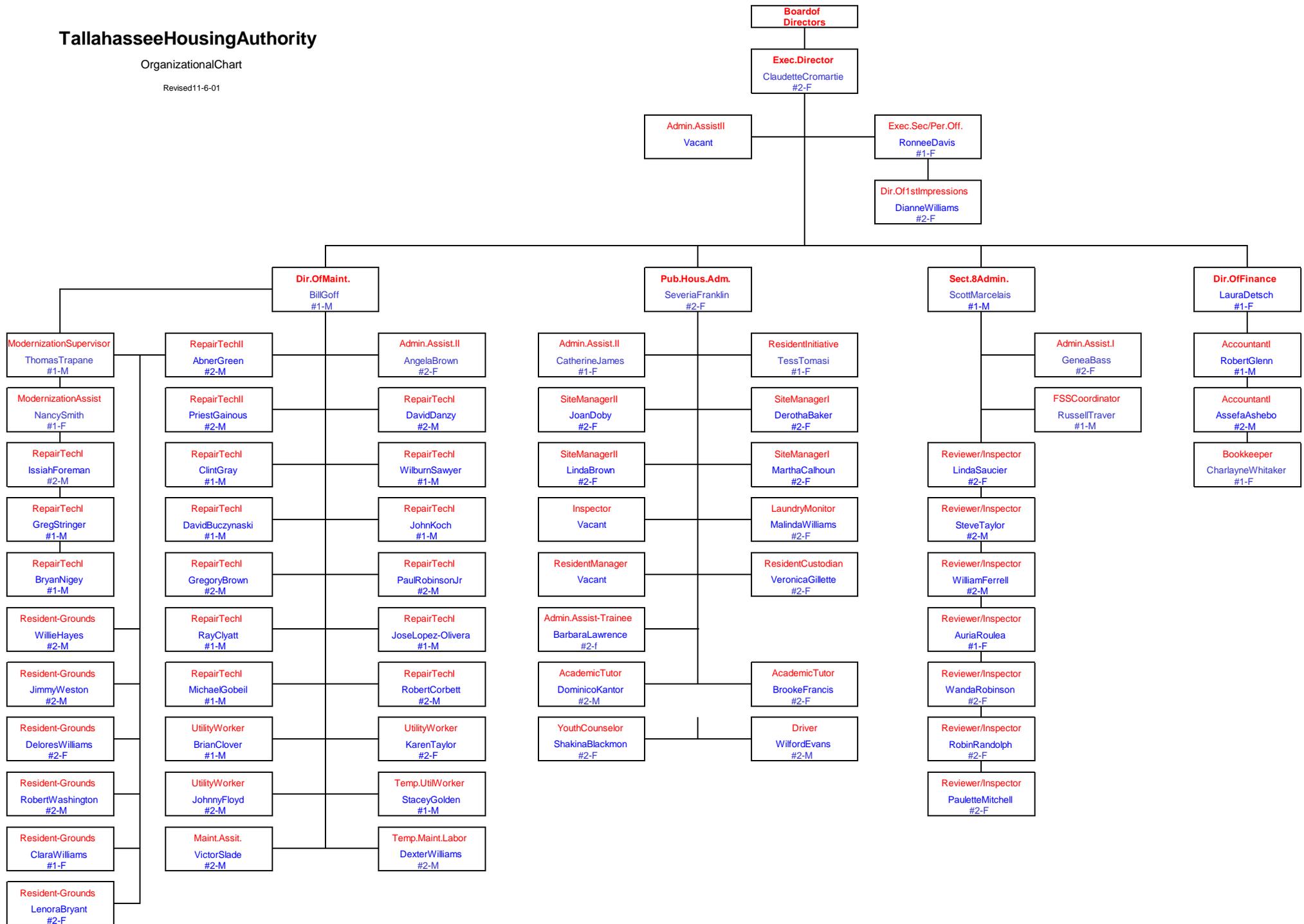
Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

# Tallahassee Housing Authority

Organizational Chart

Revised 11-6-01



**Executive Summary of Preliminary  
Estimated Costs**  
Physical and Management/  
Operations Needs  
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>The Housing Authority of the City of Tallahassee, Florida</b>				Federal Fiscal Year <b>2001</b>	
Development Number/ Name	Total Current Units	Total Preliminary Estimated Hard Cost	Per Unit Hard Cost	Long-Term Viability (Y/N)	Percentage of Vacant Units
FL29p073-001&003Springfield	195	\$1,482,542	\$7,602.78	Yes	18.84%
FL29P073-002OrangeAvenue	200	\$1,319,735	\$6,598.68	Yes	21.74%
FL29P073-004EbonyGardens	100	\$445,415	\$4,454.15	No	53.62%
FL29P073-006PinewoodPlace	96	\$317,956	\$3,312.04	Yes	4.35%
FL29P073-015ScatteredSites	18	\$259,700	\$14,427.78	Yes	1.45%
FL29P073-016ScatteredSites	18	\$259,700	\$14,427.78	Yes	0.00%
FL29P073-017HiddenPines	12	\$43,250	\$3,604.17	Yes	0.00%
Total Preliminary Estimated Hard Cost for Physical Needs			\$	\$4,128,298	
Total Preliminary Estimated Cost for HA-Wide Management/Operations Needs			\$	\$725,000	
Total Preliminary Estimated Cost for HA-Wide Nondwelling Structures and Equipment			\$	\$525,262	
Total Preliminary Estimated Cost for HA-Wide Administration			\$	\$329,580	
Total Preliminary Estimated Cost for HA-Wide Other			\$	\$320,000	
Grand Total of HA Needs			\$	\$6,028,140	
Signature of Executive Director			Date		

**Annual Statement/  
Performance and Evaluation Report**  
Part I: Summary  
Capital Fund Grant Program (CFG)

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

OMB A-

<b>HAName</b> <b>TALLAHASSEE HOUSING AUTHORITY</b>	<b>Capital Fund Project Number</b> <b>FL29P073501-01</b>	<b>FFY of Grant</b> <b>20</b>
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Original Annual Statement     Reserve for Disasters/Emergencies     Revised Annual Statement/Revision Number \_\_\_\_\_     Performance and Evaluation Report for Program Year Ending \_\_\_\_\_  
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual
		Original	Revised()	Obligated
1	Total Non-CGPF Funds			
2	1406 Operations (May not exceed 10% of line 19)	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$45,000.00	\$0.00	\$0.00
4	1410 Administration	\$56,500.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$70,000.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$125,000.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$862,890.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$48,750.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$20,000.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00
15	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00
17	1498 Development	\$0.00	\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-18)	\$1,228,140.00	\$0.00	\$0.00
20	Amount of line 16 Related to LBP Activities	\$0.00	\$0.00	\$0.00
21	Amount of line 16 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00
22	Amount of line 16 Related to Security	\$25,000.00	\$0.00	\$0.00
23	Amount of line 16 Related to Energy Conservation Measures	\$164,000.00	\$0.00	\$0.00

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**Annual Statement/  
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Part II: Supporting Pages  
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**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian Housing

OMB Approval 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>PHAWide</b>	<b>1408 Management Improvements</b>						
	Staff training in HUD regulations	1408	\$5,000.00	\$0.00	\$0.00	\$0.00	
	Maintenance Skills Training	1408	\$5,000.00	\$0.00	\$0.00	\$0.00	
	Resident job and leadership training	1408	<u>\$35,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1408</b>		<b>\$45,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>PHAWide</b>	<b>1410 Administration</b>						
	Executive Director	1410	\$5,000.00	\$0.00	\$0.00	\$0.00	
	Executive Secretary	1410	\$2,500.00	\$0.00	\$0.00	\$0.00	
	Maintenance Manager	1410	\$16,000.00	\$0.00	\$0.00	\$0.00	
	Capital Funds Coordinator	1410	\$28,000.00	\$0.00	\$0.00	\$0.00	
	Finance Director	1410	\$3,500.00	\$0.00	\$0.00	\$0.00	
	Bookkeeper	1410	<u>\$1,500.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1410</b>		<b>\$56,500.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>PHAWide</b>	<b>1430 Fees and Cost</b>						
	A&E Fees	1430	\$20,000.00	\$0.00	\$0.00	\$0.00	
	Hope VI Consultant	1430	<u>\$50,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1430</b>		<b>\$70,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>FL29P073-001 &amp; FL29P073-003 Springfield</b>	<b>1450 Site Improvements</b>						
	General Landscaping	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Installation of security systems at all sites	1450	<u>\$25,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal 1450</b>		<b>\$35,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
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Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date				

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Part II: Supporting Pages  
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**U.S. Department of Housing  
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Office of Public and Indian Housing

OMB Approval 2577-0157 (Exp. 7/31/98)

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			Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
<b>FL29P073-001&amp;</b>	<b>1460 Dwelling Structure</b>						
<b>FL29P073-003 Springfield</b>	Rewire 3, 4, and 5 BR Apartments including 100 amp service	1460	\$118,883.00	\$0.00	\$0.00	\$0.00	
	Replace front security screen doors	1460	\$25,000.00	\$0.00	\$0.00	\$0.00	
	Installation of mini-blinds for uniformity	1460	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Replace front entrance door with metal insulated	1460	\$55,000.00	\$0.00	\$0.00	\$0.00	
	Installation of carpeting and unit repair in vacant apts	1460	<u>\$55,007.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal 1460</b>		<b>\$263,890.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1465 Dwelling Equipment</b>						
	Replace Ranges & Refrigerators	1465	<u>\$20,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1465</b>		<b>\$20,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1470 Non-Dwelling Structures</b>						
	Installation of laundry facilities	1470	<u>\$20,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal 1470</b>		<b>\$20,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Total Cost for Springfield</b>		<b>\$338,890.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>FL29P073-002 Orange Avenue</b>	<b>1450 Site Improvements</b>						
	General Landscaping	1450	<u>\$10,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal 1450</b>		<b>\$10,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1460 Dwelling Structure</b>						
	-Replace existing natural gas fired forced air furnace with new unit, new closet, ductwork, A/C coils/compressor,	1460	\$100,000.00	\$0.00	\$0.00	\$0.00	
	Rewire 1, 2, 3, 4, and 5 BR Apartments including 100 amp service	1460	\$160,000.00	\$0.00	\$0.00	\$0.00	
	Installation of mini-blinds for uniformity	1460	\$5,000.00	\$0.00	\$0.00	\$0.00	
	Replace front security screen doors	1460	\$25,000.00	\$0.00	\$0.00	\$0.00	
	Replace front entrance door with metal insulated	1460	\$55,000.00	\$0.00	\$0.00	\$0.00	
	Installation of carpeting and unit repair in vacant apts	1460	<u>\$64,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal 1460</b>		<b>\$409,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	

