

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

PHA Plans

Annual Plan for Fiscal Year 2001

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

PHA Plan Agency Identification

PHA Name: Alma Housing Authority

PHA Number: GA 133

PHA Fiscal Year Beginning: (mm/yyyy) January 1, 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
PHA FISCAL YEARS 2000 - 2004
[24 CFR Part 903.5]

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)

- 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. PHAs 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 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

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

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score)
 - Improve voucher management: (SEMAP score)
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

- PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program:
- 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

- PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate 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

- PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:

- 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

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
 - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - 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:
 - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 - Other: (list below)

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2001
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

- High Performing PHA**
- Small Agency (<250 Public Housing Units)**
- Administering Section 8 Only**

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

Insert A

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- Admissions Policy for Deconcentration
- FY 2000 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2000 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
XX	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
XX	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
XX	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
XX	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
XX	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
XX	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
NA	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
XX	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications 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
XX	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
XX	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
NA	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
XX	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
XX	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
NA	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
XX	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for	Annual Plan: Capital Needs

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	any active CIAP grant	
XX	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
NA	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	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
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
NA	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
NA	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
XX	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
XX	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
XX	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter

families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being “no impact” and 5 being “severe impact.” Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI							
Income >30% but <=50% of AMI							
Income >50% but <80% of AMI							
Elderly							
Families with Disabilities							
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s
Indicate year:
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

**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.** PHAs 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	7		
Extremely low income <=30% AMI	2		
Very low income (>30% but <=50% AMI)	1		
Low income (>50% but <80% AMI)	4		
Families with children	4		
Elderly families	2		
Families with Disabilities	1		
Race/ethnicity	4Black		
Race/ethnicity	3White		
Race/ethnicity	-0-Hispanic		
Race/ethnicity	-0- Other		
Characteristics by Bedroom Size (Public Housing Only)			
1BR	4		
2 BR	3		
3 BR	0		
4 BR	0		
5 BR	0		
5+ BR	----		

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No 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.

Reduce Time to renovate units ie reduce turn around time

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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 finance 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
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

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
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: Renovate Remaining units in 133-4

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
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- 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

- 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

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA’s selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community

- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)	626,219.00	Modernization
a) Public Housing Operating Fund	479,328.00	
b) Public Housing Capital Fund	-----	
c) HOPE VI Revitalization	-----	
d) HOPE VI Demolition	-----	
e) Annual Contributions for Section 8 Tenant-Based Assistance	-----	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	74,039.00	Law Enforcement 35,785.00 Drug Prevention 5680.00 Drug Intervention 5680.00 Program Cost 26,894.00
g) Resident Opportunity and Self-Sufficiency Grants	-----	
h) Community Development Block Grant	-----	
i) HOME	-----	
Other Federal Grants (list below)	-----	

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
2. Prior Year Federal Grants (unobligated funds only) (list below)		
GA06P13370698	60,409.68	Modernization
GA05P13370799	103896.69	Phase 2 133004
3. Public Housing Dwelling Rental Income	144,000.00	General Fund
4. Other income (list below)		
4. Non-federal sources (list below)	-----	
Total resources	1,487,892.37	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs 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)
- Other: (describe) After completing application process

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

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

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

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

e. 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)

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

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

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

c. If the PHA plans 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**

N/A

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
- Three or More

b. 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:

- 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 transfers 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)

c. Preferences

1. 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 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
- Households that contribute to meeting income goals (broad range of incomes)
- 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)

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 point system), place the same number next to each. That means you can use “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)

- 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
- Households that contribute to meeting income goals (broad range of incomes)
- 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. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- The PHA-resident lease
- The PHA's Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list)

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

b. 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:

Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:

Employing new admission preferences at targeted developments
If selected, list targeted developments below:

Other (list policies and developments targeted below)

d. 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)

- Additional affirmative marketing
 Actions to improve the marketability of certain developments
 Adoption or adjustment of ceiling rents for certain developments
 Adoption of rent incentives 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
 List (any applicable) developments below:

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
 List (any applicable) developments below:

B. Section 8

Exemptions: PHAs 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)
- 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. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. 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
 - Other (describe below)

(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)
- 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)

- PHA main administrative office
 Other (list below)

(3) Search Time

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

If yes, state circumstances below:

(4) Admissions Preferences

a. Income targeting

Yes 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 No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

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)

- 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
 Those enrolled currently in educational, training, or upward mobility programs

- Households that contribute to meeting income goals (broad range of incomes)
- 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)

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 point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

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

Other preferences (select all that apply)

- 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
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- 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)

- 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 preferences to income targeting requirements: (select one)

- The PHA applies preferences within income tiers
 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 admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- 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?

- Through published notices
 Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

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---

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

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

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

See Insert B

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 exclusions 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)

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
- 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)
- 95th 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 re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)
- Never
 - At family option
 - Any time the family experiences an income increase
 - Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____
 - Other (list below)
- g. 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.)
- The section 8 rent reasonableness study of comparable housing
 - Survey of rents listed in local newspaper
 - Survey of similar unassisted units in the neighborhood
 - Other (list/describe below)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs 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 payment 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)

(2) Minimum Rent

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

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

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

5. Operations and Management

[24 CFR Part 903.7 9 (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. See "Organizational Chart"
- 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.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	314	40
Section 8 Vouchers	N/A	
Section 8 Certificates	N/A	
Section 8 Mod Rehab	N/A	
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	
Public Housing Drug Elimination Program (PHDEP)	314	40
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)
 See Insert C
- (2) Section 8 Management: (list below)

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (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 No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

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

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

B. Section 8 Tenant-Based Assistance

1. Yes 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 24 CFR 982?

If yes, list additions to federal requirements below:

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

- PHA main administrative office

Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.79 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) GA Alma Housing Authority
HUD-52837
See Insert D

-or-

The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)
SEE INSERT E

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name GA Alma Housing Authority

-or-

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

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

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

- Yes No: a) Has the PHA received a HOPE VI 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 HOPE VI 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 No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:

- Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
If yes, list developments or activities below:

- Yes 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

[24 CFR Part 903.7 9 (h)]

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

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

- Yes 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.)

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

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

[24 CFR Part 903.7 9 (i)]

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

1. Yes No: 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.

Designation of Public Housing Activity Description	
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 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

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

1. Yes No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete 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.

Conversion of Public Housing Activity Description	
1a.	Development name:
1b.	Development (project) number:
2.	What is the status of the required assessment? <input 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 HOPE VI demolition application (date submitted or approved:)
<input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:)
<input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent
<input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units
<input type="checkbox"/> 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

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

1. 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

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.)

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	<input type="checkbox"/> HOPE I <input 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 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: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	<input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

1. 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:

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 below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

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:

Yes No: Has the PHA has 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? 07/01/99

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

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

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	NA	
Section 8	NA	

- b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

AHA will research FSS and implement as we expand over resident advisory board, community service and PHDEP programs.

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

2. What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)
 - C.O.P.S. Community Oriented Policing Services
 - Pro-Active Police Effort

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

#7

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

1. List the crime prevention activities the PHA has undertaken or plans 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 AI/PAL
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

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

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 PHDEP
- Other activities (list below)

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

All Developments

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)
Insert F

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (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 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? _____
5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (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 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) Modernization
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 903.7 9 (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 (File name) Insert G
 Provided below:

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)

- 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: State of Georgia
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

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

Other: (list below)

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

D. Other Information Required by HUD

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

INSERT "B" DISCRETIONARY RENT EXEMPTIONS
INSERT "C" MANAGEMENT AND MAINTENANCE
DOCUMENTS
INSERT "D" P&E HUD FORM 52837

INSERT "E"
INSERT "F"
INSERT "G"

**OPTIONAL 5-YEAR PLAN
PHDEP AGREEMENT AND PLANNED
EXPENDITURE
COMMENTS FOR RAB**

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 II

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

Capital Fund Grant Number FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

Annual Statement
Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)

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)
Total estimated cost over next 5 years				



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

Troubled Agency Recovery Center, Memphis Office
One Memphis Place
200 Jefferson Avenue, Suite 300
Memphis, Tennessee 38105-2215

JAN 04 2001

Mr. Randy Welty
Executive Director
Housing Authority of City of Alma
401 East Twelfth Street
Alma, GA 31510-0190

CFP FY 2000

Dear Mr. Welty:

Subject: FY 2000 Capital Fund Program for Project No. GA06P13350100

We are pleased to inform you that your FY 2000 Capital Fund Program (CFP) grant in the amount of \$626,219 has been approved. Attached is a copy of the fully-executed Capital Fund Program Amendment Number 1 to the Consolidated Annual Contributions Contract (ACC) as well as a copy of the Annual Statement.

The activities set forth in the Annual Statement shall be undertaken in accordance with the implementation requirements set forth in the Comprehensive Grant Program Handbook 7485.3. You are now authorized to requisition CFP grant funds in accordance with the Budget Line Items (BLIs) in the Annual Statement through the Line of Credit Control System (LOCCS). To ensure that your Authority has LOCCS access for voice response drawdowns, the new LOCCS Access Form 27054 (2000) must be submitted updating your agency's drawdown authority. In completing the Form 27054, enter CFP in block 5a and the words Capital Fund Program in 5b. The request should be an original form, signed, dated, and notarized.

If the approving official has changed, please provide the name of the new approving official on your organization letterhead as follows:

1. Name and title of the new approving official, social security number, daytime telephone number, and address.
2. Name of previous approving official (no SSN is necessary).
3. List of existing users (no SSNs are necessary).
4. Sign, date, and notarize the new approving official's signature.

The LOCCS Security Office will recertify your staff. The approving official will receive an official letter with instructions. Please send the original Form 27054 to HUD Headquarters at the following address with a copy to the TARC:

 **COPY**

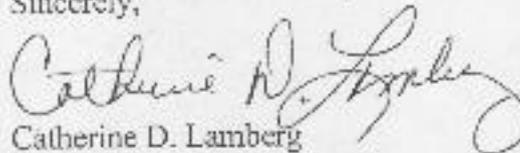


LOCCS Security Office
U.S. Department of Housing and Urban Development
P.O. Box 23774
Washington, DC 20026
FAX to: (202) 708-4350 (then mail original)

The TARC Staff in the Memphis HUD Office had previously established thresholds for designated activities, therefore requiring all contracts and change orders to be submitted to HUD for review and approval before execution or implementation. That policy will continue for this CFP Grant.

If you have any questions concerning this matter, please contact Jimmy P. Lantrip, Facilities Management Specialist, at (901) 544-4121.

Sincerely,



Catherine D. Lamberg
Director
Troubled Agency Recovery Center

Enclosure(s)

cc: Mr. Mark A. Johnson, Chairperson
City of Alma Housing Authority
P. O. Box 135
Alma, GA 1510

Mr. Boyce Norris, Jr., PIH Director
Office of Public Housing
Five Points Plaza
40 Marietta Street, 17th Floor
Atlanta, GA 30303-2806

Mr. Sam Oni
Senior Community Builder
Richard B. Russell Federal Building
75 Spring Street, SW
Atlanta, GA 30303-2806

TARC Team Members
Atlanta/Lee Clark
Birmingham/ Sal S. Modi
Memphis/Jimmy P. Lantrip
Atlanta/ Gloria Simmons, Team Lead
Memphis/Agnes M. Henderson, Project Executive

**Capital Fund Program
(CFP) Amendment**

To The Consolidated Annual Contributions Contract
(form HUD-53012)

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

Whereas, (Public Housing Agency) Alma Housing Authority (GA133) (herein called the "PHA") and the United States of America, Secretary of Housing and Urban Development (herein called "HUD") entered into Consolidated Annual Contributions Contract(s) (ACC) Number(s) A-2736 dated _____:

Whereas, HUD has agreed to provide CFP assistance, upon execution of this Amendment, to the PHA in the amount to be specified below for the purpose of assisting the PHA in Carrying out capital and management activities in order to ensure that such developments continue to be available to serve low-income families: \$ 626,219 for Fiscal Year 2000 to be referred to under Capital Fund Grant Number GA06P13350100 PHA Tax Identification Number (TIN) 58-6014661

Whereas, HUD and the PHA are entering into this CFP Amendment Number 1

Now Therefore, the ACC(s) is (are) amended as follows:

1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This amendment is a part of the ACC(s).
2. The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.
3. In accordance with the HUD regulations, the PHA Agency Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the PHA Agency Plan Capital Fund Annual Statement.
4. Subject to the provisions of the ACC(s), and to assist in the capital and management activities, HUD agrees to disburse to the PHA from time to time as needed up to the amount of funding assistance specified above.
5. The PHA shall continue to operate each development as low-income housing in compliance with the ACC(s), as amended, the United States Housing Act of 1937 (the "Act") and all HUD regulations for a period of twenty years after the last disbursement of CFP

assistance for modernization activities and for a period of forty years after the last distribution of CFP assistance for development activities. However, the provisions of Section 7 of the ACC shall remain in effect for so long as HUD determines there is any outstanding indebtedness of the PHA to HUD which arose in connection with any development(s) under the ACC(s) and which is not eligible for forgiveness, and provided further that, for a period of ten years following the last payment of assistance from the operating fund to the PHA, no disposition of any development covered by this amendment shall occur unless approved by HUD.

6. If the PHA does not comply with any of its obligations under this Amendment, HUD may direct the PHA to terminate all work described in the Capital Fund Annual Statement of the PHA Agency Plan. In such case, the PHA shall only incur additional costs with HUD approval.
7. Implementation or use of funding assistance provided under this Amendment is subject to attached Corrective Action Order(s).
(mark one): Yes No
8. The PHA acknowledges its responsibility for adherence to this Amendment by subgrantees to which it makes funding assistance hereunder available.

The parties have caused this Agreement to be effective as of the date of execution on behalf of the United States, as stated below.