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(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Capital Fund Program

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

OMB Approval 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost		Total Actual Cost		Status of Proposed Work(2)
			Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
FL29P073-002 Orange Avenue	1465 Dwelling Equipment Replace Ranges & Refrigerators	1465	\$20,000.00	\$0.00	\$0.00	\$0.00	
	<b>Total 1465</b>		<b>\$20,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Total Cost for Orange Avenue</b>		<b>\$439,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
FL29P073-004 Ebony Gardens	1450 Site Improvements General Landscaping	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	<b>Subtotal 1450</b>		<b>\$10,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	1465 Dwelling Equipment Replace Ranges & Refrigerators	1465	\$2,000.00	\$0.00	\$0.00	\$0.00	
	<b>Total 1465</b>		<b>\$2,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Total Cost for Ebony Gardens</b>		<b>\$12,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
FL29P073-006 Pinewood Place Place	1450 Site Improvement General Landscaping	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	<b>Subtotal 1450</b>		<b>\$10,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	1460 Dwelling Structure Roofing replacement/repair	1460	\$75,000.00	\$0.00	\$0.00	\$0.00	
	<b>Subtotal 1460</b>		<b>\$75,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	1465 Dwelling Equipment Replace Ranges & Refrigerators	1465	\$3,000.00	\$0.00	\$0.00	\$0.00	
	<b>Total 1465</b>		<b>\$3,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Total Cost for Pinewood Place</b>		<b>\$88,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	

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Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Capital Fund Program

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

OMBA Approval 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>FL29P073-015 Scattered Sites</b>	<b>1450 Site Improvement</b>						
	Resurface Drives	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Repair Septic Tank Drain Fields	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Landscaping	1450	<u>\$10,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
		<b>Subtotal 1450</b>	<b>\$30,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1460 Dwelling Structure</b>						
	Repairsiding,repaintexteriors	1460	\$15,000.00	\$0.00	\$0.00	\$0.00	
	InstallVinylsidingoverT-111	1460	\$20,000.00	\$0.00	\$0.00	\$0.00	
	ReplaceRoofing	1460	\$4,500.00	\$0.00	\$0.00	\$0.00	
	EnergyEfficiencyMeasures	1460	\$2,000.00	\$0.00	\$0.00	\$0.00	
	ReplaceHVACsystems	1460	<u>\$11,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
		<b>Subtotal 1460</b>	<b>\$52,500.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1465 Dwelling Equipment</b>						
	Replace Ranges & Refrigerators	1465	<u>\$1,250.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1465</b>	<b>\$1,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
	<b>Total Cost for Scattered Sites</b>	<b>\$83,750.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
<b>FL29P073-016 Scattered Sites</b>	<b>1450 Site Improvement</b>						
	Resurface Drives	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Repair Septic Tank Drain Fields	1450	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Landscaping	1450	<u>\$10,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
		<b>Subtotal 1450</b>	<b>\$30,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.			(2) To be completed for the Performance and Evaluation Report.				
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date				

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Capital Fund Program

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

OMB Approval 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>FL29P073-016 Scattered Sites</b>	<b>1460 Dwelling Structure</b>						
	Repairsiding,repaintexteriors	1460	\$15,000.00	\$0.00	\$0.00	\$0.00	
	InstallVinylsidingoverT-111	1460	\$20,000.00	\$0.00	\$0.00	\$0.00	
	ReplaceRoofing	1460	\$4,500.00	\$0.00	\$0.00	\$0.00	
	EnergyEfficiencyMeasures	1460	\$2,000.00	\$0.00	\$0.00	\$0.00	
	ReplaceHVACsystems	1460	<u>\$11,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal1460</b>		<b>\$52,500.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1465 Dwelling Equipment</b>						
	ReplaceRanges&Refrigerators	1465	<u>\$1,250.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total1465</b>		<b>\$1,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>Total Cost for Scattered Sites</b>			<b>\$83,750.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>FL29P073-017 Hidden Pines</b>	<b>1460 Dwelling Structures</b>						
	Replaceexteriordoors	1450	<u>\$10,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal1460</b>		<b>\$10,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>1465 Dwelling Equipment</b>						
	ReplaceRanges&Refrigerators	1465	<u>\$1,250.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total1465</b>		<b>\$1,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>Total Cost for Hidden Pines</b>			<b>\$11,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>TOTAL CFP502</b>			<b>\$1,228,140.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.			(2) To be completed for the Performance and Evaluation Report.				
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date				

**Annual Statement/  
Performance and Evaluation Report  
Part III: Implementation Schedule  
Capital Fund Program**

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

OMB Approval No. 2577-015

Development Number/Name	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1408	12/31/2002			6/30/2004			
1410	12/31/2002			6/30/2004			
1430	12/31/2002			6/30/2004			
1450	12/31/2002			6/30/2004			
1460	12/31/2002			6/30/2004			
1465	12/31/2002			6/30/2004			
FL29-1&3	12/31/2002			6/30/2004			
FL29-2	12/31/2002			6/30/2004			
FL29-4	12/31/2002			6/30/2004			
FL29-6	12/31/2002			6/30/2004			
FL29-15	12/31/2002			6/30/2004			
FL29-16	12/31/2002			6/30/2004			
FL29-17	12/31/2002			6/30/2004			

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Five-Year Action Plan**  
**Part I: Summary**  
**Comprehensive Grant Program (CGP)**

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name:		Locality: (City/County & State)				[X] Original [ ] Revision No.: _____	
The Housing Authority of Tallahassee, FL		Tallahassee, Florida					
A.	Work Statement for Year 1 FFY: <u>2001</u>	Work Statement for Year 2 FFY: <u>2002</u>	Work Statement for Year 3 FFY: <u>2003</u>	Work Statement for Year 4 FFY: <u>2004</u>	Work Statement for Year 5 FFY: <u>2005</u>		
Development Number/Name							
FL29-073-1&3 Springfield	See Annual Statement	\$315,328	\$247,500	\$297,500	\$283,324		
FL29-073-2 Orange Avenue		\$76,000	\$451,000	\$265,235	\$88,500		
FL29-073-4 Macomb Street		\$10,000	\$10,000	\$140,000	\$273,415		
FL29-073-6 Pinewood Place		\$101,526	\$25,000	\$20,544	\$82,886		
FL29-073-15 Scattered Sites		\$82,500	\$31,150	\$31,150	\$31,150		
FL29-073-16 Scattered Sites		\$82,500	\$31,150	\$31,150	\$31,150		
FL29-073-17 Trimble Road Apartments		\$17,000	\$5,000	\$5,000	\$5,000		
B. Physical Improvements Subtotal		\$684,854	\$800,800	\$790,579	\$795,425		
C. Management Improvements		\$50,000	\$50,000	\$50,000	\$50,000		
D. HA-Wide Nondwelling Structures and Equipment		\$185,821	\$116,810	\$123,881	\$98,750		
E. Administration		\$59,325	\$62,390	\$65,540	\$85,825		
F. Other		\$85,000	\$35,000	\$35,000	\$35,000		
G. Operations		\$120,000	\$120,000	\$120,000	\$120,000		
H. Demolition		\$0	\$0	\$0	\$0		
I. Replacement Reserve		\$0	\$0	\$0	\$0		
J. Mod used for development/Contingency		\$15,000	\$15,000	\$15,000	\$15,000		
K. Total CGP Funds		<b>\$1,200,000</b>	<b>\$1,200,000</b>	<b>\$1,200,000</b>	<b>\$1,200,000</b>		
L. Total Non-CGP Funds		\$0	\$0	\$0	\$0		
M. Grand Total		<b>\$1,200,000</b>	<b>\$1,200,000</b>	<b>\$1,200,000</b>	<b>\$1,200,000</b>		
Signature of Executive Director		Date:		Signature of Public Housing Director/Office of Native American Programs Administrator Date:			