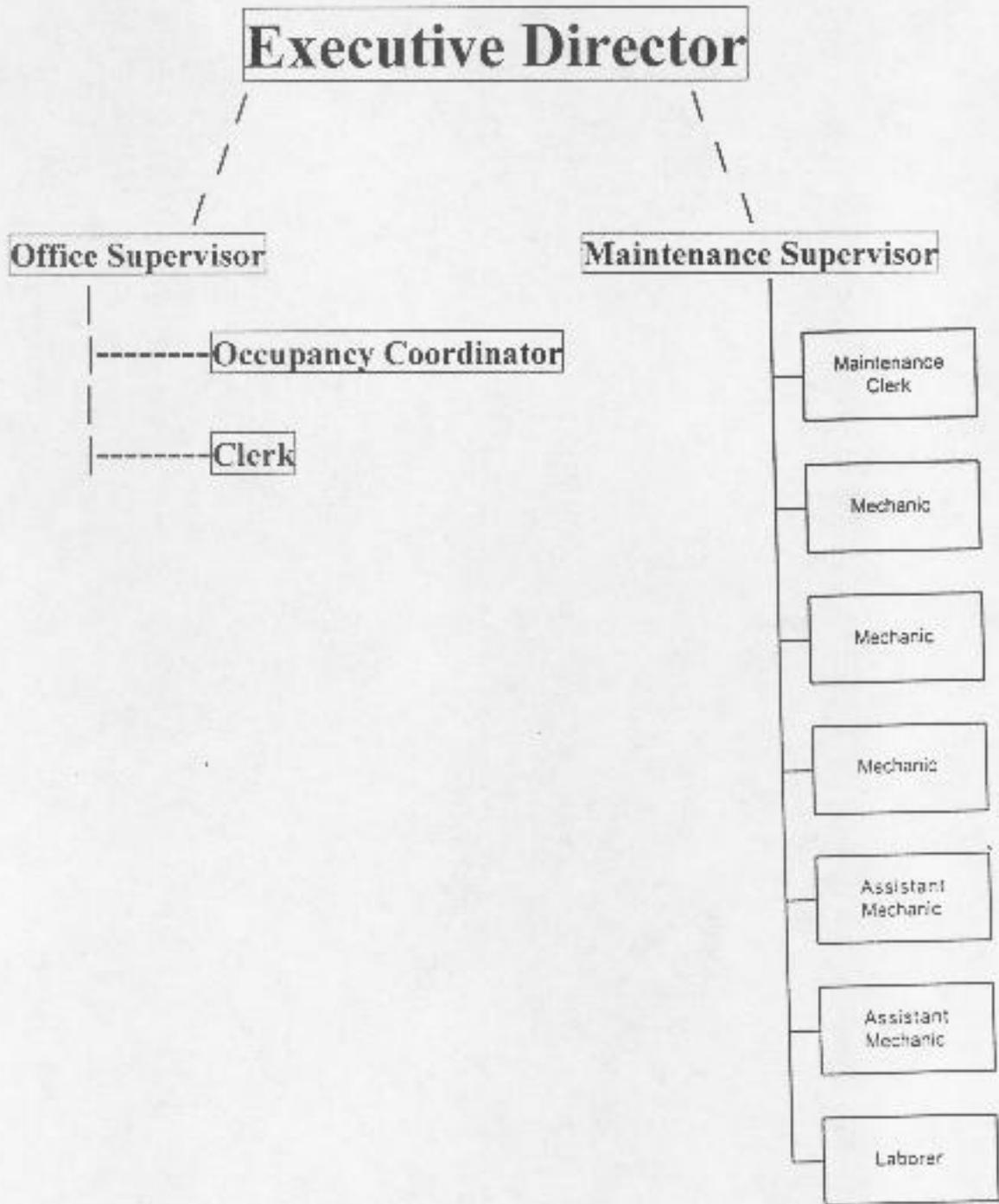
U.S. Department of Housing and Urban Development By: <u>Catherine D. Lamborg</u> Date: <u>1/4/00</u>	PHA Executive Director (Interim) By: <u>Martha Johnson</u> Date: <u>7-17-00</u>
Title: Director Memphis Troubled Agency Recovery Center	Title: <u>INTERIM E.D./Chairperson</u>

Annual Statement		Alma Housing Authority
Capital Fund Program (CFP)		Part I: Summary
Capital Fund Grant Number: GA06P13350100		FFY of Grant Approval: 2000
Original Annual Statement		
Line No.	Summary by Development Account	Total Estimated Cost
		\$0
1	Total Non-CFP Funds	\$0
2	1406 Operations	\$24,000
3	1408 Management Improvements	\$22,285
4	1410 Administration	\$0
5	1411 Audit	\$0
6	1415 Liquidated Damages	\$51,200
7	1430 Fees and Costs	\$0
8	1440 Site Acquisition	\$0
9	1450 Site Improvement	\$528,734
10	1460 Dwelling Structures	\$0
11	1465.1 Dwelling Equipment-Nonexpendable	\$0
12	1470 Nondwelling Structures	\$0
13	1475 Nondwelling Equipment	\$0
14	1485 Demolition	\$0
15	1490 Replacement Reserve	\$0
16	1492 Moving to Work Demonstration	\$0
17	1495.1 Relocation Costs	\$0
18	1498 Mod Used for Development	\$0
19	1502 Contingency	\$626,219
20	Amount of Annual Grant (Sum of lines 2-19)	\$53,200
21	Amount of line 20 Related to LBP Activities	\$0
22	Amount of line 20 Related to Section 504 Compliance	\$32,800
23	Amount of line 20 Related to Security	\$93,600
24	Amount of line 20 Related to Energy Conservation Measures	

Annual Statement			
Capital Fund Program (CFP)			Part II: Supporting Table
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
PHA-Wide	Staff training	1408	\$12,000.00
PHA-Wide	Commissioner training	1408	\$12,000.00
	SUBTOTAL	1408	\$24,000.00
PHA-Wide	Mod. Coordinator Salary & Benefits	1410	\$22,285.00
	SUBTOTAL	1410	\$22,285.00
GA133-4	A/E design for Mod. work items including coord. of CFP budgets. (completion of CGP #705)	1430	\$33,200.00
GA133-4	Abatement monitor during construction	1430	\$18,000.00
	SUBTOTAL	1430	\$51,200.00
GA133-4	Continuation of work indicated in CGP #705 (final 16 units)	1460	\$528,734.00
	SUBTOTAL	1460	\$528,734.00

Annual Statement		
Capital Fund Program (CFP)		Part III: Implementation Schedule
Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
GA133-4	3/30/02	3/30/03
PHA-Wide	3/30/02	3/30/03

Alma Housing Authority Organizational Chart



ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy

Queen City Heights, GA06P133001

3rd, 4th, 5th, Worth, Wayne and Ware Streets

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy

Queen City Heights, GA06P133002

14th and 15th Streets

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy

Washington Heights, GA06P133003

Pope, Bead and 20th Streets

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy

Washington Heights, GA06P133003

Pope, Bead and 20th Streets

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy

Sun City Courts, GA06P133004

401 East 12th Street

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY
401 East 12th Street
Post Office Box 190
Alma, GA 31510-0190
Operating Subsidy

Sun City Courts, GA06P133005
Worth Street
Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY
401 East 12th Street
Post Office Box 190
Alma, GA 31510-0190
Operating Subsidy

Sun City Terrace, GA06P133006
Stewart, 7th and Baker Streets
Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy

Albert Pitts Homes, GA06P133007

12th, 14th, Miller and Baker Streets

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy

Wilfred B. Smith Terrace, GA06P133008

Mullis Drive and 16th Street

Alma, Bacon, Georgia 31510

E. For Section 8 Existing, Voucher and Moderate Rehabilitation:

Prepare HUD – 52595 Balance Sheet for Section 8 and Public Housing annually
Prepare HUD – 52681 Voucher for Payment of Annual Contributions and Operating Statement annually
Prepare HUD – 52673 Estimate of Total Required Annual Contributions annually and revised as needed
Prepare HUD – 52672 Supporting Data for Annual Contributions Estimate annually and revised as needed
Prepare HUD – 52663 Requisition for Partial Payment of Annual Contributions annually and revised as needed.
Post all checks and deposits to a general ledger and provide detailed transaction printouts and general ledger printouts
Maintain Insurance Register
Maintain Property Ledger as needed
Prepare Reconciliation of Bank Statements monthly
Maintain Section 8 New Construction records as required

III.

The Accountant will keep the Board of Commissioners of the Authority apprised of areas of concern, including but not limited to, untimely deposits; unauthorized expenditures, internal control weaknesses; etc.

IV.

The Authority shall pay to the Accountant for services enumerated in paragraphs A, B, and C above, a monthly fee based on the number of units at the Authority. Based on the current number of units which is 322, this fee will be \$579.00 per month. In the event the number of units should change, the accounting fee will change in accordance with the fee schedule.

There will be a one-time set up fee of \$ n/a for setting up the Authority's balances and records on computer.

There will be an annual charge of \$500.00 for submission of Financial Data Schedule.

For CIAP and CGP Programs:

Per Mod Phase an additional fee of \$1500.00 will be charged

To: Maintain Modernization Program Financial Records
Prepare Modernization Budgets and Budget Revisions
Prepare Modernization Schedule/Report of Modernization Expenditures

Prepare Modernization Close-Out documents
To Include Comprehensive Grant Programs

In addition, provided the Authority requests the Accountant to perform any of the supplemental services as outlined under paragraph D above, the Authority shall reimburse the Accountant for this additional work at a fee to be agreed upon by the Authority and the Accountant, and as approved by HUD.

In addition, it is understood and agreed that, should the authority fail to furnish to the Accountant the basic information on which the maintenance of the Authority's records is predicated within a reasonable time following the date this material is due, then the Accountant shall be released of this/her responsibility under this contract to perform the services listed under Section II above, until such time as the necessary basic information is furnished to the Accountant.

V.

The term of this contract shall be for a period of one year from the date hereof, provided, however, that either party may terminate this contract upon giving thirty days' written notice and that the fee is not changed without prior HUD approval.

VI.

All books of account and records maintained for the Authority, together with all supporting documents, shall remain the property of the Authority and shall be returned to the Authority after they have served their purpose with the Accountant, but in any event upon termination of the contract.

VII.

All financial reports prepared by the Accountant shall be signed by him/her without qualification. Such signature shall be construed only as certification of the accuracy of the report according to the best of his/her knowledge and belief, based on information and data furnished by the Authority, or which if readily available to the Accountant.

VIII.

Conflict of Interest-The parties further agree to the following: "No member, officer, or employee of the Local Authority, no member of the governing body of the Locality in which the Project is situated, no member of the governing body of the Locality in which the Local authority is activated, and no other public official of such Locality or localities who exercises and functions or responsibilities with respect to the Project, during his tenure or for one year thereafter, shall have any interest, direct or indirect, in this contract or the proceeds thereof."

IX.

Nondiscrimination-In Connection with the performance of work under this contract the Accountant agrees not to discriminate against any employee or applicant for employment because of race, creed, color or national origin. The Accountant will take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, creed, color, or national origin. Such action shall include, but not be limited to the following:

- Employment, upgrading, demotion, or transfer
- Recruitment or recruitment advertising
- Layoff or termination
- Rates of pay or other forms of compensation
- Selection for training, including apprenticeship

The Accountant shall comply with requirements of the Department of Housing and Urban Development, pursuant to its regulations issued under Title VI of the Civil Rights Act of 1964; said regulations being set forth in 24CFR, Subtitle A, Part 1, Section 1.1 et seq. (see also Department Interim Order II, FR 8.15).

IN WITNESS THEREOF, the parties hereto have executed this contract this the

17th day of March, 2000,

to be effective as of the 1st day of January, 2000.

The Housing Authority of the City of
Alma, Georgia

BY: Kathleen M. Revere
Executive Director

Scott Accounting and Computer
Services, Inc.

BY: Bobby Scott
President

CHECKLIST CONT.

PWA USE			BUDGET FORMS	HUD USE		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HUD 52722A CALCULATION OF ALLOWABLE UTILITIES EXPENSE LEVEL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ESTIMATED INVESTMENT INCOME (PII) SCHEDULE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HUD 52728A PWA OCCURANCE ENCOURAGEMENT FOR A REQUESTED BUDGET YEAR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HUD 52728B VACANCY REDUCTION GOAL FOR LOW OCCURANCE PWA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HUD 52728C COMPREHENSIVE OCCURANCE PLAN SCHEDULE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HUD 52150 MAINTENANCE RATE RATE DETERMINATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CERTIFICATION OF RE-EXAMINATION OF FAMILY INCOME AND COMPOSITION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	REGULATION OF THE BOARD OF COMMISSIONERS APPROVING THE OPERATING BUDGET	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ABSTRACT FROM THE MINUTES OF THE MEETING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CERTIFICATE OF THE RECORDING OFFICER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LIST OF HOUSING MANAGER & ASSISTANT HOUSING MANAGER POSITIONS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CASH FLOW PROJECTION IF OPERATING SUBSIDY EXCEEDS \$100,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A

CHECKLIST CONT.

<u>IIA USE</u>			<u>BUDGET FORMS</u>	<u>HUD USE</u>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CONSENT FOR ACCOUNTANT CONTRACT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL	MISS	N/A		INCL	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HUD 50070 CERTIFICATION FOR A DRUG-FREE WORKPLACE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL	MISS	N/A		INCL	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CERTIFICATION FOR CONTRACTS GRANTS, LOANS AND COOPERATIVE ASSIGNMENTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL	MISS	N/A		INCL	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	COPY OF INDEPENDENT AUDIT CONTRACT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL	MISS	N/A		INCL	MISS	N/A

BUDGETING BUDGET CHECKLIST

Submission (check one)

ORIGINAL

REVISION

REV. NO.

HHA Name Alma Housing Authority

FR 12-31-2000

STATUS: INCL. (INCLUDED)
 MISS. (MISSING)
 N/A. (NOT APPLICABLE)

<u>HHA USE</u>			<u>BUDGET FUND</u>	<u>HHA USE</u>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HHD 52564 (2 PAGES) OPERATING BUDGET	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HHD 52566 SCHEDULE OF ALL POSITIONS & SALARIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HHD 52567 SCHEDULE OF NONROUTINE EXPENDITURES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HHD 52571 SCHEDULE OF ADMINISTRATION EXPENSES OTHER THAN SALARIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HHD 52573 (4 PAGES) SUMMARY OF BUDGET DATA AND JUSTIFICATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HHD 52721 (5 PAGES) DIRECT DISBURSEMENT PAYMENT SCHEDULE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HHD 52720A DATA COLLECTION PFB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HHD 52720B CALCULATION OF PFB FORMULA & DATA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HHD 52723 CALCULATION OF PFB OPERATING SUBSIDY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCL.	MISS	N/A		INCL.	MISS	N/A

**Model Form of Proposal and Contract
between Public Housing Agency and
Independent Public Accountant for
Audit Services.**

THIS AGREEMENT, entered into as of the 15th day of April 1999 by and between the Housing Authority of the City of Alma State of Georgia, (hereinafter referred to as the (Full name of PHA) Public Housing Agency), and Kendall L. Davis, P.C., Independent Public Accountant (Full name of accountant or accounting firm) of Hazlehurst, GA 31539 with offices at 39 N. Tallahassee Street, Hazlehurst, GA, (hereinafter referred to as the "Contractor"), WITNESSETH:

WHEREAS the Public Housing Agency has entered into a contract (contracts) with the United States of America acting through the Department of Housing and Urban Development (hereinafter referred to as the "Government") for financial assistance for low-income public housing pursuant to the United States Housing Act of 1937, as amended, 42 United States Code section 1437 et seq.; and

WHEREAS, pursuant to said contract (contracts), the Government and the Comptroller General of the United States or his duly authorized representatives have the right to audit the books and records of the Public Housing Agency pertinent to its operations with respect to such financial assistance: and

WHEREAS, the Government has authorized the Public Housing Agency to procure such an audit by an Independent Public Accountant in lieu of audit by the Government: and

WHEREAS, the Public Housing Agency desires the Contractor to conduct and perform such an audit:

NOW, THEREFORE, the Public Housing Agency and the Contractor do mutually agree as follows:

1. The Contractor shall audit the accounts and records of the Public Housing Agency for the year ended December 31, 1999, in accordance with generally accepted government auditing standards covering financial and compliance audits and the auditing and reporting provisions of the Single Audit Act of 1996, PIH Notice 96-32, and generally accepted accounting principles. The audit performed shall be sufficient in scope to enable the Contractor to express an opinion in the audit report on the financial statements of the PHA.

2. The books of account and financial records to be audited are maintained and are located at the Public Housing Agency's office at Alma. These books and records will be made available to the Contractor by the Executive Director of the Public Housing Agency at the Contractor's request for the Contractor's use at the Public Housing Agency's office during normal business hours.
3. If the Contractor ascertains that the Public Housing Agency's books and records are not in sufficiently satisfactory condition for performing an audit, the Contractor shall disclose this deficiency to the Public Housing Agency. If the Public Housing Agency cannot get its books ready for an audit within 15 days, then the IPA should notify the Government. Notification to the Government shall be by written, communication addressed to the Regional Inspector General for Audit, Regional Office, Department of Housing and Urban Development,
Atlanta, Georgia
 (Address of Regional Office)

The Contractor shall await further instructions from the Regional Inspector General for Audit before continuing the audit.

4. Upon completion of the audit, an Audit Report consisting of those elements described in the Audit Guide shall be simultaneously submitted to the Regional Inspector General for Audit (20 copies) and Public Housing Agency (1 copy for each commissioner and required copies for the Executive Director) as joint addressees.
5. The Audit Report shall be submitted within 120 days after the close of the Public Housing Agency's fiscal year unless a shorter period is required by the State Law.
6. The Public Housing Agency may, before or during the conduct of the audit, request changes in the scope of the services of the Contractor to be performed under this contract. Such changes, including any increase or decrease in the amount of the Contractor's compensation and any change in the time limitation for submission of the Contractor's report, which are mutually agreed upon by and between the Public Housing Agency and the Contractor, shall be incorporated into written amendments to this contract and shall be subject to the Government's approval.
7. The Public Housing Agency agrees to pay the Contractor as compensation for the services and report mentioned herein, a lump-sum fee of \$ 3,700.00, inclusive of all costs and expenses. The fee is based on the following:

a. Partner(Principal):	\$ <u>65.00</u> per hr:	est. man-days <u>4</u>	<u>\$2,080.00</u>
b. Senior(Manager):	\$ _____ per hr:	est. man-days _____	_____
c. Semi-Senior:	\$ <u>45.00</u> per hr:	est. man-days <u>2</u>	<u>1,080.00</u>
d. Junior:	\$ _____ per hr:	est. man-days _____	_____
e. Other (described): Travel, Typing, Copying, etc.			<u>540.00</u>
Total			<u>\$3,700.00</u>

It is estimated that 6 man-days will be required to perform audit.

*Such lump-sum fee shall be payable after submission of the Audit Report to the Public Housing Agency and after submission of copies of the report to the Government as provided in paragraph 4 above.

8. The Contractor must be either a Certified Public Accountant, or a licensed or registered public accountant licensed on or before December 31, 1970, by a regulatory authority of a state or other political subdivision of the United States and meet any legal requirements concerning registration in which the Public Housing Agency is located. In addition, those public accountants licensed after December 31, 1970, but prior to December 31, 1975, who performed a PHA audit prior to December 31, 1976, will be eligible to continue to perform PHA audits. A statement by the state identifying such registration or license shall be attached to this Contract.
9. The Contractor certifies that its principal officer(s) or member(s) do not now have or have not had during any period covered by this audit any interest, direct or indirect, in the PHA or any of its members or officials including the following:
 - a. Family relationship with any PHA member or official:
 - b. Employment by or service as a member or official of a PHA during the period covered by the audit.
10. The Contractor certifies that it has not provided accounting or bookkeeping services for the PHA during the period covered by the audit except as follows: N/A
11. No member, officer or employee of the Public Housing Agency, no member of the governing body of the locality in which any of the Public Housing Agency's projects are situated, no member of the governing body of the locality in which the Public Housing Agency was activated, and no other public official of such locality or localities who exercises any responsibilities or functions with respect to the Public Housing Agency's projects, during his/her tenure or for one year whereafter, shall have any interest, direct or indirect, in this contract or the proceeds thereof.
12. No Member of or Delegate to Congress of the United States or Resident Commissioner shall be admitted to any share or part of this contract or to any benefit that may arise therefrom.
13. The Contractor warrants that he/she has not employed any person to solicit or secure this contract upon any agreement for a commission, percentage, brokerage, or contingent fee. Breach of this warranty shall give the Public Housing Agency the right to terminate this contract, or, in its discretion, to deduct from the Contractor's fee the amount of such commission, percentage, brokerage, or contingent fee.
14. The Contractor shall not assign or transfer any interest in this contract except the claims for monies due or to become due from the Public Housing Agency under the contract may be assigned to a bank, trust company, or other financial institution. If the Contractor is a partnership, this contract shall inure to the benefit of the surviving or remaining members of such partnership.

15. The Contractor shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, or national origin. The Contractor shall take affirmative action to ensure that applicants are employed, and employees are treated during employment, without regard to race, color, religion, sex, age, or national origin. Such action shall include, but not limited to, or transfer: recruitment or recruitment advertising; layoff or termination, rates of pay or other forms of compensation; and selection for training, including apprenticeship.

16. For a period of four years from the date of the Audit report, the contractor shall make its workpapers, records, and other evidence of audit available to the Government and to the Comptroller General of the United States or his duly authorized representatives during normal working hours upon written request of the Government of the Comptroller General or his representatives. The period will be reduced to three years for those Public Housing Agencies for which all projects have had Actual Development Cost Certificates issued. The Government and the Comptroller General shall be entitled to reproduce any or all of such documents at their expense for which provision shall be made at the time the need for reproduction arises.

17. Except for disclosure to the Government, the Comptroller General and the Public Housing Agency, the Audit Report and the workpapers, records, and other evidence of audit, including information and data prepared or assembled by the Contractor under this contract, shall be held confidential by the Contractor and shall not be made available or otherwise disclose to any person without the prior written approval of the Government.

IN WITNESS WHEREOF, the Public Housing Agency and the Contractor have executed this agreement the day and year first above written.

Kendall L. Davis, P.C.
 (Name of Independent Public Accountant)

Housing Authority of the City of Alma
 (Name of Public Housing Agency)

By Kendall L. Davis, P.C. 4/12/99
 (Name) (Date)

By Kathleen M. Reune 06-15-99
 (Name) (Date)

Peer Review Program

October 9, 1998

Kendall L. Davis, CPA
Kendall L. Davis, P.C.
PO Box 1270
Hazelhurst GA 31539

Firm Number: 10117986
Review Number: 122911

Dear Mr. Davis:

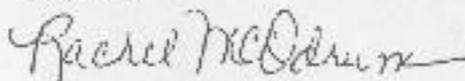
I wanted to confirm with you that the following firm changes have taken place.

The firm of Whitfield & Davis P.C., firm number 10117986, has been changed to Kendall L. Davis, P.C. Since Kendall L. Davis took the majority of audit and accounting hours, after the partnership dissolved, they will keep the original firm number. Whitfield and Butler were assigned a new firm number since they took the lesser amount of audit and accounting hours.

Their next scheduled review for Kendall L. Davis is November 30, 1999. The firm was given a 15 month extension for their review. The extension is 15 months from the effective date of the firm's dissolution which was August 31, 1998. The review number is 122911.

If you should have any further questions please feel free to contact me direct at 201/938/3027.

Sincerely,



Rachel McOdum
Peer Review Coordinator

cc: Gail Lynn, Peer Review Director, Georgia Society of CPAs

SKINNER & WATERS, LLC

Certified Public Accountants
4472 Columbia Rd Ste D
Meriden, GA 30207
(706) 856-0000
Fax (706) 856-0998

Members
American Institute of
Certified Public Accountants
Private Companies Practice Section
Randy L. Skinner
Michael Roy Weber

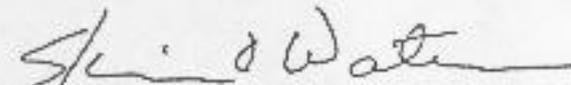
November 16, 1995

To the Owners
Whitfield & Davis, PC

We have reviewed the system of quality control for the accounting and auditing practice of Whitfield & Davis, PC (the firm) in effect for the year ended June 30, 1995. Our review was conducted in conformity with standards established by the Peer Review Board of the American Institute of Certified Public Accountants (AICPA). We tested compliance with the firm's quality control policies and procedures to the extent we considered appropriate. These tests included a review of selected accounting and auditing engagements.

In performing our review, we have given consideration to the quality control standards issued by the AICPA. Those standards indicate that a firm's system of quality control should be appropriately comprehensive and suitably designed in relation to the firm's size, organizational structure, operating policies, and the nature of its practice. They state that variance in individual performance can affect the degree of compliance with a firm's quality control system and, therefore, recognize that there may not be adherence to all policies and procedures in every case.

In our opinion, the system of quality control for the accounting and auditing practice of Whitfield & Davis, PC in effect for the year ended June 30, 1995, met the objectives of quality control standards established by the AICPA and was being complied with during the year then ended to provide the firm with reasonable assurance of conforming with professional standards in the conduct of that practice.


Skinner & Waters, LLC

**PHA/IHA Board Resolution Approving
Operating Budget or Calculation of
Performance Funding System
Operating Subsidy**

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

OMB Approval No. 2577-0026 (Exp. 10/31/97)

Public Reporting Burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0026), Washington, D.C. 20503. Do not send this completed form to either of the above addresses.

Acting on behalf of the Board of Commissioners of the below-named Public Housing Agency (PHA)/Indian Housing Authority (IHA), as its Chairman, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the Board's approval of (check one or more as applicable):

(date)

03/24/2000

- Operating Budget Submitted on: _____
- Operating Budget Revision Submitted on: _____
- Calculation of Performance Funding System Submitted on: _____
- Revised Calculation of Performance Funding System Submitted on: _____

I certify on behalf of the: (PHA/IHA Name) ALMA HOUSING AUTHORITY that:

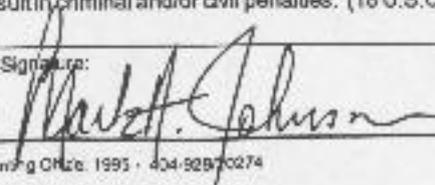
1. All regulatory and statutory requirements have been met;
2. The PHA has sufficient operating reserves to meet the working capital needs of its developments;
3. Proposed budget expenditures are necessary in the efficient and economical operation of the housing for the purpose of serving low-income residents;
4. The budget indicates a source of funds adequate to cover all proposed expenditures;
5. The calculation of eligibility for Federal funding is in accordance with the provisions of the regulations;
6. All proposed rental charges and expenditures will be consistent with provisions of law;
7. The PHA/IHA will comply with the wage rate requirements under 24 CFR 968.110(e) and (f) or 24 CFR 905.120(c) and (d);
8. The PHA/IHA will comply with the requirements for access to records and audits under 24 CFR 968.110(i) or 24 CFR 905.120(g); and
9. The PHA/IHA will comply with the requirements for the reexamination of family income and composition under 24 CFR 960.209, 990.115 and 905.315.

I hereby certify that all the information stated within, as well as any information provided in the accompaniment herewith, is true and accurate
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Board Chairman's Name (type)

Mark A. Johnson

Signature:



Date:

03/24/2000

Previous edition is obsolete

U.S. Government Printing Office: 1995 • 404-929-0074

Form HUD-52574 (10/95)
ref. Handbook 7575

Calculation of Allowable Utilities Expense Level

PHA/IHA - Owned Rental Housing
Performance Funding System

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



OMB Approval No. 2577-0029 (exp. 6/31/89)

Public Housing Agency/Indian Housing Auth.		Old Project Numbers (Data listed on lines 1, 2, 3)		New Project Numbers (Data listed on line 4)		Fiscal Year Ending		Submission	
ALMA HOUSING AUTHORITY		GA 133-001-00D				12/31/2000		<input checked="" type="checkbox"/> Original	
						ACC Contract Number		<input type="checkbox"/> Revision No. ()	
						A-2736			
Line No.	Description	Unit Months Available	Sewerage and Water Consumption	Electricity Consumption	Gas Consumption	Fuel (Specify type e.g., oil, coal, wood)			
	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(9)
01	UMA & actual consumption for old proj. for 12 mth. pd. which ended 12 mths. before the Requested Budget Year. 98	3,864	299,570 353,281	382,653 289,952	12,969 8,515				
02	UMA & actual consumption for old proj. for 12 mth. pd. which ended 24 mths. before the Requested Budget Year. 97	3,864	343,844	437,514	14,448				
03	UMA & actual consumption for old proj. for 12 mth. pd. which ended 36 mths. before the Requested Budget Year. 96	3,864	286,747	427,876	15,233				
04	Accumulated UMA and actual consumption of old projects (sum of lines 01, 02, 03).	11,592	900,161 983,872	1,248,043 1,155,342	42,650 38,196				
05	Estimated Unit Months available for old projects for Requested Budget Year.	3,864							
06	Ratio of Unit mths. available for old proj. (line 04 divided by line 05 of column 3)	3							
07	Estimated UMA and consumption for old proj. for Requested Budget Year (Each figure on line 04 divided by line 06).	3,864	310,054 327,957	416,014 385,114	14,217 12,732				
08	Estimated UMA & consumption for new projects.								
09	Total est. UMA and consumption for old & new proj. for Requested Budget Year (line 07 + line 08).	3,864	310,054 327,957	416,014 385,114	14,217 12,732				
10	Est. cost of consumption on line 09 for Requested Budget Year (see instr.).	Costs	11,698 12,544	51,815 45,794	14,327 15,957				
11	Total est. cost for Requested Budget Year (sum of all columns of line 10).	77,840 74,295							
12	Est. FUM cost of consumption for Req. Budget Yr. (Allowable Utilities Expense Level) (Line 11 divided by line 09, col. 3)	20.15 19.23							
12a	Rate		0.03773 0.0382500	0.12455 0.1189100	1.00771 1.2533000				
12b	Unit of Consumption		GALLONS	KWH	CCF				

Previous Editions are Obsolete

Form HUD-52722-A (Rev. 4-84)

**Calculation of Performance
Funding System Operating Subsidy**
PHA/IHA-Owned Rental Housing

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

OMB Approval No. 2577-0029 (exp. 7/31/96)

Public Reporting Burden for this collection of information is estimated to average 2.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0029), Washington, D.C. 20503. Do not send this completed form to either of the above addresses.