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
 Physical Needs Work Statement(s)  
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY: <u>2001</u>	Work Statement for Year <u>2</u> FFY: <u>2002</u>			Work Statement for Year <u>3</u> FFY: <u>2003</u>		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
	See Annual Statement					
	<b><u>FL29P073-001&amp;003, Springfield</u></b>			<b><u>FL29P073-001&amp;003, Springfield</u></b>		
	<u>Site Improvements</u>			<u>Site Improvements</u>		
	-General landscaping (phase 3)	10%	\$10,000	-General landscaping (phase 4)	10%	\$10,000
	-Upgrade streets and parking areas	1.00	\$175,000			\$10,000
	<b>Subtotal</b>		<b>\$185,000</b>	<b>Subtotal</b>		<b>\$10,000</b>
	<u>Dwelling Structure</u>			<u>Dwelling Structure</u>		
	-Replace roofs (phase 1)	24 units	\$22,978	-Replace roofs (phase 2)	171 units	\$175,000
	-Install front security screens doors	195 units	\$44,850	Upgrade unit to building code and install carpeting	LS	\$62,500
	Upgrade unit to building code and install carpeting	LS	\$62,500	<b>Subtotal</b>		<b>\$237,500</b>
	<b>Subtotal</b>		<b>\$130,328</b>	<b>Total Springfield</b>		<b>\$247,500</b>
	<b>Total Springfield</b>		<b>\$315,328</b>			
	<b><u>FL29P073-002, Orange Avenue</u></b>			<b><u>FL29P073-002, Orange Avenue</u></b>		
	<u>Site Improvements</u>			<u>Site Improvements</u>		
	-General landscaping (phase 3)	10%	\$10,000	-General landscaping (phase 4)	10%	\$10,000
	-Install pole mounted site lighting (phase 3)	17%	\$3,500	-Install pole mounted site lighting (phase 4)	17%	\$3,500
	Upgrade unit to building code and install carpeting	LS	\$62,500	<b>Subtotal</b>		<b>\$13,500</b>
	<b>Subtotal</b>		<b>\$76,000</b>	<u>Dwelling Structure</u>		
	<b>Total Orange Avenue</b>		<b>\$76,000</b>	-Replace roofs	200 units	\$175,000
				Upgrade unit to building code and install carpeting	LS	\$62,500
				<b>Subtotal</b>		<b>\$237,500</b>
	<b><u>FL29P073-004, Ebony Gardens</u></b>			<u>Non-Dwelling Structure</u>		
	<u>Site Improvements</u>			-Upgrade community center and install laundry facility	200 units	\$200,000
	-General landscaping (phase 3)	6%	\$10,000	<b>Subtotal</b>		<b>\$200,000</b>
	<b>Subtotal</b>		<b>\$10,000</b>	<b>Total Orange Avenue</b>		<b>\$451,000</b>
	<b>Total Ebony Gardens</b>		<b>\$10,000</b>			
	<b><u>FL29P073-006, Pinewood Place</u></b>			<b><u>FL29P073-004, Ebony Gardens</u></b>		
	<u>Site Improvements</u>			<u>Site Improvements</u>		
	-General landscaping (phase 3)	16%	\$10,000	-General landscaping (phase 4)	6%	\$10,000
	<b>Subtotal</b>		<b>\$10,000</b>	<b>Subtotal</b>		<b>\$10,000</b>
	<u>Dwelling Structure</u>			<b>Total Ebony Gardens</b>		<b>\$10,000</b>
	-Replace front entrance door with metal insulated	96 units	\$38,102			
	-Replace door hardware	96 units	\$16,800	<b><u>FL29P073-006, Pinewood Place</u></b>		
	-Replace rear entrance door with metal insulated	96 units	\$36,624	<u>Site Improvements</u>		
	<b>Subtotal</b>		<b>\$91,526</b>	-General landscaping (phase 4)	16%	\$10,000
	<b>Total Pinewood Place</b>		<b>\$101,526</b>	<b>Subtotal</b>		<b>\$10,000</b>
				<u>Dwelling Structure</u>		
				-Replace roofs (phase 1)	12 units	\$15,000
				<b>Subtotal</b>		<b>\$15,000</b>
				<b>Total Pinewood Place</b>		<b>\$25,000</b>

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
 Physical Needs Work Statement(s)  
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY: 2001	Subtotal of Estimated Cost			Subtotal of Estimated Cost		
	\$502,854			\$733,500		
	Work Statement for Year 2 FFY: 2002			Work Statement for Year 3 FFY: 2003		
Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	
<b><u>FL29P073-015, Scattered Sites</u></b>			<b><u>FL29P073-015, Scattered Sites</u></b>			
<u>1450 Site Improvements</u>			<u>1450 Site Improvements</u>			
Resurfaced drives	2DU	\$10,000	Resurfaced drives	2DU	\$1,500	
Repair septic tank drain fields	4DU	\$10,000	Repair septic tank drain fields	4DU	\$2,000	
Landscaping	4DU	\$10,000	Landscaping	4DU	\$2,200	
<b>Subtotal</b>		<b>\$30,000</b>	<b>Subtotal</b>		<b>\$5,700</b>	
<u>1460 Dwelling Structure</u>			<u>1460 Dwelling Structure</u>			
Repairs siding, repaint exteriors	2DU	\$15,000	Repairs siding, repaint exteriors	2DU	\$1,950	
Install vinyl siding over T-111	2DU	\$20,000	Install vinyl siding over T-111	2DU	\$6,300	
Replace roofing	4DU	\$4,500	Replace roofing	4DU	\$4,200	
Energy efficiency measures	4DU	\$2,000	Energy efficiency measures	4DU	\$2,000	
Replace HVAC systems	2DU	\$11,000	Replace HVAC systems	2DU	\$11,000	
<b>Subtotal</b>		<b>\$52,500</b>	<b>Subtotal</b>		<b>\$25,450</b>	
<b>Total Scattered Sites</b>		<b>\$82,500</b>	<b>Total Scattered Sites</b>		<b>\$31,150</b>	
<b><u>FL29P073-016, Scattered Sites</u></b>			<b><u>FL29P073-016, Scattered Sites</u></b>			
<u>1450 Site Improvements</u>			<u>1450 Site Improvements</u>			
Resurfaced drives	2DU	\$10,000	Resurfaced drives	2DU	\$1,500	
Repair septic tank drain fields	4DU	\$10,000	Repair septic tank drain fields	4DU	\$2,000	
Landscaping	4DU	\$10,000	Landscaping	4DU	\$2,200	
<b>Subtotal</b>		<b>\$30,000</b>	<b>Subtotal</b>		<b>\$5,700</b>	
<u>1460 Dwelling Structure</u>			<u>1460 Dwelling Structure</u>			
Repairs siding, repaint exteriors	2DU	\$15,000	Repairs siding, repaint exteriors	2DU	\$1,950	
Install vinyl siding over T-111	2DU	\$20,000	Install vinyl siding over T-111	2DU	\$6,300	
Replace roofing	4DU	\$4,500	Replace roofing	4DU	\$4,200	
Energy efficiency measures	4DU	\$2,000	Energy efficiency measures	4DU	\$2,000	
Replace HVAC systems	2DU	\$11,000	Replace HVAC systems	2DU	\$11,000	
<b>Subtotal</b>		<b>\$52,500</b>	<b>Subtotal</b>		<b>\$25,450</b>	
<b>Total Scattered Sites</b>		<b>\$82,500</b>	<b>Total Scattered Sites</b>		<b>\$31,150</b>	
<b><u>FL29P073-017, Hidden Pines</u></b>			<b><u>FL29P073-017, Hidden Pines</u></b>			
<u>1450 Site Improvements</u>			<u>1450 Site Improvements</u>			
-General landscaping	10%	\$5,000	-General landscaping	10%	\$5,000	
<b>Subtotal</b>		<b>\$5,000</b>	<b>Subtotal</b>		<b>\$5,000</b>	
<u>Dwelling Structure</u>						
-Replace front/rear entrance door with metal insulated and replaced door hardware	12 units	\$12,000				
<b>Subtotal</b>		<b>\$12,000</b>	<b>Total Hidden Pines</b>		<b>\$5,000</b>	
<b>Total Hidden Pines</b>		<b>\$17,000</b>				

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
**Physical Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

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

Work Statement for Year 1 FFY: <u>2001</u>	Subtotal of Estimated Cost			Subtotal of Estimated Cost		
	Work Statement for Year <u>2</u> FFY: <u>2002</u>			Work Statement for Year <u>3</u> FFY: <u>2003</u>		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
<b>1406 Operations</b>				<b>1406 Operations</b>		
Operating Subsidy	10%	\$120,000		Operating Subsidy	10%	\$120,000
<b>Subtotal</b>		<b>\$120,000</b>		<b>Subtotal</b>		<b>\$120,000</b>
<b>1408 Management Improvements</b>				<b>1408 Management Improvements</b>		
Staff training in HUD regulations	LS	\$10,000		Staff training in HUD regulations	LS	\$10,000
Maintenance Skills Training	LS	\$5,000		Maintenance Skills Training	LS	\$5,000
Resident job and leadership training	LS	\$35,000		Resident job and leadership training	LS	\$35,000
<b>Subtotal</b>		<b>\$50,000</b>		<b>Subtotal</b>		<b>\$50,000</b>
<b>1410 Administration</b>				<b>1410 Administration</b>		
Executive Director	5%	\$5,250		Executive Director	5%	\$5,520
Executive Secretary	5%	\$2,625		Executive Secretary	5%	\$2,760
Maintenance Manager	45%	\$16,800		Maintenance Manager	50%	\$17,640
Capital Funds Coordinator	100%	\$29,400		Capital Funds Coordinator	100%	\$30,870
Finance Director	5%	\$3,675		Finance Director	5%	\$3,900
Bookkeeper	5%	\$1,575		Bookkeeper	5%	\$1,700
<b>Subtotal</b>		<b>\$59,325</b>		<b>Subtotal</b>		<b>\$62,390</b>
<b>1430 Fees and Costs</b>				<b>1430 Fees and Costs</b>		
A&E Fees	LS	\$35,000		A&E Fees	LS	\$35,000
Hope VI Consultant	LS	\$50,000				
<b>Subtotal</b>		<b>\$85,000</b>		<b>Subtotal</b>		<b>\$35,000</b>
<b>1465 Dwelling Equipment (Authority Wide)</b>				<b>1465 Dwelling Equipment (Authority Wide)</b>		
Ranges	100EA	\$37,500		Ranges	100EA	\$37,500
Refrigerators	25EA	\$11,250		Refrigerators	25EA	\$11,250
<b>Subtotal</b>		<b>\$48,750</b>		<b>Subtotal</b>		<b>\$48,750</b>
<b>1470 Non-Dwelling Structures</b>				<b>1470 Non-Dwelling Structures</b>		
Upgrade and enlarge HA Office Building (phase 1)	LS	\$137,071		Upgrade and enlarge HA Office Building (phase 2)	LS	\$68,060
<b>Subtotal</b>		<b>\$137,071</b>		<b>Subtotal</b>		<b>\$68,060</b>
<b>1502 Contingency</b>				<b>1502 Contingency</b>		
-Construction Contingency	LS	\$15,000		-Construction Contingency	LS	\$15,000
<b>Subtotal</b>		<b>\$15,000</b>		<b>Subtotal</b>		<b>\$15,000</b>



**Five-Year Action Plan**  
**Part II: Supporting Pages**  
**Physical Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