Name and Address of Public Housing Agency / Indian Housing Authority: (PHA/IHA)

ALMA HOUSING AUTHORITY
P.O. BOX 190
ALMA, GEORGIA 31510

Budget submission to HUD required

Type of Submission:

Original

Revision No: _____

Number of HA Units 322	Unit Months Available: (UMAs) 3864	Subject Fiscal Year: 2000	ACC Number: A-2736	PAS/LOCCS Project No: GA 133-001-00D	Submission Date: 03/31/1999
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Line No.	Description	Requested by PHA/IHA (PUM)	HUD Modifications (PUM)
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Part A. Allowable Expenses and Additions

01	Previous allowable expense level (line 07 of form HUD-52723 for previous fiscal year)	150.06	
02 a	Line 01 multiplied by .005	0.75	
02 b	Delta from form HUD-52720-B, if applicable (see instructions)		
03	"Requested" year units from latest form HUD-52720-A (see instructions) 322		
04	Add-ons to allowable expense level from previous fiscal year (see instructions)		
05	Total of lines 01, 02a, 02b, and 04	150.81	
06	Inflation factor	1.0350	
07	Revised allowable expense level (AEL)(line 05 times line 06)	156.09	
07a	Transition Funding		
07b	Increase to AEL		
08	Allowable utilities expense level from form HUD-52722-A	19.23	20.15
09	<input checked="" type="checkbox"/> Actual or <input type="checkbox"/> Estimated PUM cost of Independent Audit (IA) during subject fiscal year	0.96	
10	Costs attributable to deprogrammed units		
11	Total Allowable Expenses and Additions (sum of lines 07 thru 10)	176.28	177.20

Part B. Dwelling Rental Income

12	Total rent roll (as of 12/01/1999)	13,063	
13	Number of occupied units as of rent roll date	196	
14	Average monthly dwelling rental charge per unit (line 12 divided by line 13)	66.65	
15	Change factor	1.003	1.
16	Projected average monthly dwelling rental charge per unit (line 14 times line 15)	68.65	
17	Projected occupancy percentage (see instructions)	81.00 %	%
18	Projected average monthly dwelling rental income per unit (line 16 times line 17)	55.61	

Part C. Non-dwelling Income

19	Estimated Investment Income (EII)		
20	Other income		
21	Total non-dwelling income (line 19 plus line 20)		
22	Total operating receipts (line 18 plus line 21)	55.61	
23	PUM deficit or (Income) (line 11 minus line 22)	120.67	121.59

	Requested by PHA/IHA (Whole dollars)	HUD Modifications (Whole dollars)
24	Deficit or (Income) before add-ons (line 23 times UMAs shown in heading)	464,824

Part D. Add-ons for changes in Federal law or regulation and other eligibility

25	FICA contributions	8,930	10,217
26	Unemployment compensation		
27	Flood insurance premiums		
28	Total Other (specify in Remarks section)	8,930	0
28a	Add-on for Family Self Sufficiency Program		
28b	Other Add-ons for Federal law or regulations		
28c	Unit reconfiguration		
28d	Non-dwelling units		
28e	Other approved, not Federal law or regulation		
29	Total add-ons (sum of lines 25 thru 28)	8,930	10,217

ALMA HOUSING AUTHORITY

Line No.	Description	Requested by PHA/HA (PUM)	HUD Modifications (PUM)
Part E. Calculation of Operating Subsidy Eligibility Before Year-End Adjustments			
30	Deficit or (Income) before year-end adjustments (total of lines 24 and 29)	475,199	480,041
31	<input checked="" type="checkbox"/> Actual or <input type="checkbox"/> Estimated PUM cost of independent Audit (IA) during subject fiscal year	3,700	
32	PFS operating subsidy eligibility before year-end adjustments (greater of line 30 or line 31) (If less than zero, enter zero (0))	475,199	480,041
Part F. Calculation of Operating Subsidy Approvable for Subject Fiscal Year (Note: Do not revise after the end of the subject FY)			
33	Prior years' net year-end adjustments (Identify in individual FYs and amounts under "Remarks")		
34	Additional subject fiscal year operating subsidy eligibility (specify)		
35	Overobligations from prior fiscal years to be recovered in subject fiscal year		
36	Unfunded eligibility in prior fiscal years to be obligated in subject fiscal year		
37	Other (specify)		
38	Other (specify)		
39	Other (specify)		
40	Unfunded portion due to proration 1.5%	(7,128)	< 7,201 >
41	Operating subsidy approvable for subject fiscal year (total of lines 32 thru 40)	468,071	472,840
HUD Use Only (Note: Do not revise after the end of the subject FY)			
43	Amount of operating subsidy approvable for subject fiscal year not funded		
44	Am't. of funds obligated in excess of operating subsidy approvable for subject fiscal year		
45	Funds obligated in subject fiscal year (total of lines 41 thru 44) <small>(Must be the same as line 490 of the Operating Budget, form HUD-52584, for the subject fiscal year)</small>		472,840
Part G. Memorandum of Amounts Due HUD, Including Amounts on Repayment Schedules			
46	Total amt. due in previous fiscal year (line 49 of form HUD-52723 for previous fiscal year)		
47	Total amount to be collected in subject fiscal year (Identify individual amounts under "Remarks")		
48	Total additional amount due HUD (Include any amount entered on line 44) (Identify individual amounts under "Remarks")		
49	Total amount due HUD to be collected in future fiscal year(s) (Total of lines 46 thru 48) (Identify individual amounts under "Remarks")		
Part H. Calculation of Year-end Adjustment for Subject Fiscal Year			
This part is to be completed only after the subject fiscal year has ended			
50	Indicate the types of adjustments that have been reflected on this form: <input type="checkbox"/> Utility Adjustment <input type="checkbox"/> Target Investment Income (TII) Adjustment <input type="checkbox"/> Adjustment of Independent Audit (IA) Cost <input type="checkbox"/> Unit Months Available (UMAs) <input type="checkbox"/> Dwelling Rental Income <input type="checkbox"/> Add-ons <input type="checkbox"/> Other (specify under "Remarks")		
51	Estimated Investment Income (EII)		
52	Target Investment Income (TII)		
53	TII adjustment (line 51 minus line 52)		
54	Utility adjustment (line 22, form HUD-52722-B)		
55	Combined utility and TII adjustment (total of lines 53 and 54)		
56	Deficit or (Income) after year-end adjustments (total of lines 30 and 55)	475,199	Ø
57	PFS operating subsidy eligibility after year-end adjustments (greater of line 31 or line 56)	475,199	Ø
58	Line 32 of latest form HUD-52723 approved during subject FY (Do not use line 32 of this revision)		
61	Net year-end adjustment for subject fiscal year (line 57 minus line 58)	475,199	Ø
62	Unfunded portion due to proration		
63	Prorated net year-end adjustment for subject fiscal year		

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Signature of Authorized HA Representative & Date: <i>X Kathleen McKewine</i> 03/24/2000	Signature of Authorized Field Office Representative & Date: <i>Julia Dawson</i> 5/17/2000 for Judy Wojcickowski, Director
--	---

CALCULATION OF TARGETED AND ESTIMATED INVESTMENT INCOME

CASH BALANCES

ALMA HOUSING AUTHORITY													
	1/31/99	2/28/99	3/31/99	4/30/99	5/31/99	6/30/99	7/31/99	8/31/99	9/30/99	10/31/99	11/30/99	12/31/99	TOTALS
General Fund - Cash	51,274	20,217	15,943	21,540	84,093	65,590	87,104	98,473	107,535	91,947	142,652	76,551	862,911
General Fund - MOD	204	204	204	33,654	131	204	204	204	3,356	63	63	63	38,551
Petty Cash Fund	100	100	100	100	100	100	100	100	100	100	100	100	1,200
Charge Fund	300	300	300	300	300	300	300	300	300	300	300	300	3,600
General Investment	23,221	23,221	23,221	23,221	23,221	23,221	23,221	23,221	23,221	23,221	23,221	23,221	308,651
Total Monthly Cash Balance	75,099	44,042	39,768	78,815	107,845	89,415	110,929	122,298	134,512	115,631	166,336	130,235	1214,921

Summarization of monthly cash balances divided by 12 months = Average Monthly Cash Balance \$ 101,244

If the Average Monthly Cash Balance is less than \$10,000 no further calculations are required.

If the Average Cash Balance is greater than or equal to \$10,000 then multiply the estimated adjusted average 91 day Treasury Bill Rate (listed below) by the Average Monthly Cash Balance. This figure (obtain PUM) should be entered on Line 11, Interest on General Fund Investments, of Form HUD 52721A, Calculation of Performance Funding System Operating Subsidy.

$$\begin{array}{r}
 \underline{91,244} \\
 \text{Average Monthly} \\
 \text{Cash Balance}
 \end{array}
 \times
 \begin{array}{r}
 \underline{4.64} \\
 \text{Adjusted Average} \\
 \text{91-day Treasury} \\
 \text{Bill Rate}
 \end{array}
 = \$
 \begin{array}{r}
 \underline{4,234} \\
 \text{Total Unit} \\
 \text{Months}
 \end{array}
 \div
 \begin{array}{r}
 \underline{3,576} \\
 \text{Total Unit} \\
 \text{Months}
 \end{array}
 = \$
 \begin{array}{r}
 \underline{01.18400} \\
 \text{Record this figure} \\
 \text{on Line 11 of HUD} \\
 \text{52721A (Carry out} \\
 \text{decimal 5 places)}
 \end{array}$$

Cash Flow Projection
Housing Authority of the City of **Alma, GA**
Project No. **GA-133-001-000**

Fys 12-31-2000

OPERATING RECEIPTS	Budget	January	February	March	April	May	June	July	August	September	October	November	December
Rental Income	216,740	18,065	18,065	18,065	18,065	18,065	18,065	18,065	18,065	18,065	18,065	18,065	18,065
Interest	4,240	353	353	353	353	353	353	353	353	353	353	353	357
Other	4,600	383	383	383	383	383	383	383	383	383	383	383	387
TOTAL INCOME	225,620	18,801	18,809										
OPERATING EXPENSES													
Adm. Expenses	155,250	12,937	12,937	12,937	12,937	12,937	12,937	12,937	12,937	12,937	12,937	12,937	12,943
Tenant Services	18,260	1,521	1,521	1,521	1,521	1,521	1,521	1,521	1,521	1,521	1,521	1,521	1,529
Utilities	74,300	6,191	6,191	6,191	6,191	6,191	6,191	6,191	6,191	6,191	6,191	6,191	6,199
Maint. Labor	149,710	12,475	12,475	12,475	12,475	12,475	12,475	12,475	12,475	12,475	12,475	12,475	12,485
Maint. Materials	21,000	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750
Maint. Contract Costs	85,550	7,129	7,129	7,129	7,129	7,129	7,129	7,129	7,129	7,129	7,129	7,129	7,131
Protective Services		0	0	0	0	0	0	0	0	0	0	0	0
Insurance	41,300	10,000	0	10,000	0	0	10,000	0	0	11,300	0	0	0
PILOT	14,060	0	0	0	0	13,730	0	0	0	0	0	0	330
Employer Benefits	80,180	6,681	6,681	6,681	6,681	6,681	6,681	6,681	6,681	6,681	6,681	6,681	6,689
Collection Losses	12,410	0	0	3,000	0	0	0	0	0	3,000	0	0	6,410
Extraordinary Maint.	1,400	0	1,400	0	0	0	0	0	0	0	0	0	0
Replacement of Equip.	33,350	0	0	0	15,000	0	0	18,350	0	0	0	0	0
Betterments & Additions	1,450	0	0	0	0	0	0	0	0	0	0	0	1,450
Accts. Payable	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Expenses/Acct. Payable	688,220	58,684	58,084	61,684	63,684	62,414	58,484	67,034	48,684	62,984	48,684	48,684	56,916
Net Diff. (Plus or Minus)	(462,600)	(39,883)	(31,283)	(42,883)	(44,883)	(43,613)	(39,683)	(48,233)	(29,883)	(44,183)	(29,883)	(29,883)	(38,107)
& For Subsidy Payment	468,071	42,126	32,765	42,126	46,807	42,126	42,126	46,807	28,084	45,807	28,084	28,084	42,126
		0.09	0.07	0.09	0.10	0.09	0.09	0.10	0.06	0.10	0.06	0.06	0.09

Certification of Payments to Influence Federal Transactions

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

Applicant Name

ALMA HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

Operating Subsidy

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Kathleen M. Revene

Title

Executive Director

Signature

X 

Date

March 24, 2000

CERTIFICATE

I, Kathleen M. Revene, the duly appointed,
qualified and acting Secretary of the Alma Housing Authority,
do hereby certify that the attached extract from the minutes of the
regular meeting of the Commissioners of the Authority,
held on March 21, 2000, is a true and correct copy
of the original minutes of said meeting on file and of record inso-
far as said original minutes relate to the matters set forth in said
attached extract, and I do further certify that the copy of the
Resolution appearing in said attached extract is a true and correct
copy of the Resolution adopted at said meeting and on file and of
record.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of
said Authority this 24th day of March, 2000

Kathleen M. Revene
Secretary

(SEAL)