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

Work Statement for Year 1 FFY: 2001	Work Statement for Year <u>4</u> FFY: <u>2004</u>			Work Statement for Year <u>5</u> FFY: <u>2005</u>		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
	See Annual Statement					
	<b><u>FL29P073-015, Scattered Sites</u></b>			<b><u>FL29P073-015, Scattered Sites</u></b>		
	<u>1450 Site Improvements</u>			<u>1450 Site Improvements</u>		
	Resurfaced drives	2DU	\$1,500	Resurfaced drives	2DU	\$1,500
	Repair septic tank drain fields	4DU	\$2,000	Repair septic tank drain fields	4DU	\$2,000
	Landscaping	4DU	<u>\$2,200</u>	Landscaping	4DU	<u>\$2,200</u>
	<b>Subtotal</b>		<b>\$5,700</b>	<b>Subtotal</b>		<b>\$5,700</b>
	<u>1460 Dwelling Structure</u>			<u>1460 Dwelling Structure</u>		
	Repairs siding, repaint exteriors	2DU	\$1,950	Repairs siding, repaint exteriors	2DU	\$1,950
	Install vinyl siding over T-111	2DU	\$6,300	Install vinyl siding over T-111	2DU	\$6,300
	Replace roofing	4DU	\$4,200	Replace roofing	4DU	\$4,200
	Energy efficiency measures	4DU	\$2,000	Energy efficiency measures	4DU	\$2,000
	Replace HVAC systems	2DU	<u>\$11,000</u>	Replace HVAC systems	2DU	<u>\$11,000</u>
	<b>Subtotal</b>		<b>\$25,450</b>	<b>Subtotal</b>		<b>\$25,450</b>
	<b>Total Scattered Sites</b>		<b>\$31,150</b>	<b>Total Scattered Sites</b>		<b>\$31,150</b>
	<b><u>FL29P073-016, Scattered Sites</u></b>			<b><u>FL29P073-016, Scattered Sites</u></b>		
	<u>1450 Site Improvements</u>			<u>1450 Site Improvements</u>		
	Resurfaced drives	2DU	\$1,500	Resurfaced drives	2DU	\$1,500
	Repair septic tank drain fields	4DU	\$2,000	Repair septic tank drain fields	4DU	\$2,000
	Landscaping	4DU	<u>\$2,200</u>	Landscaping	4DU	<u>\$2,200</u>
	<b>Subtotal</b>		<b>\$5,700</b>	<b>Subtotal</b>		<b>\$5,700</b>
	<u>1460 Dwelling Structure</u>			<u>1460 Dwelling Structure</u>		
	Repairs siding, repaint exteriors	2DU	\$1,950	Repairs siding, repaint exteriors	2DU	\$1,950
	Install vinyl siding over T-111	2DU	\$6,300	Install vinyl siding over T-111	2DU	\$6,300
	Replace roofing	4DU	\$4,200	Replace roofing	4DU	\$4,200
	Energy efficiency measures	4DU	\$2,000	Energy efficiency measures	4DU	\$2,000
	Replace HVAC systems	2DU	<u>\$11,000</u>	Replace HVAC systems	2DU	<u>\$11,000</u>
	<b>Subtotal</b>		<b>\$25,450</b>	<b>Subtotal</b>		<b>\$25,450</b>
	<b>Total Scattered Sites</b>		<b>\$31,150</b>	<b>Total Scattered Sites</b>		<b>\$31,150</b>
	<b><u>FL29P073-017, Hidden Pines</u></b>			<b><u>FL29P073-017, Hidden Pines</u></b>		
	<u>1450 Site Improvements</u>			<u>1450 Site Improvements</u>		
	-General landscaping	10%	<u>\$5,000</u>	-General landscaping	10%	<u>\$5,000</u>
	<b>Subtotal</b>		<b>\$5,000</b>	<b>Subtotal</b>		<b>\$5,000</b>
	<b>Total Hidden Pines</b>		<b>\$5,000</b>	<b>Total Hidden Pines</b>		<b>\$5,000</b>
	Subtotal of Estimated Cost		<b>\$67,300</b>	Subtotal of Estimated Cost		<b>\$67,300</b>

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
**Physical Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

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

Work Statement for Year 1 FFY: 2001	Work Statement for Year <u>4</u> FFY: <u>2004</u>			Work Statement for Year <u>5</u> FFY: <u>2005</u>			
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual Statement	<b><u>1406 Operations</u></b>			<b><u>1406 Operations</u></b>			
	Operating Subsidy	10%	\$120,000	Operating Subsidy	10%	\$120,000	
	<b>Subtotal</b>		<b>\$120,000</b>	<b>Subtotal</b>		<b>\$120,000</b>	
	<b><u>1408 Management Improvements</u></b>			<b><u>1408 Management Improvements</u></b>			
	Staff training in HUD regulations	LS	\$10,000	Staff training in HUD regulations	LS	\$10,000	
	Maintenance Skills Training	LS	\$5,000	Maintenance Skills Training	LS	\$5,000	
	Resident job and leadership training	LS	\$35,000	Resident job and leadership training	LS	\$35,000	
	<b>Subtotal</b>		<b>\$50,000</b>	<b>Subtotal</b>		<b>\$50,000</b>	
	<b><u>1410 Administration</u></b>			<b><u>1410 Administration</u></b>			
	Executive Director	5%	\$5,800	Executive Director	5%	\$6,090	
	Executive Secretary	5%	\$2,900	Executive Secretary	5%	\$3,045	
	Maintenance Manager	45%	\$18,520	Maintenance Manager	50%	\$19,450	
	Capital Funds Coordinator	100%	\$32,420	Finance Director	5%	\$34,050	
	Finance Director	5%	\$4,100	Accountant I	25%	\$4,300	
	Bookkeeper	5%	\$1,800	Modernization Coordinator	100%	\$18,890	
<b>Subtotal</b>		<b>\$65,540</b>	<b>Subtotal</b>		<b>\$85,825</b>		
<b><u>1430 Fees and Costs</u></b>			<b><u>1430 Fees and Costs</u></b>				
A&E Fees	LS	\$35,000	A&E Fees	LS	\$35,000		
<b>Subtotal</b>		<b>\$35,000</b>	<b>Subtotal</b>		<b>\$35,000</b>		
<b><u>1465 Dwelling Equipment (Authority Wide)</u></b>			<b><u>1465 Dwelling Equipment (Authority Wide)</u></b>				
Ranges	100EA	\$37,500	Ranges	100EA	\$37,500		
Refrigerators	25EA	\$11,250	Refrigerators	25EA	\$11,250		
<b>Subtotal</b>		<b>\$48,750</b>	<b>Subtotal</b>		<b>\$48,750</b>		
<b><u>1470 Non-Dwelling Structures</u></b>			<b><u>1475 Non-Dwelling Equipment</u></b>				
Upgrade and enlarge HAO Office Building (phase 3)	LS	\$75,131	Upgrade of Computer System	LS	\$50,000		
<b>Subtotal</b>		<b>\$75,131</b>	<b>Subtotal</b>		<b>\$50,000</b>		
<b><u>1502 Contingency</u></b>			<b><u>1502 Contingency</u></b>				
-Construction Contingency	LS	\$15,000	-Construction Contingency	LS	\$15,000		
<b>Subtotal</b>		<b>\$15,000</b>	<b>Subtotal</b>		<b>\$15,000</b>		
Subtotal of Estimated Cost			\$409,421	Subtotal of Estimated Cost			\$404,575

**TALLAHASSEE HOUSING AUTHORITY**  
**Public Housing/Section 8 Policy**

**Deconcentration and Income Targeting**

The Tallahassee Housing Authority owns and operates 641 public housing units. At least forty percent (40%) (with incomes below 30 percent of median) in a fiscal year, of any new or available public housing apartments must be designated to extremely low-income people. The Authority shall provide more than seventy-five percent (75%) of newly available vouchers and certificates to very poor families.

The Tallahassee Housing Authority has a total of 1,181 Section 8 units. Seventy-five percent (75%) of the new or turned over Section 8 vouchers must be directed toward extremely low-income people. After the housing authority has met the income targeting requirements, it will select new admissions under its Local Preference Policy. On October 1, 1996, the Tallahassee Housing Authority, Board of Commissioners suspended the Federal Preferences and adopted Local Preferences for public housing and Section 8 programs. The new preferences were not ranked and are as shown below:

- Working families
- Families registered/enrolled in a recognized job training program
- Families of domestic violence
- Families involuntarily displaced

1. Working Families

- Working Families whose head of household or spouse works or families whose head of household or spouse have been given a bona fide offer of employment. Those who are in or have completed educational or training programs designed to prepare persons for the job market.
- Applicants whose head, spouse, or sole member is age 62 or older or is receiving social security disability, supplemental security income disability benefits, or any other payments based on the individual's inability to work will be given the benefit of the working family preference.

2. Families Registered or Enrolled in Job Training Programs

- Families where the head of household or spouse is currently enrolled and participating in a job training program (this will also include WAGES participants) that prepares them for entering or re-entering the job market to include welfare to work certified programs and/or, those performing eight or more hours of community service work as included in Section 512©(g) of the U.S. Housing Act of 1937. Documentation will be required from the institution where the head of the household or spouse is attending.

3. Domestic Violence

- “Domestic Violence” means actual or threatened physical violence directed against one or more members of the applicant family by a spouse or other member of the applicant’s household.
  - a. An applicant is considered a victim if:
    - they have vacated a housing unit because of domestic violence
    - they live in a housing unit with a person who engages in domestic violence
    - it must be determined that the domestic violence occurred recently or is of a continuing nature
    - the family must certify that the person who engaged in such violence will not reside with the applicant family unless the housing authority has given written approval based on certified counseling support documents.

4. Involuntary Displacement

- a. An applicant is involuntarily displaced if:
  - the applicant is a victim of fire
  - the applicant is displaced due to a natural disaster (fire, flood, or any other uncontrollable act)
  - the natural disaster must have extensively damaged or destroyed the dwelling the family had been living in and made it uninhabitable

All applicants must meet all other preference -background screening as other non -preference applicants do.

**Notice of Preference Denial**

When the housing authority determines an applicant does not qualify for a local preference, the housing authority will provide prompt, written notice of the determination. The notice will contain a brief statement of reasons for the determination and notice of the applicant’s right to an appeal. The applicant can appeal to the specified appeal officer as indicated in correspondence.

**Skipping Policy**

Families on the waiting list for public housing will be under a Skipping Admissions Policy. This would mean the housing authority could uniformly skip a family on the waiting list, specifically to reach another family with a lower or higher income in order to help accomplish the deconcentration and income -mixing objectives as specified by HUD

The current waiting list for public housing is 473. Below is the breakdown as it relates to race and income:

<u>Race</u>	<u>Very Low Income</u>	<u>Low Income</u>
1(Caucasian)18	18	N/A
2(Black)11	444	11

The current waiting list for Section 8 is 776. Below is the breakdown as it relates to race and income:

<u>Race</u>	<u>Very Low Income</u>	<u>Low Income</u>
1(Caucasian)54	492	284
1(Black)720		
3(Other)		

The housing authority's targeting plan will conform with civil rights, fair housing and other federal laws that forbid discrimination on the basis of race, color, religion, sex, national origin, familial status or disability.

Both program waiting lists will be managed separately. Public Housing will not include site based waiting lists, but rather one centralized list.

The remaining sixty -percent (60%) of waiting list applicants for public housing will be selected according to the income needs of the development. This is based on the deconcentration plan required by the U.S. Department of Housing and Urban development (HUD) in order to achieve income -mixing, by bringing higher income residents into lower income public housing communities and bring lower income residents into higher income public housing communities.

**Authority Incentives**

The Authority's four public housing communities, Springfield Apartments (1700 Joe Louis Street), Orange Avenue Apartments (2710 Country Club Drive), Ebony Gardens (1010 N. Macomb Street) and Pinewood Place Apartments (2940 Grady Rd.) are all geographically located in low -income (poverty) areas of the city. Under our Comprehensive Modernization Grant, in October 1999, we will begin to replace furnaces

at all the sites and install new gas energy efficient HVAC with air conditioning features. Resealing of parking spaces has begun and will include re-striping. In the near future, installation of new energy efficient windows and higher R-Value attic insulation will begin.

We have started an agency resident training program where we have contracted with the Area Big Bend Wages Coalition to screen and verify eligibility of four residents. Eight residents have also been employed by the Authority under the Section 3 Program, along with contractor awareness of preference given to residents on all work performed for the housing authority.

The resident council has a successful training program in which the local community college and vocational school develop goal-oriented training classes for public housing participants. Therefore, internally we will be able to increase the skills of four residents so they may be more qualified to apply for jobs or higher positions and leave the Temporary Assistance to Needy Families (TANF) subsidy rolls.

At the Ebony Garden Apartments, we have installed a laundromat for the residents. Two residents will be hired to monitor the facility during the hours of operation. We suspect this will be an added attraction of curb appeal in soliciting for higher income-mixing at this development. Also, surrounding property is being purchased and sold in an effort to create more affordable homeowner units in this census tract.

Public housing residents will be able to choose whether they would like to pay a flat rent or an income-based rent.

- An income-based rent will be based on 30% of adjusted income.
- Flat rents will benefit higher income families and residents whose incomes are going up.

Residents will have the choice of income-based or flat rent yearly at their re-examination time. However, if they experience financial hardship (loss of employment, death of income contributing family member or loss of governmental assistance) the THA may authorize a switch from flat rent to income-based.

Residents of the Authority's developments and participants of Section 8, who are WAGES enrolled, whose welfare assistance is reduced because of fraud or failure to participate in an economic self-sufficiency program or comply with a work activity requirement will not be eligible for a rent reduction. Only if the welfare reduction is neither a result of the expiration of a lifetime on receiving benefits, or a situation where the family has complied with welfare program requirements, but cannot obtain employment with the authority, make the necessary rent subsidy increase. All others with a non-compliance verified document can request a variance to the above and community services actions with their respective department hearing officer (public housing and Section 8).

Permitted deductions and incentives will be given to residents that are working a minimum of 25 hours per month. Incentives include deductions for federal tax, state income tax, social security taxes, and health insurance.

### **Self-Sufficiency Incentives**

The Authority will not increase a family's rent as a result of increased income due to employment during the 12-month period beginning on the date on which the employment is commenced:

1. Family income increases as a result of employment of a family member who was previously unemployed for one or more years. "Previously employed" includes a person who has earned, in the previous 12 months, no more than what would be received for ten hours of work per week for 50 weeks at the established minimum wage.
2. Whose employment income increases during the participation of a family member in any family self-sufficiency or other job training; or
3. Who is or was, when six months assisted under any state program for temporary assistance for needy families funded under Part A of Title IV of the Social Security Act, as determined by the authority in consultation with the local TANF agency and whose income increases.

### **Phase-in of Rent Increases**

Upon expiration of the 12-month period, the rent payable by a family may be increased due to the continued employment of a family member except that for the 12-month period following expiration of the 12-month disallowance, the increase may not be greater than 50 percent of the amount of the total rent increase.

### **Individual Savings Accounts**

The Authority may provide for individual savings accounts for public housing residents who pay an income-based rent. The family will have the option of having an amount that otherwise would have been applied to the family's rent payment as a result of employment. Amounts deposited in a savings account may be withdrawn only for the purpose of:

- Purchasing a home
- Paying education costs for family members
- Moving out of public or assisted housing
- Paying any other expense authorized by the authority for the purpose of promoting the economic self-sufficiency of residents of public housing.

The Authority will maintain the account in an interest-bearing investment and will credit the family with the interest income; at least annually the Authority will provide the family with a report on the status of the account. Any balance in such an account when the family moves out is the property of the family, unless the family is not in compliance with the lease.

Deconcentratio1

**Annual Statement/  
Performance and Evaluation Report**  
Part I: Summary  
Comprehensive Grant Program (CGP)

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

OMB Approval 2577-0157 (Exp. 7/31/98)

<b>HAName</b> TALLAHASSEE HOUSING AUTHORITY		<b>Comprehensive Grant Number</b> FL29P073708-99		<b>FFY of Grant Approval</b> 1999	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies [X] Revised Annual Statement/Revision Number <u>2</u>		<input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending 12/31/01	
<input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original Revision #1	Revised Revision #2	Obligated	Expended
1	Total Non-CGPF Funds				
2	1406 Operations (May not exceed 10% of line 19)	\$0	\$0	\$0.00	\$0.00
3	1408 Management Improvements	\$114,600	\$91,450	\$91,450.11	\$91,450.11
4	1410 Administration	\$29,155	\$27,950	\$27,950.00	\$27,950.00
5	1411 Audit	\$0	\$0	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0	\$0	\$0.00	\$0.00
7	1430 Fees and Costs	\$67,944	\$35,915	\$35,914.64	\$35,914.64
8	1440 Site Acquisition	\$0	\$0	\$0.00	\$0.00
9	1450 Site Improvement	\$73,399	\$96,012	\$96,011.83	\$96,011.83
10	1460 Dwelling Structures	\$502,901	\$476,035	\$476,035.06	\$323,406.13
11	1465.1 Dwelling Equipment-Nonexpendable	\$48,750	\$49,827	\$49,826.70	\$49,826.70
12	1470 Nondwelling Structures	\$72,200	\$131,761	\$131,760.66	\$45,051.66
13	1475 Nondwelling Equipment	\$0	\$0	\$0.00	\$0.00
14	1485 Demolition	\$0	\$0	\$0.00	\$0.00
15	1495.1 Relocation Costs	\$0	\$0	\$0.00	\$0.00
16	1490 Replacement Reserve	\$0	\$0	\$0.00	\$0.00
17	1498 Development	\$0	\$0	\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of line 19)	\$0	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-18)	\$908,949	\$908,949.00	\$908,949.00	\$669,611.07
20	Amount of line 16 Related to LBP Activities	\$0			
21	Amount of line 16 Related to Section 504 Compliance	\$0			
22	Amount of line 16 Related to Security	\$0			
23	Amount of line 16 Related to Energy Conservation Measures	\$497,688			
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.			(2) To be completed for the Performance and Evaluation Report.		
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date		

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Comprehensive Grant Program (CGP)

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)
<b>PHAWide</b>	<b>1408 Management Improvements</b>						
	Staff training in HUD regulations	1408	LS	\$6,000	\$6,495.42	\$6,495.42	\$6,495.42
	Maintenance Skills Training	1408	LS	\$5,000	\$1,768.88	\$1,768.88	\$1,768.88
	Vacancy reduction	1408	LS	\$68,600	\$57,373.00	\$57,373.00	\$57,373.00
	Resident job and leadership training	1408	LS	<u>\$35,000</u>	<u>\$25,812.81</u>	<u>\$25,812.81</u>	<u>\$25,812.81</u>
	<b>Total 1408</b>			<b>\$114,600</b>	<b>\$91,450.11</b>	<b>\$91,450.11</b>	<b>\$91,450.11</b>
<b>PHAWide</b>	<b>1410 Administration</b>						
	Executive Director	1410	5%	\$3,813	\$3,813.00	\$3,813.00	\$3,813.00
	Executive Secretary	1410	5%	\$1,674	\$1,674.00	\$1,674.00	\$1,674.00
	Maintenance Manager	1410	50%	\$19,920	\$19,920.00	\$19,920.00	\$19,920.00
	Accountant I	1410	5%	\$2,543	\$2,543.00	\$2,543.00	\$2,543.00
	Accountant II	1410	5%	<u>\$1,205</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>
	<b>Total 1410</b>			<b>\$29,155</b>	<b>\$27,950.00</b>	<b>\$27,950.00</b>	<b>\$27,950.00</b>
<b>PHAWide</b>	<b>1430 Fees and Cost</b>						
	A&E Fees	1430	LS	\$35,544	\$920.00	\$920.00	\$920.00
	Comprehensive Grant Management	1430	LS	<u>\$32,400</u>	<u>\$34,994.64</u>	<u>\$34,994.64</u>	<u>\$34,994.64</u>
	<b>Total 1430</b>			<b>\$67,944</b>	<b>\$35,914.64</b>	<b>\$35,914.64</b>	<b>\$35,914.64</b>
<b>PHAWide</b>	<b>1450 Site Improvements</b>						
	Lighted Developments Signs	1450	LS	\$9,760	\$3,203.00	\$3,203.00	\$3,203.00
	Landscaping	1450	LS	<u>\$0</u>	<u>\$11,161.26</u>	<u>\$11,161.26</u>	<u>\$11,161.26</u>
	<b>Total 1450</b>			<b>\$9,760</b>	<b>14,364.26</b>	<b>14,364.26</b>	<b>14,364.26</b>
<b>PHAWide</b>	<b>1465 Dwelling Equipment</b>		497688.00				
	Replace Ranges	1465	100	\$37,500	\$25,742.00	\$25,742.00	\$25,742.00
	Replace Refrigerators	1465	25	<u>\$11,250</u>	<u>\$24,084.70</u>	<u>\$24,084.70</u>	<u>\$24,084.70</u>
	<b>Total 1465</b>			<b>\$48,750</b>	<b>49,826.70</b>	<b>49,826.70</b>	<b>49,826.70</b>