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

ALMA HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

Operating Subsidy

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Kathleen M. Revene

Title

Executive Director

Signature

X *Kathleen M. Revene*

Date

March 24, 2000

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Alma Housing Authority

Program/Activity Receiving Federal Grant Funding

Operating Subsidy, Capital Fund, PHDEP

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

- (1) Abide by the terms of the statement; and
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

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(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Randy Welty

Signature

X

Title

Executive Director

Date

1/19/89

ALMA HOUSING AUTHORITY
401 East 12th Street
Post Office Box 190
Alma, GA 31510-0190
Operating Subsidy, Capital Fund, PHDEP, PHTA

Queen City Heights, GA06P133001
3rd, 4th, 5th, Worth, Wayne and Ware Streets
Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY
401 East 12th Street
Post Office Box 190
Alma, GA 31510-0190
Operating Subsidy, Capital Fund, PHDEP, PHTA

Queen City Heights, GA06P133002
14th and 15th Streets
Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy, Capital Fund, PHDEP, PHTA

Washington Heights, GA06P133003

Pope, Bead and 20th Streets

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy, Capital Fund, PHDEP, PHTA

Sun City Courts, GA06P133004

401 East 12th Street

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY
401 East 12th Street
Post Office Box 190
Alma, GA 31510-0190
Operating Subsidy, Capital Fund, PHDEP, PHTA

Sun City Courts, GA06P133005
Worth Street
Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy, Capital Fund, PHDEP, PHTA

Sun City Terrace, GA06P133006

Stewart, 7th and Baker Streets

Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY
401 East 12th Street
Post Office Box 190
Alma, GA 31510-0190
Operating Subsidy, Capital Fund, PHDEP, PHTA

Albert Pitts Homes, GA06P133007
12th, 14th, Miller and Baker Streets
Alma, Bacon, Georgia 31510

ALMA HOUSING AUTHORITY

401 East 12th Street

Post Office Box 190

Alma, GA 31510-0190

Operating Subsidy, Capital Fund, PHDEP, PHTA

Wilfred B. Smith Terrace, GA06P133008

Mullis Drive and 16th Street

Alma, Bacon, Georgia 31510

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Alma Housing Authority

Program/Activity Receiving Federal Grant Funding

Operating Subsidy, Capital Fund, PHDEP

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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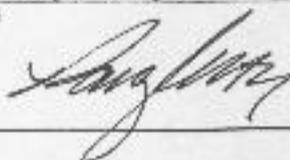
I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Randy Welty

Signature



X

Title

Executive Director

Date

2/16/01

CERTIFICATION

I, Kathleen M. Revene, the Executive Director of
the Housing Authority of the City of Alma,
(the Authority), do hereby certify that the Authority:

1. Is in compliance with the requirement of Section 207 (A), Part II, of the Annual Contributions Contract;
2. Is in compliance with the reexamination of family income and composition requirements contained at Title 24 CFR Part 960 Section 209; and,
3. Is in compliance with the annual income reexamination requirements, and that rents have been, or will be, adjusted in accordance with Title 24 CFR Part 913.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of
this Authority this 24th day of March,
2,000.

HOUSING AUTHORITY OF THE CITY OF
ALMA

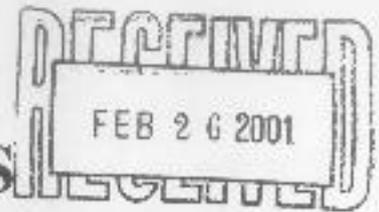
BY:

Kathleen M. Revene
EXECUTIVE DIRECTOR

SEAL



GEORGIA DEPARTMENT OF
COMMUNITY AFFAIRS



Jim Higdon
COMMISSIONER

Roy E. Barnes
GOVERNOR

February 22, 2001

Mr. Randy Welty
Executive Director
Alma Housing Authority
401 East Twelfth Street
P.O. Box 190
Alma, GA 31510-0190

Re: Public Housing Authority Plan Certification of Consistency

Dear Mr. Welty:

Please find enclosed a signed Certification of Consistency with the State of Georgia Consolidated Plan for the Public Housing Agency Plan prepared for the Housing Authority of the City of Alma. Should you have any questions, please contact me at (404) 679-0660.

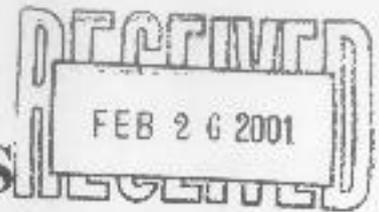
Sincerely,

Don Watt
Special Assistant, Housing Finance Division

Enclosure



GEORGIA DEPARTMENT OF
COMMUNITY AFFAIRS



Jim Higdon
COMMISSIONER

Roy E. Barnes
GOVERNOR

February 22, 2001

Mr. Randy Welty
Executive Director
Alma Housing Authority
401 East Twelfth Street
P.O. Box 190
Alma, GA 31510-0190

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Sincerely,

Don Watt
Special Assistant, Housing Finance Division

Enclosure



GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS

Jim Higdon
COMMISSIONER

Roy E. Barnes
GOVERNOR

STATE OF GEORGIA CERTIFICATION OF COMPLIANCE WITH THE STATE'S CONSOLIDATED PLAN

I, Jim Higdon, Commissioner, certify that the Annual PHA Plan of the Alma Housing Authority is consistent with the Consolidated Plan of the State of Georgia prepared pursuant to 24 CFR Part 91.

The Annual PHA Plan meet the following priorities as outlined in the State of Georgia's Consolidated Plan:

 X To increase the number of Georgia's low and moderate income households who have obtained affordable, rental housing free of overcrowded and structurally substandard conditions.

 To increase the number of Georgia's low and moderate income households who have achieved and are maintaining homeownership free of overcrowded and structurally substandard conditions.

 X To increase the access of Georgia's Special Need populations to a continuum of housing and supportive services which address their housing, economic, health, and social needs.

 To provide assistance to local governments to meet their non-housing community and economic development needs.

 To increase the access of Georgia's homeless to continuum of housing and supportive services that address their housing, economic, health, and social needs.

 To increase coordination, strengthen linkages and encourage the formation of partnerships between Georgia's private sector housing developers, financial institutions, nonprofit organizations, public sector agencies, foundations, and other providers.

 To increase the capacity and skills of local nonprofit organizations and other providers to offer housing assistance.

 To improve the responsiveness of state and local policies to affordable housing issues.

February 21, 2001
Date

Signature of Public Official Responsible for Submitting Consolidated Plan

Jim Higdon, Commissioner
Print/Type Name

CONTRACT FOR ACCOUNT SERVICES

STATE OF GEORGIA

COUNTY OF BACON KNOW ALL MEN BY THESE PRESENTS:

This Agreement by and between the Housing Authority of the City of Alma, Georgia (hereinafter call the "Authority") and Scott Accounting and Computer Services, Inc. (hereinafter call the "Accountant"), witnesseth that the parties hereto agree as follows:

I.

The Authority hereby retains and employs said Accountant to perform accounting and bookkeeping services as are required under the Preliminary Loan and Annual Contributions Contracts made between the Authority and the Department of Housing and Urban Development. In order to begin this service in an orderly manner, the Authority agrees to furnish the Accountant, if the authority is already operating under the Preliminary Loan Period, Development period or Operation Period, an accurate and currently posted set of general and subsidiary ledgers, balanced to the end of the month prior to the beginning of the accounting services under this contract, and to furnish to the Accountant the following information monthly:

1. Copy of each deposit slip containing a breakdown of rent and security deposits. Deposit slips shall also contain inclusive cash receipt numbers.
2. Voucher copy of each check together with the original of each invoice paid.
3. One copy of Rental Register Summary or Daily Statement of Operations with cumulative totals.
4. One copy of all contracts entered into by the Authority.
5. Bank Statements.
6. One copy of Authority's approved Development Program, Modernization Budgets, CGP Budgets, Development Cost Budget and/or Management Budgets and revisions thereof.
7. Transcript of Insurance Register as of the date of the beginning of the accounting service, and one conformed copy of each subsequent policy and any renewals thereof when received for the insurer.
8. All Fiscal Agent statements, notes, and copies of all correspondence which has to do with either temporary or permanent financing, including reports HUD 52910, HUD 52943, and HUD 52939.
9. A list of non-expendable equipment which is balanced to the related



GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS

Jim Higdon
COMMISSIONER

Roy E. Barnes
GOVERNOR

STATE OF GEORGIA CERTIFICATION OF COMPLIANCE WITH THE STATE'S CONSOLIDATED PLAN

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 To increase the access of Georgia's homeless to continuum of housing and supportive services that address their housing, economic, health, and social needs.

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 To improve the responsiveness of state and local policies to affordable housing issues.

February 21, 2001
Date

Signature of Public Official Responsible for Submitting Consolidated Plan

Jim Higdon, Commissioner
Print/Type Name

CONTRACT FOR ACCOUNT SERVICES

STATE OF GEORGIA

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I.

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1. Copy of each deposit slip containing a breakdown of rent and security deposits. Deposit slips shall also contain inclusive cash receipt numbers.
2. Voucher copy of each check together with the original of each invoice paid.
3. One copy of Rental Register Summary or Daily Statement of Operations with cumulative totals.
4. One copy of all contracts entered into by the Authority.
5. Bank Statements.
6. One copy of Authority's approved Development Program, Modernization Budgets, CGP Budgets, Development Cost Budget and/or Management Budgets and revisions thereof.
7. Transcript of Insurance Register as of the date of the beginning of the accounting service, and one conformed copy of each subsequent policy and any renewals thereof when received for the insurer.
8. All Fiscal Agent statements, notes, and copies of all correspondence which has to do with either temporary or permanent financing, including reports HUD 52910, HUD 52943, and HUD 52939.
9. A list of non-expendable equipment which is balanced to the related

Development Cost or property Ledger Account as of the date of the beginning of the accounting service.

10. Other financial documents as may be requested by the accountant.

II.

During the continuance of this contract, the Accountants shall:

1. Devote the time and attention necessary to ensure the performance of the work in an accurate and timely manner.
2. Visit the Authority as requested by the Board or Executive Director.
3. Perform all operations necessary to maintain the general ledgers and subsidiary ledgers for the Authority; and to prepare, maintain or furnish, as applicable, the necessary financial reports and records.
4. Pay for all administrative expenses involved in maintaining the books of account.
5. Adequately protect the Authority's books and records in his possession including heat resistant file cabinets meeting the requirements of current Federal Specifications.
6. Arrange to have the books, records and files in his possession returned to the Authority for HUD auditors during scheduled reviews or at HUD's request.
7. Prepare the following reports:
 - A. Preliminary Loan Period:
 - Prepare Form HUD 52601-Balance Sheet semi-annually
 - Prepare Form HUD 52602-Statement of Preliminary Planning quarterly
 - Prepare Reconciliation of Bank Statement monthly
 - Prepare Complete Financial Statements monthly
 - Maintain Property Ledger
 - Maintain Insurance Register
 - B. Development Period:
 - Prepare Form 52399-Development Cost Control Statement quarterly
 - Prepare Form HUD 52595-Balance Sheet annually
 - Prepare Form HUD 52603-Statement of Initial Operating Income and Expenses-EIOP
 - Prepare Reconciliation of Bank Statement monthly
 - Prepare Complete Financial Statement monthly

Maintain Property Ledger
Maintain Insurance Register
Prepare or assist in preparation of Development budget in Accordance with HUD regulations.
Prepare Actual Development Cost Certificate and Statement in accordance with HUD regulations.

- C. Operating Period:
- Prepare Form HUD 52266-State and Voucher for Accruing Annual Contribution annually
 - Prepare Form HUD 52267-Computation of Payment in Lieu of Taxes annually
 - Prepare Form HUD 52399-Development Cost Control Statement quarterly
 - Prepare Form HUD 52595-Balance Sheet annually
 - Prepare Form HUD 52596-Statement of Income and Expense and Changes in Surplus or Deficit from Operations annually
 - Prepare Form HUD 52598-Analysis of Non-Routine Expenditures semi-annually
 - Prepare Form HUD 52599-Statement of Operating Receipts and Expenditures semi-annually
 - Prepare Reconciliation of Bank Statements monthly
 - Maintain Property Ledger
 - Maintain Insurance Register
 - Prepare Operating Budgets and Revisions to the Operating budgets, including PFS calculations, utilities and investment adjustment within time frames established by HUD regulations.
 - Prepare Form HUD 52382-if homeownership

- D. Supplemental Services:
Depending on availability of time and at the request of the Authority, the Accountant will also perform the following services at an additional fee.

- a. If the Authority's books and records are not currently posted as of the date of transfer of the accounting functions to the accountant, the Authority may employ the Accountant to do all of the work necessary to bring the books and records to a current condition.
- b. Attendance at the authority's Board Meetings and visits as requested by the Authority.