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Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Comprehensive Grant Program (CGP)

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)
<b>FL29P073-001</b>	<b>1450 Site Improvements</b>						
<b>FL29P073-003</b>	Repair and repair trailings	1450		<u>\$2,239</u>	<u>\$5,149.00</u>	<u>\$5,149.00</u>	<u>\$5,149.00</u>
<b>Springfield</b>	<b>Subtotal 1450</b>			<b>\$2,239</b>	<b>5,149.00</b>	<b>5,149.00</b>	<b>5,149.00</b>
	<b>1460 Dwelling Structure</b>						
	Replace existing natural gas fired forced air furnace with new unit, new closet, ductwork, A/C coils/compressor, concrete pad, electric service upgrade	1460	40 DU	<u>\$68,491</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
	Replace the front and back exterior doors and front storm doors	1460		\$0	\$0.00	\$0.00	\$0.00
	<b>Subtotal 1460</b>			<b>\$68,491</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
	<b>1470 Non-Dwelling Structures</b>						
	Day Care Facility at Springfield Complex	1470		\$0	\$12,663.45	\$12,663.45	\$12,663.45
	Renovate Apt 102 as additional space for Boys & Girls Club	1470		\$0	\$12,995.00	\$12,995.00	\$12,995.00
	<b>Subtotal 1470</b>			<b>\$0</b>	<b>\$25,658.45</b>	<b>\$25,658.45</b>	<b>\$25,658.45</b>
	<b>Total Cost for Springfield</b>			<b>\$70,730</b>	<b>30,807.45</b>	<b>30,807.45</b>	<b>30,807.45</b>
<b>FL29P073-002</b>	<b>1450 Site Improvements</b>						
<b>Orange Avenue</b>	Repair of existing sidewalks	1450		<u>\$0</u>	<u>\$16,182.57</u>	<u>\$16,182.57</u>	<u>\$16,182.57</u>
	<b>Subtotal 1450</b>			<b>\$0</b>	<b>16,182.57</b>	<b>16,182.57</b>	<b>16,182.57</b>
	<b>1460 Dwelling Structure</b>						
	Replace existing natural gas fired forced air furnace with new unit, new closet, ductwork, A/C coils/compressor, concrete pad, electric service upgrade	1460	40 DU	\$252,000	\$293,207.23	\$293,207.23	\$140,578.30
	Install Mini-Blinds	1460		\$0	\$991.25	\$991.25	\$991.25
	Install new windows	1460		<u>\$0</u>	<u>\$32,250.00</u>	<u>\$32,250.00</u>	<u>\$32,250.00</u>
	<b>Subtotal 1460</b>			<b>\$252,000</b>	<b>\$326,448.48</b>	<b>\$326,448.48</b>	<b>\$173,819.55</b>
	<b>Total Cost for Orange Avenue</b>			<b>\$252,000</b>	<b>\$342,631.05</b>	<b>\$342,631.05</b>	<b>\$190,002.12</b>

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**Annual Statement/  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Comprehensive Grant Program (CGP)

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
FL29P073-006 Pinewood Place	<b>1450 Site Improvements</b>							
	Street upgrades for dedication to City	1450		\$50,000	48,000.00	48,000.00	48,000.00	
	<b>Subtotal 1450</b>			<b>\$50,000</b>	<b>48,000.00</b>	<b>48,000.00</b>	<b>48,000.00</b>	
	<b>1460 Dwelling Structure</b>							
	Replace existing natural gas fired forced air furnace with new unit, new closet, ductwork, A/C coils/compressor, concrete pad, electric service upgrade	1460	12 DU	\$61,200	\$76,077.02	\$76,077.02	\$76,077.02	
	Address O Lights	1460	LS	\$4,437	4,437.40	4,437.40	4,437.40	
	<b>Subtotal 1460</b>			<b>\$65,637</b>	<b>80,514.42</b>	<b>80,514.42</b>	<b>80,514.42</b>	
	<b>1470 Non Dwelling Structure</b>							
	Supplement for Construction of Community Building	1470		\$50,000	89,909.29	89,909.29	3,200.29	
	Maintenance Storage Shed	1470		\$22,200	16,192.92	16,192.92	16,192.92	
<b>Subtotal 1470</b>			<b>\$72,200</b>	<b>106,102.21</b>	<b>106,102.21</b>	<b>19,393.21</b>		
<b>Total Cost for Pinewood Place</b>				<b>\$187,837</b>	<b>234,616.63</b>	<b>234,616.63</b>	<b>147,907.63</b>	
FL29P073-015 Scattered Sites	<b>1450 Site Improvements</b>							
	Resurfaced drives	1450	2 DU	\$1,500	\$0.00	\$0.00	\$0.00	
	Repair septic tank drain fields	1450	4 DU	\$2,000	\$11,161.00	\$11,161.00	\$11,161.00	
	Landscaping	1450	4 DU	\$2,200	\$1,155.00	\$1,155.00	\$1,155.00	
	<b>Subtotal 1450</b>			<b>\$5,700</b>	<b>12,316.00</b>	<b>12,316.00</b>	<b>12,316.00</b>	
	<b>1460 Dwelling Structure</b>							
	Repairsiding, repaint exteriors	1460	2 DU	\$1,950	\$0.00	\$0.00	\$0.00	
	Install Vinyl siding over T-111	1460	2 DU	\$6,300	\$0.00	\$0.00	\$0.00	
	Replace Roofing	1460	4 DU	\$4,200	\$0.00	\$0.00	\$0.00	
	Energy Efficiency Measures	1460	4 DU	\$2,000	\$0.00	\$0.00	\$0.00	
	Replace HVAC systems	1460	2 DU	\$11,000	\$454.00	\$454.00	\$454.00	
	<b>Subtotal 1460</b>			<b>\$25,450</b>	<b>454.00</b>	<b>454.00</b>	<b>454.00</b>	
	<b>Total Cost for Scattered Sites 073-15)</b>				<b>\$31,150</b>	<b>12,770.00</b>	<b>12,770.00</b>	<b>12,770.00</b>
	FL29P073-016 Scattered Sites	<b>1450 Site Improvements</b>						
Resurfaced drives		1450	2 DU	\$1,500	\$0.00	\$0.00	\$0.00	
Repair septic tank drain fields		1450	4 DU	\$2,000	\$0.00	\$0.00	\$0.00	
Landscaping		1450	4 DU	\$2,200	\$0.00	\$0.00	\$0.00	
<b>Subtotal 1450</b>			<b>\$5,700</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		

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Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement/  
Performance and Evaluation Report**  
Part III: Implementation Schedule  
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-015

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1408	9/30/2001		9/30/2001	9/30/2002		12/31/2001	
1410	9/30/2001		9/30/2001	9/30/2002		12/31/2001	
1430	9/30/2001		9/30/2001	9/30/2002		12/31/2001	
1465	9/30/2001		9/30/2001	9/30/2002		12/31/2001	
FL29-1&3	9/30/2001		9/30/2001	9/30/2002		12/31/2001	
FL29-2	9/30/2001		9/30/2001	9/30/2002			
FL29-4	9/30/2001		9/30/2001	9/30/2002		12/31/2001	
FL29-6	9/30/2001		9/30/2001	9/30/2002			
FL29-15	9/30/2001		9/30/2001	9/30/2002		12/31/2001	
FL29-16	9/30/2001		9/30/2001	9/30/2002		12/31/2001	
FL29-17	9/30/2001		9/30/2001	9/30/2002		12/31/2001	

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**Annual Statement/  
Performance and Evaluation Report**

Part I: Summary  
Capital Funds Program (CFP)

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

HA Name		Capital Funds Project Number	FFY of Grant Approval		
TALLAHASSEE HOUSING AUTHORITY		FL29P073501-00	2000		
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number #2		<input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending 12/31/2001 _____			
<input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original Revision #1	Revised (2)	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations (May not exceed 10% of line 20)	\$120,383			
3	1408 Management Improvements	\$50,000	\$50,000	\$35,498.00	\$20,564.25
4	1410 Administration	\$62,372	\$62,372	\$62,372.00	\$49,342.85
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$35,000	\$35,000	\$0.00	\$0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	\$187,043	\$163,932	\$22,275.00	\$22,275.00
10	1460 Dwelling Structures	\$700,283	\$698,500	\$171,263.91	\$171,263.91
11	1465.1 Dwelling Equipment-Nonexpendable	\$48,750	\$48,750	\$34,692.30	\$34,692.30
12	1470 Nondwelling Structures	\$0	\$118,731	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0	\$26,546	\$26,546.00	\$26,546.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod used for Development				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant (Sum of lines 2-19)	\$1,203,831.00	\$1,203,831.00	\$352,647.21	\$324,684.31
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	\$700,283	\$698,500		
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Annual Statement/  
Performance and Evaluation Report  
Part II: Supporting Pages  
Capital Funds Program

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHAWide	<u>1406 Operations</u>	1406		\$120,383.00	\$0.00	0.00	0.00	
PHAWide	<u>1408 Management Improvements</u>	1408						
	Staff training in HUD regulations		LS	\$10,000.00	\$10,000.00	\$498.00	\$498.00	
	Maintenance Skills Training		LS	\$5,000.00	\$5,000.00	\$0.00	\$0.00	
	Resident job and leadership training		LS	<u>\$35,000.00</u>	<u>\$35,000.00</u>	<u>\$35,000.00</u>	<u>\$20,066.25</u>	
	<b>Total 1408</b>			<b>\$50,000.00</b>	<b>\$50,000.00</b>	<b>\$35,498.00</b>	<b>\$20,564.25</b>	
PHAWide	<u>1410 Administration</u>	1410						
	Executive Director		5%	\$4,288.00	\$3,251.67	\$3,251.67	\$2,385.82	
	Executive Secretary		5%	\$2,039.00	\$1,717.96	\$1,717.96	\$1,325.81	
	Maintenance Manager		50%	\$23,910.00	\$16,607.55	\$16,607.55	\$12,284.55	
	Finance Director		5%	\$3,015.00	\$2,263.64	\$2,263.64	\$1,683.74	
	Accountant I		25%	\$6,240.00	\$2,148.92	\$2,148.92	\$1,665.72	
	Modernization Coordinator		100%	\$22,880.00	\$9,421.98	\$9,421.98	\$5,181.98	
	Site Supervisor		25%	\$0.00	\$7,658.48	\$7,658.48	\$6,585.96	
	Site Supervisor		25%	\$0.00	\$13,083.57	\$13,083.57	\$12,011.04	
	Benefits			<u>\$0.00</u>	<u>\$6,218.23</u>	<u>\$6,218.23</u>	<u>\$6,218.23</u>	
	<b>Total 1410</b>			<b>\$62,372.00</b>	<b>\$62,372.00</b>	<b>\$62,372.00</b>	<b>\$49,342.85</b>	
PHAWide	<u>1430 Fees and Cost</u>	1430						
	A&E Fees		LS	<u>\$35,000.00</u>	<u>\$35,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Total 1430</b>			<b>\$35,000.00</b>	<b>\$35,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
PHAWide	<u>1460 Dwelling Structures</u>	1460						
	Replace water heaters with high energy efficient models			\$0.00	\$80,000.00	\$0.00	\$0.00	
	Installation of carpeting and unit repair in vacant apartments (approx 125)		LS	<u>\$150,000.00</u>	<u>\$200,000.00</u>	<u>\$129,095.42</u>	<u>\$129,095.42</u>	
	<b>Total 1460</b>			<b>\$150,000.00</b>	<b>\$280,000.00</b>	<b>\$129,095.42</b>	<b>\$129,095.42</b>	

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**Annual Statement/  
Performance and Evaluation Report**

Part II: Supporting Pages  
Capital Funds Program

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)	
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)		
PHAWide	<b>1465 Dwelling Equipment</b>	1465							
	Replace Ranges		100	\$37,500.00	\$37,500.00	\$23,272.30	\$23,272.30		
	Replace Refrigerators		25	\$11,250.00	\$11,250.00	\$11,420.00	\$11,420.00		
	<b>Total 1465</b>			<b>\$48,750.00</b>	<b>\$48,750.00</b>	<b>\$34,692.30</b>	<b>\$34,692.30</b>		
PHAWide	<b>1475 Non-Dwelling Equipment</b>	1475							
	Force Account-Electrical Rewiring-Equipment		LS	\$0.00	\$26,546.00	\$26,546.00	\$26,546.00		
	<b>Total 1475</b>			<b>\$0.00</b>	<b>\$26,546.00</b>	<b>\$26,546.00</b>	<b>\$26,546.00</b>		
FL29P073-001 FL29P073-003 Springfield	<b>1450 Site Improvements</b>	1450							
	-504 Compliance including ramps and parking spaces		LS	\$10,000.00	\$0.00	\$0.00	\$0.00		
	-Repair/replace curbing (phase 1)		626l/f	\$10,000.00	\$10,000.00	\$0.00	\$0.00		
	-Install railings at stairs		210l/f	\$7,004.00	\$0.00	\$0.00	\$0.00		
	-Repair concrete steps		200l/f	\$10,000.00	\$10,000.00	\$0.00	\$0.00		
	-General landscaping (phase 1)		10%	\$35,000.00	\$35,000.00	\$0.00	\$0.00		
	-General sidewalk repair (5% replacement)		5%	\$11,508.00	\$11,508.00	\$0.00	\$0.00		
	<b>Subtotal 1450</b>			<b>\$83,512.00</b>	<b>\$66,508.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
	<b>1460 Dwelling Structure</b>		1460						
	-Replace existing natural gas fired forced air furnace with new unit, new closet, ductwork, A/C coils/compressor, concrete pad, electric service upgrade (phase 3)			25 DU	\$80,000.00	\$0.00	\$0.00	\$0.00	
Service	32 units	\$118,883.00	\$118,883.00	\$0.00	\$0.00				
<b>Subtotal 1460</b>		<b>\$198,883.00</b>	<b>\$118,883.00</b>	<b>\$0.00</b>	<b>\$0.00</b>				
	<b>Total Cost for Springfield</b>			<b>\$282,395.00</b>	<b>\$185,391.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
FL29P073-002 Orange Avenue	<b>1450 Site Improvements</b>	1450							
	-Install railings at stairs		100l/f	\$3,335.00	\$3,335.00	\$0.00	\$0.00		
	-Install additional playground equipment		1.00	\$21,872.00	\$21,872.00	\$16,157.00	\$16,157.00		
	-Repair concrete steps		200l/f	\$5,800.00	\$5,800.00	\$0.00	\$0.00		
	-General sidewalk repair (5% replacement)		5%	\$5,644.00	\$0.00	\$0.00	\$0.00		
	-General landscaping (phase 1)		11%	\$10,000.00	\$10,000.00	\$0.00	\$0.00		
	-Repair retaining walls		40l/f	\$1,800.00	\$1,800.00	\$0.00	\$0.00		
	-Repair 4' chain link fence		220l/f	\$2,255.00	\$3,655.00	\$3,655.00	\$3,655.00		
	-Install pole mounted site lighting (phase 1)		17%	\$3,500.00	\$0.00	\$0.00	\$0.00		
<b>Subtotal 1450</b>		<b>\$54,206.00</b>	<b>\$46,462.00</b>	<b>\$19,812.00</b>	<b>\$19,812.00</b>				

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Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)	
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)		
	<b>1460 Dwelling Structure</b>								
	-Rewire 1, 2, 3, 4 and 5-BR apartments including 100 amp. Service		34 units	\$157,500.00	\$157,500.00	\$37,676.49	\$37,676.49		
	-Replace existing natural gas fired forced air furnace with new unit, new closet, ductwork, A/C coils/compressor, concrete pad, electric service upgrade (phase 3)	1460		\$80,000.00	\$36,725.00	\$0.00	\$0.00		
	Replace the front and back exterior doors and front storm doors	1460		\$0.00	\$50,000.00	\$0.00	\$0.00		
	Repair Exterior Vinyl Siding	1460		\$0.00	\$4,492.00	\$4,492.00	\$4,492.00		
	<b>Subtotal 1460</b>				<b>\$237,500.00</b>	<b>\$248,717.00</b>	<b>\$42,168.49</b>	<b>\$42,168.49</b>	
	<b>Total Cost for Orange Avenue</b>			<b>\$291,706.00</b>	<b>\$295,179.00</b>	<b>\$61,980.49</b>	<b>\$61,980.49</b>		
FL29P073-004 Ebony Gardens	<b>1450 Site Improvements</b>	1450							
	-Convert parking spaces for 504 compliance		2	\$210.00	\$0.00	\$0.00	\$0.00		
	-Install railings at stairs		100l/f	\$2,500.00	\$0.00	\$0.00	\$0.00		
	-Repair concrete steps		200l/f	\$5,800.00	\$0.00	\$0.00	\$0.00		
	-General sidewalk repair		400l/f	\$2,100.00	\$0.00	\$0.00	\$0.00		
	-General landscaping (phase 1)		6%	\$10,000.00	\$0.00	\$0.00	\$0.00		
	-Repair retaining wall behind building D		1920s/f	\$653.00	\$0.00	\$0.00	\$0.00		
	-Repair chain link fence around gas meters		40l/f	\$500.00	\$0.00	\$0.00	\$0.00		
	<b>Subtotal 1450</b>				<b>\$21,763.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
		<b>Total Cost for Ebony Gardens reet</b>			<b>\$21,763.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
FL29P073-006 Pinewood Place	<b>1450 Site Improvements</b>								
	-General landscaping (phase 1)		16%	\$10,000.00	\$10,000.00	\$0.00	\$0.00		
	-General sidewalk repairs		106l/f	\$1,162.00	\$1,162.00	\$0.00	\$0.00		
	<b>Subtotal 1450</b>			<b>\$11,162.00</b>	<b>\$11,162.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
	<b>1460 Dwelling Structure</b>								
	-Replace existing natural gas fired forced air furnace with new unit, new closet, ductwork, A/C coils/compressor, concrete pad, electric service upgrade (phase 3)	1460	21 units	\$63,000.00	\$0.00	\$0.00	\$0.00		
	<b>Subtotal 1460</b>			<b>\$63,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
	<b>1470 Non Dwelling Structure</b>								
	Supplement for Construction of Community Building	1470		\$0	\$118,731	\$0	\$0		
	<b>Subtotal 1470</b>			<b>\$0.00</b>	<b>\$118,731.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
	<b>Total Cost for Pinewood Place</b>			<b>\$74,162.00</b>	<b>\$129,893.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Development Number/Name HA-Wide Activities	GeneralDescriptionofMajor WorkCategories	Development Account Number	Quantity	TotalEstimatedCost		TotalActualCost		StatusofProposedWork(2)
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
FL29P073-015 Scattered Sites	<b>1450SiteImprovements</b>							
	Resurfacedrives	1450	2DU	\$1,500.00	\$3,000.00	\$0.00	\$0.00	
	Repairseptictankdrainfields	1450	4DU	\$2,000.00	\$10,000.00	\$2,463.00	\$2,463.00	
	Landscaping	1450	4DU	\$2,200.00	\$4,400.00	\$0.00	\$0.00	
	<b>Subtotal1450</b>			<b>\$5,700.00</b>	<b>\$17,400.00</b>	<b>\$2,463.00</b>	<b>\$2,463.00</b>	
	<b>1460DwellingStructure</b>							
	Repairsiding,repaintexteriors	1460	2DU	\$1,950.00	\$1,950.00	\$0.00	\$0.00	
	InstallVinylsidingoverT-111	1460	2DU	\$6,300.00	\$6,300.00	\$0.00	\$0.00	
	ReplaceRoofing	1460	4DU	\$4,200.00	\$4,200.00	\$0.00	\$0.00	
	EnergyEfficiencyMeasures	1460	4DU	\$2,000.00	\$2,000.00	\$0.00	\$0.00	
	ReplaceHVACsystems	1460	2DU	<u>\$11,000.00</u>	<u>\$11,000.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	
	<b>Subtotal1460</b>			<b>\$25,450.00</b>	<b>\$25,450.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>TotalCostforScatteredSites(073-15)</b>			<b>\$31,150.00</b>	<b>\$42,850.00</b>	<b>\$2,463.00</b>	<b>\$2,463.00</b>	
	FL29P073-016 Scattered Sites	<b>1450SiteImprovements</b>						
Resurfacedrives		1450	2DU	\$1,500.00	\$3,000.00	\$0.00	\$0.00	
Repairseptictankdrainfields		1450	4DU	\$2,000.00	\$10,000.00	\$0.00	\$0.00	
Landscaping		1450	4DU	\$2,200.00	\$4,400.00	\$0.00	\$0.00	
<b>Subtotal1450</b>				<b>\$5,700.00</b>	<b>\$17,400.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>1460DwellingStructure</b>								
Repairsiding,repaintexteriors		1460	2DU	\$1,950.00	\$1,950.00	\$0.00	\$0.00	
InstallVinylsidingoverT-111		1460	2DU	\$6,300.00	\$6,300.00	\$0.00	\$0.00	
ReplaceRoofing		1460	4DU	\$4,200.00	\$4,200.00	\$0.00	\$0.00	
EnergyEfficiencyMeasures		1460	4DU	\$2,000.00	\$2,000.00	\$0.00	\$0.00	
ReplaceHVACsystems		1460	2DU	<u>\$11,000.00</u>	<u>\$11,000.00</u>	\$0.00	\$0.00	
<b>Subtotal1460</b>				<b>\$25,450.00</b>	<b>\$25,450.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>TotalCostforScatteredSites(073-16)</b>				<b>\$31,150.00</b>	<b>\$42,850.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
FL29P073-017 HiddenPines		<b>1450SiteImprovements</b>						
	-Generallandscaping	1450	10%	\$5,000.00	\$5,000.00	\$0.00	\$0.00	
	<b>Subtotal1450</b>			<b>\$5,000.00</b>	<b>\$5,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
<b>TotalCostforTrimbleRoad</b>			<b>\$5,000.00</b>	<b>\$5,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		
<b>TOTALCFP501-2000</b>				<b>\$1,203,831.00</b>	<b>\$1,203,831.00</b>	<b>\$352,647.21</b>	<b>\$324,684.31</b>	