Direct Disbursement Payment Schedule Data Operating Subsidies Public Housing Program

(See Instructions for Public Reporting Statement)

U.S. Department of Housing
and Urban Development
Office of Housing
Federal Housing Commissioner

OMB Approval No. 2577-0028 (Exp. 5/31/2007)

Line 01	Project No. <u>GA123001000</u>	Public Housing Agency (PH)/Indian Housing Authority (IHA) <u>Alma Housing Authority</u>	Original <input checked="" type="checkbox"/>
Line 02	Fiscal Year End (FYE) (MM/DD/YY) <u>12/31/00</u>	PH/PHA Address <u>P.O. Box 190, Alma, GA 31510</u>	Revision No. <input type="checkbox"/>

Part 1 - Eligibility Values

	(a) PH/PHA Request	(b) HUD Modifications
03 Subject Year Eligibility	<u>468,071</u>	<u>480,041</u>
04 <i>Confidential</i> Eligibility		<u>67,201</u>
05 Prior Year Adjustment		
06 Total Eligibility	<u>468,071</u>	<u>472,840</u>

	(a) FCM Costs	(b) Obligated Amount	(c) Retained Amount	(d) Scheduled Amount	(e) Funds Available But Not Scheduled
07a PH/PHA Req.	<u>PFS</u>	<u>468,071</u>		<u>472,840</u>	
07b HUD Modif.	<u>PFS</u>	<u>472,840</u>			
08a PH/PHA Req.					
08b HUD Modif.					
08a PH/PHA Req.					
08b HUD Modif.					
10a Totals		<u>468,071</u>		<u>472,840</u>	
10b Totals				<u>472,840</u>	

Project No. FA13309100D

Fiscal Year End (FYE) 12/31/00

Line Part II - Payment Entry Selection

11	Program (PGM) Code	PHA/IHA Request <u>PIFS</u>	HUD Modif. <u>PIFS</u>	
12	Type of Payment Entry (Check one):	<input type="checkbox"/>	<input type="checkbox"/>	Manual Entry (Go to Part VI)
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	System Calculation with Equal Monthly Payments
		<input type="checkbox"/>	<input type="checkbox"/>	System Calculation with Unequal Monthly Payments

Part III - System Calculation of Payment Schedule

Payments Within Month

13	Payments Equal Within Month? (Check Y or N)	PHA/IHA Req.	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/>	
		HUD Modif.	<input type="checkbox"/>		<input type="checkbox"/>	
14	Pay Dates Within Month:	PHA/IHA Req.	<u>03</u> ¹	<u>05</u> ²	<u>08</u> ³	<u>10</u> ⁴
		HUD Modif.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Payment Percentages Within Month:	PHA/IHA Req.	<u>25</u> %	<u>25</u> %	<u>25</u> %	<u>25</u> %
		HUD Modif.	<input type="checkbox"/> %	<input type="checkbox"/> %	<input type="checkbox"/> %	<input type="checkbox"/> %

Monthly Payment Allocation

16 Percentage Payment for Each Month:

	1	2	3	4	5	6	7	8	9	10	11	12
16a	Month: <u>JAN</u> <u>FEB</u> <u>MAR</u> <u>APR</u> <u>MAY</u> <u>JUN</u> <u>JUL</u> <u>AUG</u> <u>SEP</u> <u>OCT</u> <u>NOV</u> <u>DEC</u>											
16b	PHA/IHA Req.	<u>09</u>	<u>07</u>	<u>09</u>	<u>10</u>	<u>09</u>	<u>10</u>	<u>06</u>	<u>10</u>	<u>06</u>	<u>06</u>	<u>09</u>
	HUD Modif.	<input type="checkbox"/>										

Project No. GA133001000

Fiscal Year End (FYE) 12/31/00

Part VII-Certification of Public Housing Agency/Indian Housing Authority

I certify that all applicable provisions of the Annual Contributions Contract covering the above numbered project(s) have been complied with by this PHA/IHA and that this form HUD-52721 and all supporting forms and documentation have been examined by me and to the best of my knowledge and belief are true, correct and complete and in accordance with all applicable HUD regulations and requirements including those relating to cash management.

False Claims statement: Warning: U.S. Code, Title 31, Section 3729, False Claims, provides a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages for any person who knowingly presents, or causes to be presented, a false or fraudulent claim; or who knowingly makes, uses or causes to be used, a false record or statement; or conspires to defraud the Government by getting a false or fraudulent claim allowed or paid.

Name of PHA/IHA
Alma Housing Authority

Signature and Title of Official Authorizing to Certify
Kathleen M. Revere

Executive Director

Date
03/24/2000

PHA/IHA Comments

HUD Use Only

Field Office Approval

Field Office Name
MEMPHIS TARC

Signature and Title of Field Office Official
Charles T. Russell
Judy Wojciechowski, Director

Date
5/17/2000

Field Office Comments

Entered into	By	Date	Time
LOCCS			

DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET

Approved by OMB
0348-0046

Reporting Entity: Alma Housing Authority

Page 2 of 2

None

Instructions for Completion of SF-LLL, Disclosure of Lobbying Activities

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or any employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient, include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in Item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box (es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box (es). Check all boxes that apply. If other, specify nature.
14. Provide specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just the time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a continuation sheet(s) are attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public Reporting Burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Please do not return your completed form to the Office of Management and Budget; send it to the address provided by the sponsoring agency.

Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

EXTRACT FROM MINUTES OF MEETING

EXTRACT FROM THE MINUTES OF A Regular
MEETING OF THE Board of Commissioners
OF THE Alma Housing Authority
HELD ON THE 21st DAY OF March, 2000

The Board of Commissioners of the Alma
Housing Authority met in Regular meeting
at 401 East 12th Street in the City of
Alma, Georgia, at the place, hour, and date
duly established for the holding of such meeting.

The Chairperson called the meeting to order and on
roll call the following answered present:

Mark Johnson
Kay Lee
Lucy Fedrick
Rosie Williams

And the following were absent:

Frank Smith
John Larry Sweat

The Chairperson declared a quorum present.

HA Calculation of Occupancy Percentage for a Requested Budget Year (RBY)

PHA/HA-Owned Rental Housing Performance Rating System (PFS)

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

OMB Approval No. 2577-0066 (Exp. 8/31/7)

1a. Name of PHA/HA: Alma Housing Authority			2a. Contact: (Person who can best answer questions about this submission) Deborah Blair		
1b. Street Address: P.O. Box 190			2b. Contact's Phone No: (include area code) (256) 329-1205		
1c. City: Alma	1d. State: GA	1e. Zip Code: 31510-0190	6. Report Date: (month/day/yr) <input checked="" type="checkbox"/> Actual Day <input type="checkbox"/> Average for Actual Month		7. Data Source: <input checked="" type="checkbox"/> form HUD-51234 <input type="checkbox"/> Rent Roll Records
3. RBY Beginning Date: (month/day/yr) 1-1-00	4. Type of Submission: <input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No. ()	5. PASADOCCS Project No: GA-133-001-000			

Part A. Actual Occupancy Data as of Report Date

8. Units Occupied	200
9. Units Available	322
10. Actual Occupancy Percentage (Divide line 8 by line 9; multiply by 100 and round to nearest whole)	62
11. If the HA-wide occupancy percentage shown on line 10 is 97% or greater and the HA believes that an average occupancy rate of at least 97% is sustainable for the RBY, then check the box below. You have completed the form and do not need to proceed further. <input type="checkbox"/> High Occupancy HA: Occupancy Percentage is 97% or higher and is sustainable for the RBY → Use 97% as the Projected Occupancy Percentage on line 17 of form HUD-52723	
12. Units vacant as of Report Date (subtract line 8 from line 9 and enter result)	122
13. If the result on line 12 is five or fewer vacant units and the HA believes that during the RBY: 1) the inventory (line 9) will not change and, 2) the number of vacant units on line 12 will be vacant for the full RBY, then check the box below. You have completed the form and do not need to proceed further. <input type="checkbox"/> High Occupancy HA with five or fewer vacant units → Use line 10 for the Projected Occupancy Percentage on line 17 of form HUD-52723	

Part B. Distribution of Actual Vacancies By Major Cause

Given below are circumstances and actions recognized by HUD as possible causes of vacancies that are beyond the control of the HA to correct. If appropriate, please distribute the number of vacant units reported on line 12 among these causes. Attach sheet identified with HA name and address, the RBY beginning date, and ACC number. Use sheet to describe, for each circumstance; when the circumstance occurred; the location of the units involved; why the circumstance prevented the HA from occupying, selling, demolishing, rehabilitating, reconstructing, consolidating or modernizing the vacant units; the likelihood that these circumstances will be mitigated or eliminated in the RBY.

14. Units vacant because of litigation (e.g., units that are being held vacant as part of court ordered or HUD-approved desegregation plan)	
15. Units vacant because of Federal, Tribal, or State laws of general applicability. (Note: do not include units vacant only because they do not meet minimum construction or habitability standards.)	
16. Units vacant due to changing market conditions	20
17. Units vacant because of natural disaster	
18. Units vacant because of insufficient funding for otherwise approvable CIAP application	
19. RMC-managed units vacant because of failure of HA to fund approvable request for Federal modernization funding (This line for use only by RMCs)	
20. Units vacant because of casualty loss and need to settle insurance claims	
21. Total Units Vacant Due To Circumstances Beyond The HA's Control (Enter sum of lines 14 - 20)	20
22. Units vacant after adjusting for circumstances beyond the HA's control (Subtract line 21 from line 12)	102
23. If the result on line 22 is five or fewer vacant units and the HA believes that during the RBY: 1) the inventory (line 9) will not change and, 2) the number of vacant units on both lines 21 and 22 will be vacant for the full RBY, then check the box below. You have completed the form and do not need to proceed further. <input type="checkbox"/> High Occupancy HA with five or fewer vacant units after adjustment for vacancies beyond its control → Use line 10 for the Projected Occupancy Percentage on line 17 of form HUD-52723	
24. Vacancy Percentage after adjusting for beyond control circumstances (Divide line 22 by line 9, multiply by 100, and round to nearest whole)	32
25. If the result on line 24 is 3% or less and the HA believes that during the RBY: 1) the inventory (line 9) will not change; and, 2) number of vacant units on lines 21 and 22 will be vacant for the full RBY, then check the box below. You have completed the form and do not need to proceed further. <input type="checkbox"/> High Occupancy HA: 3% or less vacancy rate after adjustment for vacancies beyond control → Use line 10 for the Projected Occupancy Percentage on line 17 of form HUD-52723	

Part C. Status of Units Undergoing Modernization as of Report Date. If changes occur after the Report Date but prior to submission of this form, the most current status will be shown.

Protected Units	Occupied Units	Vacant Units
Number of units that are under modernization construction (contract awarded or force account work started)	42	32
Number of units not under construction contract but included in a HUD-approved modernization budget where the time period for placing the units under construction (two FFYs after FFY of approval) has not yet expired.		
Unprotected Units: Number of units included in a HUD-approved modernization budget where the time period for placing the units under construction (two FFYs after FFY of approval) has expired.		

Part D. Units Estimated to be Available for Occupancy During RBY

	(a) No. of Units	(b) Avg. No. of Mos. in RBY	(c) No. of Unit Mos. (a x b)
Units Available as of Report Date (Enter line 9)	322	12	3864
Additional Units Available During RBY because of Development/Acquisition of PFS-Eligible projects	+		+
Units Unavailable During RBY because of Demolition/Disposition/Conversion Actions Approved By HUD	-		-
Total (Add lines 28 and 29; subtract line 30)	322		3864

Part E. Units Estimated to be Occupied During RBY

	(a) No. of Units	(b) Avg. No. of Mos. in RBY	(c) No. of Unit Mos. (a x b)
Units Occupied as of Report Date (Enter line 8)	200	12	2400
Additional Units Occupied during RBY because of Development/Acquisition of PFS-Eligible Projects	+		+
Reoccupancy during RBY of Units Vacated for Circumstances Beyond the HA's Control	+		+
Reoccupancy during RBY of Vacant Units in a Funded Modernization Program	+		+
Occupied Units in Funded Modernization Program Being Vacated during RBY	-		-
Occupied Units Being Vacated during RBY because of Demolition/Disposition/Conversion Actions Approved by HUD. If there are occupied units that become vacant after the Report Date but before the start of the RBY because of circumstances and actions beyond the HA's control, place that number here () and include in total shown on 37. Attach separate sheet with same information requested in Part C.	-		-
Total (Add lines 32-35; subtract lines 36 and 37)	200		2400

Part F. Occupancy Percentage During RBY

39. Total Unit Months of Occupancy (Enter line 39c)	2400
40. Total Unit Months Available for Occupancy (Enter line 31c)	3864
41. Occupancy Percentage for RBY (Divide line 39 by line 40; multiply by 100 and round to nearest whole)	62 %
42. Average Number of Vacant Units During RBY (Subtract line 39 from line 40; divide result by 12 and round to nearest whole)	122

Stop & Note 43. If the result on line 41 is 97% or higher or if the result on line 42 is five or less, then check the appropriate box below. You have completed the form and do not need to proceed further.

a. High Occupancy HA: Occupancy Percentage is 97% or higher for the RBY → Use 97% as the Projected Occupancy Percentage on line 17 of form HUD-52723

b. High Occupancy HA with five or fewer vacant units → Use line 41 for the Projected Occupancy Percentage on line 17 of form HUD-52723

Part G. Vacancy Percentage for RBY Adjusted for Modernization

44. Total Unit Months of Vacancy in RBY (Enter line 40 less line 39)	1464
45. Total Unit Months for Vacant Units in Funded Mod. and Under Construction or Funded for Construction (Sum the vacant units of lines 26a and b; multiply by 12)	384
46. If any of the vacant units on lines 26a or b will be reoccupied during the RBY, enter that number times the average number of months during the RBY these units will be reoccupied.	-
47. If any of the occupied units on lines 26a or b will be vacated during the RBY for mod. construction, enter that number times the average number of months during the RBY these units will be vacated.	+
48. Total Unit Months for Vacant Units in Funded Mod. and Under Construction or Funded For Construction in RBY (Add line 45; less line 46; plus line 47)	384
49. Total Unit Months of Vacancy in RBY Adjusted for Modernization (Enter line 44 less line 48)	1080
50. Vacancy Percentage for RBY Adjusted for Modernization (Divide line 49 by line 40; multiply by 100; and round to nearest whole.)	28 %
51. Average Number of Vacant Units in RBY Adjusted for Modernization (Divide line 49 by 12; round to nearest whole)	90

Stop & Note 52. If the result on line 50 is 3% or lower or if the result on line 51 is five or less, then check the appropriate box below. You have completed the form and do not need to proceed further.

a. High Occupancy HA: Vacancy Percentage is 3% or less for the RBY after Modernization Adjustment → Use line 41 as the Projected Occupancy Percentage on line 17 of form HUD-52723

b. High Occupancy HA: five or fewer vacant units after Modernization Adjustment → Use line 41 for the Projected Occupancy Percentage on line 17 of form HUD-52723

Vacancy Percentage for RBY Adjusted for Both Modernization and Beyond Control Circumstances		1464
Total Unit Months of Vacancy in RBY (Enter line 44)		384
Total Unit Months of Vacancy in RBY Due to Modernization (Enter line 48)		
Total Unit Months of Vacancy in RBY Due to Beyond Control Vacancies (Enter line 21 times 12; less any entry made on line 24c)		240
Total Unit Months of Vacancy After Above Adjustments (Enter line 53 less lines 54 and 55)		840
Vacancy Percentage for RBY After Above Adjustments (Divide line 56 by line 40; multiply by 100; and round to nearest whole.)		22 %
Average Number of Vacant Units in RBY After Above Adjustments (Divide line 56 by 12; round to nearest whole)		70

59. If the result on line 57 is 3% or lower or if the result on line 58 is five or less, then check the appropriate box below. You have completed the form and do not need to proceed further.

a. High Occupancy HA: Vacancy Percentage is 3% or less for the RBY after Modernization Adjustment → Use line 41 as the Projected Occupancy Percentage on line 17 of form HUD-52723

b. High Occupancy HA: five or fewer vacant units after Modernization Adjustment → Use line 41 for the Projected Occupancy Percentage on line 17 of form HUD-52723

Adjustment for Long Term Vacancies If the HA estimates that it will have a vacancy percentage of more than 3% for its RBY and than five vacant units after adjusting for vacant units undergoing modernization and vacancies beyond its control, the HA will exclude all of long-term vacancies (if any) from its count of units available for occupancy and use this section to determine its projected occupancy percentage.

Total Long-Term Vacancies (Subtract vacant units shown on lines 21, 26a, and b from line 12. Analyze remaining vacancies and identify those units that have been vacant for more than 12 months as of the Report Date.)		0
Total Months of Vacancy Associated With Long-Term Vacancies (Multiply line 60 by 12)		0
Total Unit Months Available for Occupancy in RBY Adjusted for Long-Term Vacancies (Subtract line 61 from line 31(c)). Use this UMA number in all other PFS calculations.		3864
Occupancy Percentage for RBY Adjusted for Long-Term Vacancies (Divide line 38(c) by line 62; multiply by 100 and round to nearest whole)		62 %
Average Number of Vacant Units in RBY after All Adjustments (Subtract line 60 from line 58)		70
Total Unit Months of Vacancy in RBY after All Adjustments (Subtract line 61 from line 56)		840
Vacancy Percentage for RBY Adjusted for Long-Term Vacancies (Divide line 65 by line 62; multiply by 100 and round to nearest whole)		22 %

67. If the result on line 63 is 97% or higher or if the result on line 64 is five or less or if the result on line 66 is 3% or less, then check the appropriate box below. You have completed the form and do not need to proceed further.

a. High Occupancy HA: Occupancy Percentage is 97% or higher for the RBY after Long-Term Vacancies Adjustment → Use 97% as the Projected Occupancy Percentage on line 17 of form HUD-52723. Use the UMA result on line 62 in calculating PFS eligibility.

b. High Occupancy HA: Five or fewer vacant units after Adjustment for Long-Term Vacancies → Use line 63 as the Projected Occupancy Percentage on line 17 of form HUD-52723. Use the UMA result on line 62 in calculating PFS eligibility.

c. High Occupancy HA: Vacancy Percentage is 3% or lower for the RBY after Long-Term Vacancies Adjustment → Use line 63 as the Projected Occupancy Percentage on line 17 of form HUD-52723. Use the UMA result on line 62 in calculating PFS eligibility.

I. J. Projected Occupancy Percentages for Low Occupancy HAs If the HA cannot determine an acceptable Projected Occupancy Percentage for the RBY using the above approach, it will use this section. The HA will use the lower of either 97% or that percentage based on five vacant units. Either percentage can be adjusted for vacant units undergoing modernization construction and vacancies beyond its control. Small HAs of 140 units or less will generally want to use a percentage based on five vacant units.

Enter 97% if HA has more than 140 units. If 140 or fewer units, determine occupancy percentage based on 5 vacant units for RBY. (Take 60 unit months and divide by line 62; multiply by 100 and round to nearest whole. Subtract result from 100%)		97 %
Percentage Adjustment for Modernization and Beyond Control Vacancies (Add lines 48 plus 55; divide that sum by line 62; multiply by 100 and round to nearest whole)		16 %
Projected Occupancy Percentage for Low Occupancy HA (Take the percentage on line 69 and subtract the percentage shown on line 69. Use the result as the Projected Occupancy Percentage on line 17 of form HUD-52723. Use the UMA result on line 62 in calculating PFS eligibility)		81 %

INSERT A

ii. Executive Summary of the Annual PHA Plan

{24 CFR Part 903.7 9 (r)}

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

To assist the State of Georgia in meeting its housing needs, the Alma Housing Authority has included the following initiatives and policy changes in this annual plan:

1. **Shortage of affordable housing for all eligible populations**
Maximize the number of affordable units available to the PHA within its current resources by:
 - a. 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
 - Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
 - Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
2. **Assisting families at or below 30% and 50% of median by:**
Adopt rent policies to support and encourage work
3. **Assisting Families with Disabilities by:**
Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
Affirmatively market to local non-profit agencies that assist families with disabilities
4. **Assisting Races or ethnicities with disproportionate housing needs by:**
Increasing awareness of PHA resources among families of races and ethnicities with disproportionate needs by affirmatively market to races/ethnicities shown to have disproportionate housing needs

Factors influencing the Housing Authority's selection of the strategies are:

- Funding constraints
- Staffing constraints
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the housing authority
- Results of consultation with local government
- Results of consultation with residents and the Resident Advisory Board

The Housing Authority has revised its Policies Governing Eligibility, Selection, and Admissions to comply with the Quality Housing and Work Responsibility Act of 1998 and to specifically accomplish the following goals:

- Deconcentration of Poverty and Income-Mixing in Public Housing
- Intensified screening and resident selection criteria to reduce crime and to promote self-sufficiency among the public housing residents
- Promotion of choice in rental payment to encourage higher income residents

Asset management activities during Year 2 of the Agency Plan are:

- Capital improvements in developments GA

Insert B

Admissions and Continued Occupancy Policy and Procedure: The Housing Authority shall grant an exemption from payment of this minimum rent if the family is unable to pay that rent as a result of financial hardship, as described in the responsible entity's written policies.

Financial hardship. The financial hardships shall include the following: suspended the minimum rent requirement immediately, until the Housing Authority determines whether there is a qualifying financial hardship and whether the hardship is long-term.

Determination of Temporary Financial Hardship. If the Housing Authority determines that there is a qualifying hardship, but that it is temporary, the Housing Authority reinstates the minimum rent from the time of suspension. The Housing Authority will not evict the family for nonpayment of the amount of minimum rent in excess of tenant rent otherwise payable during the 90-day period beginning on the date the family requested an exemption. The Housing Authority will offer the family a reasonable payment agreement for the amount of back rent owed.

If the Housing Authority determines there is no qualifying hardship exemption, the Housing Authority shall reinstate the minimum rent including the back payment for minimum rent from the time of suspension on terms and conditions established by the Housing Authority.

The Housing Authority recognizes that this requirement may impose severe hardships for some assisted families that have adjusted monthly incomes so low that their rental obligation is below the "minimum rent" charged. These families may be unable to pay the "minimum rent," which in turn may expose them to eviction for nonpayment.

Therefore the Housing Authority shall take action to ensure that families with severe hardships are not evicted specifically as result of their inability to pay the new minimum rents.

Insert C

General Administration

- Record Maintenance and Disposition
- Travel
- Reasonable Accommodation
- Security
- Safety
- Natural Disaster Response
- Vehicle Policy

Personnel

- Personnel
- Employee Performance and Evaluation
- Annual Salary Schedule

Procurement/Contract Administration

- Procurement
- Delegation of Procurement Authority
- Procurement Code of Ethics
- Documentation and Record Keeping

Financial

- Internal Controls and Financial Management Policy and Procedures
- Accounting Procedures
- Capitalization
- Investment and Cash Management
- Internal Transfer of Funds between PHA Programs
- Uncollectable Tenant Accounts Policy (Write-Off)
- Rent Collection
- Repayment Policy
- Insurance
- Petty Cash Fund
- Accounts Payable
- Inventory
- Disposition of Property
- Financial Documentation and Record Keeping

Socio/Economic

- Minority Business Enterprises Participation
- Non-discrimination Handicap and Disabled
- Section 3
- Record Keeping

Resident

- Resident Initiatives including PHMAP-required areas
- Resident Organization and Recognition
- Resident Participation in Management and Program

Insert C

Admissions and Occupancy

- Fair Housing
- Marketing
- Privacy Policy
- Restrictions on Assistance to Non-Citizen
- One Strike-You're Out
- Eligibility for Admission
- Waiting List Management
- Opening and Closing Waiting List
- Determining if the waiting list may be closed
- Removal of Applicants from the Waiting List
- Processing Applications for Admission
- Deconcentration of Poverty and Income-Mixing in Public Housing
 - Initial assessment and current occupancy
 - Maintaining deconcentration
- Interviews and Verification Process
- Screening and Resident Selection Criteria
- Resident Selection and Assignment Policies
- Eligibility for Continued Occupancy, and Annual Recertification
- Previous Earned Income Disregard
- Procedures to be used in Determining Income/rent and Rent Calculation
 - Income-Based Rents
 - Flat Rents
 - Minimum Rents
 - Rent Decreases
 - Rent Increases
- Security Deposit
- Changes in Family Composition
- Effective Date of Adjustments
- Failure to Report Accurate Information
- Procedure For Establishing Retroactive Charge
- Family Choice
- Family Self-Sufficiency
- Lease Termination/Eviction Procedures
 - Record Keeping Requirements
 - Procedure for Investigating Drug-related and/or Criminal Activity
 - Notice Requirements
- Grievance Procedure
- Housekeeping Inspections
- Resident-Paid Utilities
- Resident's Maintenance and Damages Charges
- Resident Police Officers
- Residents Employed by the Housing Authority
- Residents Use of the Unit for Legal Profit-making Activities
- Pet Policy

Insert C

Procedure for Disposition of Property Due to Death of Resident
Dwelling Lease
Record Keeping

Maintenance

Preventive Maintenance
Work Order Procedures
Infestation Eradication Procedures
Maintenance Safety
Unit Turn Around
Quality Assurance
Energy Audit and Conservation
Maintenance Record Keeping

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

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

OMB Approval No. 2577-0157 (exp. 7/31/06)

HA Name:

Alma Housing Authority

Congressional Grant Number:

GA06P13350100

FY of Grant Approval:

2000

Original Annual Statement Reserve for Disaster/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	Original	Total Estimated Cost Revised 1	Obligated	Total Actual Cost 2 Expended
1	Total Non-CGP Funds				
2	1405 Operations (May not exceed 10% of line 19)	\$62,622.00			
3	1408 Management Improvements	\$24,000.00			
4	1410 Administration				
5	1411 Audit	\$22,285.00			
6	1415 Unsettled Damages				
7	1430 Fees and Costs	\$51,200.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$466,112.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1495 Demolition				
15	1480 Replacement Reserve				
16	1495.1 Relocation Costs				
17	1498 Misc Used for Development				
18	1502 Contingency (may not exceed 8% of line 19)				
19	Amount of Annual Grant (Sum of lines 2-18)	\$626,219.00			
20	Amount of line 18 Related to LBP Activities	53,200.00			
21	Amount of line 19 Related to Section 504 Compliance	0.00			
22	Amount of line 19 Related to Security	32,900.00			
23	Amount of line 19 Related to Energy Conservation Measures	93,600.00			

INFIELD
LD

COPY

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
[Signature] 8/23/00

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
 X

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.

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

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

OMB Approval No. 2517-0157 (exp. 7/31/95)

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	
PHA-Wide	Operations	1406		\$62,622.00				
	Subtotal	1406		<u>\$62,622.00</u>				
PHA-Wide	Staff training	1408		\$12,000.00				
PHA-Wide	Commissioner Training	1408		\$12,000.00				
	Subtotal	1408		<u>\$24,000.00</u>				
PHA-Wide	Mod. Coordinator Salary & Benefits	1410		\$22,285.00				
	Subtotal	1410		<u>\$22,285.00</u>				
GA133-4	A/E design for mod work items including coord. of CGP Budgets (completion of CGP #705)	1430		\$33,200.00				
	Abatement Monitor During Construction	1430		\$18,000.00				
	Subtotal	1430		<u>\$51,200.00</u>				

COPY

Signature of Executive Director & Date:

X *[Signature]*

8/23/00

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

X

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.

Development Number/Name HA-Write 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 ³	Funds Expended ²	
GA133-4	Continuation of work indicated in CGP #705 (Final 16 Units)	1460		\$466,112.00				
	Subtotal	1460		\$466,112.00				

COPY

Signature of Executive Director & Date: *M. H. Adams* 8/23/00
 Signature of Public Housing Director/Office of Native American Programs Administrator & Date: _____
 Page ____ of ____

¹ To be completed for the Performance and Evaluation Report of a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

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

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

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

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	
GA133-4	3/30/03			3/30/05			
PHA-Wide	3/30/03			3/30/05			

COPY

 **COPY**

Signature of Executive Director & Date:

X

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

X

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.

**Capital Fund Program
(CFP) Amendment**
To The Consolidated Annual Contributions Contract
(form HUD-53012)

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

Whereas, (Public Housing Agency) Alma Housing Authority (GA133) (herein called the "PHA") and the United States of America, Secretary of Housing and Urban Development (herein called "HUD") entered into Consolidated Annual Contributions Contract(s) (ACC) Number(s) A-2736 dated _____;

Whereas, HUD has agreed to provide CFP assistance, upon execution of this Amendment, to the PHA in the amount to be specified below for the purpose of assisting the PHA in carrying out capital and management activities in order to ensure that such developments continue to be available to serve low-income families: \$ 626,219 for Fiscal Year 20 00 to be referred to under Capital Fund Grant Number GA06P13350100 for PHA Tax Identification Number (TIN) 58-6014661.

Whereas, HUD and the PHA are entering into this CFP Amendment Number _____.

Now Therefore, the ACC(s) is (are) amended as follows:

1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This amendment is a part of the ACC(s).
2. The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.
3. In accordance with the HUD regulations, the PHA Agency Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the PHA Agency Plan Capital Fund Annual Statement.
4. Subject to the provisions of the ACC(s), and to assist in the capital and management activities, HUD agrees to disburse to the PHA from time to time as needed up to the amount of funding assistance specified above.
5. The PHA shall continue to operate each development as low-income housing in compliance with the ACC(s), as amended, the United States Housing Act of 1937 (the "Act") and all HUD regulations for a period of twenty years after the last disbursement of CFP

assistance for modernization activities and for a period of forty years after the last distribution of CFP assistance for development activities. However, the provisions of Section 7 of the ACC shall remain in effect for so long as HUD determines there is any outstanding indebtedness of the PHA to HUD which arose in connection with any development(s) under the ACC(s) and which is not eligible for forgiveness, and provided further that, for a period of ten years following the last payment of assistance from the operating fund to the PHA, no disposition of any development covered by this amendment shall occur unless approved by HUD.

6. If the PHA does not comply with any of its obligations under this Amendment, HUD may direct the PHA to terminate all work described in the Capital Fund Annual Statement of the PHA Agency Plan. In such case, the PHA shall only incur additional costs with HUD approval.
7. Implementation or use of funding assistance provided under this Amendment is subject to attached Corrective Action Order(s).
(mark one): Yes No
8. The PHA acknowledges its responsibility for adherence to this Amendment by subgrantees to which it makes funding assistance hereunder available.