(1)TobecompletedforthePerformanceandEvaluationReportoraRevisedAnnualStatement.

(2)TobecompletedforthePerformanceandEvaluationReport.

SignatureofExecutiveDirectorandDate

SignatureofPublicHousingDirector/OfficeofNativeAmericanProgramsAdministratorandDate

**Annual Statement/  
Performance and Evaluation Report**  
Part III: Implementation Schedule  
Capital Fund Program

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

OMB Approval No. 2577-0157 (Exp. 3/31/2002)

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1408	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
1410	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
1430	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
1465	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
FL073-001&3	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
FL073-002	3/31/2002		9/30/2001	9/30/2003			
FL073-004	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
FL073-006	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
FL073-015	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
FL073-016	3/31/2002		9/30/2001	9/30/2003		12/31/2001	
FL073-017	3/31/2002		9/30/2001	9/30/2003		12/31/2001	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

TallahasseeHousingAuthority  
2940GradyRoad  
Tallahassee,Florida32312  
850385 -6126  
850385 -0390Fax

**NOTICE**

**NOTICE**

**NOTICE**

**TO:** THAResidents  
**FROM:** SeveriaFranklin  
PublicHousingAdministrator  
**DATE:** \_\_\_\_\_  
**SUBJECT:** ProposedPetPolicyRevisions

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InaccordancewiththeU.S.DepartmentofHousingandUrban  
Development(HUD)theTallahasseeHousingAuthorityisrequiredtooffer  
youa30daycommentperiodinref erencetochangestotherules&  
regulationsorleasechanges24CFR966.5.TheTallahasseeHousing  
Authorityisproposingtochangethepetpolicyinaccordancewiththe24  
CFR960.703regulationsdatedAugust9,2000.

Allcommentsmustbeinwritngto beconsideredtoMs.Claudette  
Cromartie,ExecutiveDirector,2940GradyRoad,Tallahassee,FI32312.

Thedeadlineperiodforallcommentswillbe\_\_\_\_\_.



## PROPOSED Pet Owner Regulations

In accordance with the terms in 24CFR960.70 all resident may own one or more common household pet, or have one or more common household pets present in the dwelling unit.

Proposed Pet Policy Regulations  
Changes are ( **BOLD** )

PET DEFINED : A domesticated dog weighing twenty (20) pounds or less at maturity or any domesticated cat, bird, rodent, (rabbit), fish or turtle that is traditionally kept in the home for pleasure rather than commercial purposes. Dogs and Cats will be required to wear a collar. Reptiles (except turtles) are excluded from the definition. All pets will be required to live inside of the unit.

PET SECURITY  
DEPOSIT:

An additional security deposit of **\$200.00** of which no less than **\$100.00** to be paid at the time of the pet moves in. The remainder may be paid in increments of **\$25.00** per month for each succeeding month until the sum of **\$200.00** is paid. This additional security deposit or any part thereof may not be used for any damages or cleaning incurred on the unit unless directly related to said pet.

LIABILITY  
INSURANCE:

It is recommended that the Pet Owner purchase liability insurance for their own protection. The Tallahassee Housing Authority shall accept no liability for any damages caused by any pets owned by residents.

INOCULATION

AND LICENSING : All pet owners must submit a current immunization record from a licensed veterinarian. The record is to be recertified at the time the pet owner is recertified for eligibility.

**SPAYING AND NEUTERING:**

Pet owners must have record of spaying or neutering by licensed veterinarian .

**SANITARY STANDARDS:**

Owner of the pet will be responsible for all cleanups (anywhere on the grounds or in the building) and it will be disposed of in the dumpster located in the community. There will be a charge if the Housing Authority does any cleanup. When litter boxes are in use, the pet owner will change the litter at least twice each week.

**FLEAS:** **Must be controlled at all times** .

**LEASHING:**

All cats and dogs shall be leashed and under the control of a responsible individual while on the common areas of the premises. The county Leash Law shall apply.

**REGISTRATION:**

The pet owner must register their pet with management before it is brought onto the premises. The registration will be updated annually. The pet owner shall supply the names of one or more responsible parties to care for the pet in case of an emergency. A pet will not be allowed to remain unattended for more than 24 hours.

THE OWNER OF AN ANIMAL IS IN VIOLATION OF THE LAW WHEN THAT ANIMAL CAUSES OBJECTIONAL NOISES, DESTROYS OR DAMAGES THE PROPERTY OF OTHERS.

**PET OWNERS MUST COMPLY WITH ALL LEON COUNTY AND FEDERAL REGULATIONS** . A COPY MAY BE OBTAINED AT THE MANAGER'S OFFICE.

INSPECTIONS OTHER THAN THOSE PERMITTED UNDER THE LEASE CAN BE MADE AFTER PROPER NOTIFICATION AND DURING REASONABLE HOURS IF A COMPLAINT IS RECEIVED IN WRITING AND THE TALLAHASSEE HOUSING AUTHORITY HAS REASONABLE GROUNDS TO BELIEVE THAT A NUISANCE OR THREAT TO HEALTH AND SAFETY OF THE OCCUPANTS OF THE DWELLING OR SURROUNDING AREA EXISTS.

IN THE EVENT OF A PET RULE VIOLATION THE PET OWNER WILL HAVE SEVEN (7) DAYS FROM THE DATE OF SERVICE OF THE NOTICE TO CORRECT THE VIOLATION, TO REMOVE THE PET OR TO MAKE A WRITTEN REQUEST FOR A CONFERENCE TO DISCUSS SAID VIOLATIONS. FAILURE TO CORRECT THE VIOLATION OR TO REQUEST A CONFERENCE OR TO APPEAR AT A REQUESTED MEETING MAY RESULT IN TERMINATION OF TENANCY.

IF A PET HAS TO BE REMOVED DUE TO THE DEATH OR INCAPACITY OF THE PET OWNER AND THE TWO RESPONSIBLE PARTIES ARE CONTACTED AND ARE UNWILLING OR UNABLE TO REMOVE THE PET. THE ANIMAL CARE SHALL BE BORNE BY THE PET OWNER OR HIS OR HER ESTATE. IF UNABLE OR UNWILLING TO PAY, THE COST WILL BE PAID FROM THE PET DEPOSIT AND THE PET WILL BE TURNED OVER TO THE APPROPRIATE ANIMAL SHELTER.

ALL CONDITIONS MUST BE MET AND LEASE SIGNED BEFORE ADMITTING SAID PET TO THE DWELLING UNIT.

I/WE \_\_\_\_\_, having duly read the above pet regulations, understand and agree to comply with said regulations as long as I retain a pet on the Tallahassee Housing Authority premises.

\_\_\_\_\_  
Head of Household Signature Date

\_\_\_\_\_  
THA Representative Date

REF(1) 24CFR960.707  
(2) Leash Law - Leon County