The parties have caused this Agreement to be effective as of the date of execution on behalf of the United States, as stated below.

U.S. Department of Housing and Urban Development By: _____ Date: _____	PHA Executive Director (Interim) By: <u>Mark A. Johnson</u> Date: <u>7-17-00</u>
Title: _____	Title: <u>INTERIM E.D. / Chairperson</u>

COPY

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(CFP) Amendment**
To The Consolidated Annual Contributions Contract
(form HUD-53012)

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

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U.S. Department of Housing and Urban Development By: _____ Date: _____	PHA Executive Director (Interim) By: <u>M. A. Johnson</u> Date: <u>7-17-00</u>
Title: _____	Title: <u>INTERIM E.D. / Chairperson</u>

Form HUD-52840A (8/95)
ref Handbook 7485.3

Optional 5-Year Action Plan Tables

Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-1	Queen City Heights	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Upgrade electrical (Replace incand. with fluor. lighting)			\$156,000	2001
Increase attic insulation			\$18,200	2001
Replace existing space heater with central HVAC			\$260,000	2001
<p align="center"><i>- INSERT 'E' -</i></p>				
Total estimated cost over next 5 years			\$434,200	

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Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-2	Queen City Heights	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Increase attic insulation			\$3,500	2002
Replace exterior doors/hardware			\$18,500	2002
Replace existing space heater with central HVAC			\$55,000	2002
Install storm doors			\$8,000	2002
Upgrade electrical (Replace incand. with fluor. lighting)			\$30,000	2002
Install hardwired/battery back-up smoke alarm			\$2,500	2002
Replace DWH with energy efficient type			\$3,500	2002
LBP Abatement			\$30,000	2002
Replace windows / screens			\$12,000	2002
Replace roof			\$14,500	2002
Replace porch railings & posts			\$20,000	2002
Replace floor tile			\$12,000	2002
Renovate kitchens			\$55,000	2002
Total estimated cost over next 5 years			(cont.)	



Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-2 (cont.)	Queen City Heights	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Renovate bathrooms			\$48,000	2002
Replace rear entry awning			\$4,500	2002
Replace mailbox			\$1,200	2002
Replace roof valley / repair ceilings			\$5,000	2002
Replace hose bibbs			\$3,500	2002
Construct Resident storage			\$70,000	2002
Remove antenna holder & trash can holder			\$1,000	2002
Replace all interior doors			\$14,500	2002
Install dryer hook-up			\$2,500	2002
Refurbish drying line			\$500	2002
Install hard-wired/battery back-up smoke detectors			\$3,500	2002
Total estimated cost over next 5 years			\$418,700	

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Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-3	Washington Heights	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace existing space heaters with central HVAC			\$275,000	2003
Upgrade electrical (Replace incand. with fluor. lighting)			\$150,000	2003
Total estimated cost over next 5 years			\$425,000	

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Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-4	Sun City Courts	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years			\$0	

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Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-5	Sun City Courts	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Upgrade electrical (Replace incand. with fluor. lighting)			\$36,000	2004
Increase attic insulation			\$4,200	2004
Replace existing gas heat with central HVAC			\$58,778	2004
Install hardwired/battery back-up smoke alarm			\$3,000	2004
Replace DWH with energy efficient type			\$5,700	2004
Install site lighting			\$3,500	2004
Provide resident parking			\$8,000	2004
Total estimated cost over next 5 years			\$119,178	

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Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-6	Sun City Terrace	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Upgrade electrical (Replace incand. with fluor. lighting)			\$93,000	2004
Install hardwired/battery back-up smoke alarm			\$7,750	2004
Install central air condensing unit to existing central heat system			\$139,500	2004
Increase attic insulation			\$10,850	2004
Replace DWH with energy efficient type			\$14,725	2004
Replace roofing			\$44,950	2004
Total estimated cost over next 5 years			\$310,775	

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Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-7	Albert Pitts Homes	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years			\$0	

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Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
GA133-8	Wilfred B. Smith Terrace	0	0.00%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years			50	

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Assistance Award/Amendment

U.S. Department of Housing and Urban Development
Office of Administration

VRS# 00736-18006

1. Assistance Instrument: <input type="checkbox"/> Cooperative Agreement <input checked="" type="checkbox"/> Grant		2. Type of Action: <input checked="" type="checkbox"/> Award <input type="checkbox"/> Amendment	
3. Instrument Number: GA06DEP1330100	4. Amendment Number:	5. Effective Date of Action: SEP 06 2000	6. Control Number:
7. Name and Address of Recipient: Alma Housing Authority, GA133 P.O. Box 190 401 East 12th Street Alma, GA 31510		8. HUD Administering Office: Office of Public Housing Atlanta Office	
9. Recipient Project Manager		10. HUD Government Technical Representative	
11. Assistance Arrangement <input checked="" type="checkbox"/> Cost Reimbursement <input type="checkbox"/> Cost Sharing <input type="checkbox"/> Fixed Price		12. Payment Method <input type="checkbox"/> Treasury Check Reimbursement <input type="checkbox"/> Advance Check <input checked="" type="checkbox"/> Automated Clearinghouse	
		13. HUD Payment Office LOCCS VRS	
14. Assistance Amount:		15. HUD Accounting and Appropriation Data	
Previous HUD Amount: \$		15a. Appropriation Number: 86X0197	15b. Reservation Number:
HUD Amount this action: \$74,039		Amount Previously Obligated \$	
Total HUD Amount: \$74,039		Obligated by this action \$74,039	
Recipient Amount: \$		Total Obligation \$74,039	
Total Instrument Amount: \$74,039			

16. Description:

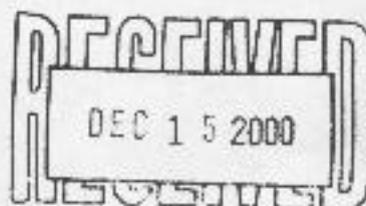
Fiscal Year 2000 Public Housing Drug Elimination Program (PHDEP) Grant Awards.

— INSERT "F" —

17. <input checked="" type="checkbox"/> Recipient is required to sign and return three (3) copies to the HUD administering office.		18. <input type="checkbox"/> Recipient is not required to sign this document.	
18. Recipient (By Name): Mark Johnson Acting Executive Director		19. HUD (By Name):	
Signature, Executive Director <i>Mark A. Johnson</i>	Date (mm/dd/yyyy) 07/26/00	Signature, Director of Public Housing <i>[Signature]</i>	Date (mm/dd/yyyy) 9/6/00

Previous editions are obsolete.

Form HUD-1044 (8/90)
ref. Handbook 2210.17



Attachment A

BUDGET LINE ITEM NO.	ACTIVITIES APPROVED	FUNDS APPROVED
9110	Reimbursement of Law Enforcement	\$ 35,785.00
9115	Special Initiative	\$
9116	Reprogrammed Funds	\$
9120	Employment of Security Personnel	\$
9130	Employment of Investigators	\$
9140	Voluntary Tenant Patrol	\$
9150	Physical Improvements	\$
9160	Drug Prevention	\$ 5,680.00
9170	Drug Intervention	\$ 5,680.00
9180	Drug Treatment	\$
9190	Other Program Cost	<u>\$ 26,894.00</u>
	Total Approved Amount	\$ 74,039.00

INSERT G

Comments by Resident Advisory Board

In January Letters were sent to all members of the current Resident Advisory Board. Of the twenty-one members, five were willing to respond to the agency plan. Their comments and addresses are included below. Where appropriate, I have included a response to their concerns.

"I (think) the PHA Plan is a good plan and will be good for residents and those concerned."

Viola Fuller
808 East 20th Street
Alma, GA 31510

"I think if the residents and the administrative pull together the plan will be a great success."

Tashara Folsom
308 East 4th Street
Alma, GA 31510

"Criminal records NCIC? Alma Police does this? Law Enforcement- Walk thru the PHA Drug Enforcement and security"

Carlos Poole
401 East 12th Street
Apt H
Alma, GA 31510

Response

1. Does AHA obtain NCIC records thru Alma Police Department? Is AHA doing NCIC criminal screen?

Alma Police Department does not have capability to do NCIC therefore; we must contract with outside source. Fingerprints must be obtained locally and sent to contracted source. Cost would be \$24.00 per submittal and this cost cannot be back charge to resident.

2. Mr. Poole commented that the Alma Police Department used to walk through the elderly development (D-4 and D-5). He believes this would add to the safety in this area. We currently pay for additional police protection out of our PHDEP program. We can alert the Alma Police Department and request additional police presence now that we have moved people back into our remodernization project. I explained that the new crime statistics showed that crime in general is low particularly in public housing. Nevertheless, his concerns are valid and will be addressed in the following way:

INSERT G

Comments by Resident Advisory Board

1. request increased police attention for D-4 and D-5 whose residents are elderly and less able to protect themselves
2. increased security lighting provided by GA. Power
3. maintenance of all lighted walk ways
4. Possible implementation of neighborhood crime watch program for residents of D-4 and D-5.

"Not patrolled (by) enough police. Lights are not always on at night. Problem with people coming by bedroom around 11:00 to 11:30 at night making loud noise. Someone tried to break in on neighbor one day last week."

Helen Doby
401 East 12th Street
Apt U
Alma, GA 31510

Response:

Mrs. Doby has expressed the same concern for her personal safety that Carlos Poole voiced. The activity they are concerned about comes from the surrounding area and not from within the Housing Authority. We will address her concerns with the same four steps outlined for Carlos Poole.

"I am impressed with the PHA plan."

Clyde Sexton
RAB
508 Pope Drive
Alma, GA 31510

INSERT G

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1. Does AHA obtain NCIC records thru Alma Police Department? Is AHA doing NCIC criminal screen?

Alma Police Department does not have capability to do NCIC therefore; we must contract with outside source. Fingerprints must be obtained locally and sent to contracted source. Cost would be \$24.00 per submittal and this cost cannot be back charge to resident.

2. Mr. Poole commented that the Alma Police Department used to walk through the elderly development (D-4 and D-5). He believes this would add to the safety in this area. We currently pay for additional police protection out of our PHIDEP program. We can alert the Alma Police Department and request additional police presence now that we have moved people back into our modernization project. I explained that the new crime statistics showed that crime in general is low particularly in public housing. Never the less, his concerns are valid and will be addressed in the following way:

INSERT G

Comments by Resident Advisory Board

1. request increased police attention for D-4 and D-5 whose residents are elderly and less able to protect themselves
2. increased security lighting provided by GA. Power
3. maintenance of all lighted walk ways
4. Possible implementation of neighborhood crime watch program for residents of D-4 and D-5.

"Not patrolled (by) enough police. Lights are not always on at night. Problem with people coming by bedroom around 11:00 to 11:30 at night making loud noise. Someone tried to break in on neighbor one day last week."

Helen Doby
401 East 12th Street
Apt U
Alma, GA 31510

Response:

Mrs. Doby has expressed the same concern for her personal safety that Carlos Poole voiced. The activity they are concerned about comes from the surrounding area not from within the Housing Authority. We will address her concerns with the same four steps outlined for Carlos Poole.

"I am impressed with the PHA plan."

Clyde Sexton
RAB
508 Pope Drive
Alma, GA 31510

Maintenance Wage Rate Determination

U.S. Department of Housing
and Urban Development
Office of Labor Relations

Public Housing Agency/Indian Housing Authority:

Agency / Wage Decision No: GA007A

Housing Authority of the City of Alma, GA (Bacon Co./11)

The following wage rate determination has been made for maintenance laborers and mechanics employed pursuant to Section 12(a) of the United States Housing Act of 1937, as amended. This determination is effective as of:

January 1, 2000

The PHA/INA and its contractors must pay to maintenance workers no less than the wage rate(s) indicated for the type of work they actually perform.

Melanie R. Dalton
Melanie R. Dalton
HUD Labor Relations Specialist

July 28, 1999
Date

Overtime Provision: Maintenance workers must be compensated at no less than one and one-half times their basic rate of pay for all hours worked in excess of 40 hours in any workweek. (Contract Work Hours and Safety Standards Act)

Classification	Basic Hourly Wage Rate	Fringe Benefits (Hourly unless stated otherwise)	Remarks
Maintenance Mechanic	\$ 9.80		<p>[XX] The PHA/INA employee benefit program(s) has been determined by HUD to be acceptable for meeting the prevailing fringe benefit requirements contained in this determination.</p> <p>(HUD Labor Relations Officer: If applicable, check box and initial and date below.)</p> <p>_____ INITIAL</p> <p>_____ DATE</p>
Maintenance Assistant	\$ 7.00		
Maintenance Laborer	\$ 6.90		
Grounds/Janitor	\$ 5.15		

Specify all proposed new positions and all present positions to be abolished in the Requested Budget Year. Cite prior HUD concurrence in proposed staffing changes or present justification for such changes. Cite prior HUD concurrence in proposed salary increases for Administration Staff or give justification and pertinent comparability information. Cite effective date for current approved wage rates (form HUD-52158) and justify all deviations from these rates.

SALARY INCREASES GIVEN BASED ON SALARY STUDY.

Travel, Publications, Membership Dues and Fees, Telephone and Telegraph, and Sundry: In addition to "Justification for Travel to Conventions and Meetings" shown on form HUD-52571, give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for these accounts in the Current Budget Year. Explain basis for allocation of each element of these expenses.

MEMBERSHIP DUES: CHAMBER OF COMMERCE, PHADA, NAHRA, AND GAHRA.

TELEPHONE: MONTHLY SERVICE AND LONG DISTANCE CALLS

SUNDRY: BASED ON PAST ACTUALS

Utilities: Give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for each utility service in the Current Budget Year. Describe and state estimated cost of each element of "Other Utilities Expense."

BASED ON PFS CALCULATIONS

WATER	6270
ELECTRICITY	45800
GAS	15960
SEWAGE	6270
TOTAL	74300

Ordinary Maintenance & Operation - Materials: Give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures or materials in the Current Budget Year.

MAINTENANCE MATERIALS BASED ON PAST ACTUALS AND ANTICIPATED EXPENSE.

ESTIMATE: \$21,000

Ordinary Maintenance & Operation - Contract Costs: List each ordinary maintenance and operation service contracted for and give the estimated cost for each. Cite and justify new contract services proposed for the Requested Budget Year. Explain substantial Requested Budget Year increases over the PUM rate of expenditure for Contract Services in the Current Budget Year. If LHA has contract for maintenance of elevator cabs, give contract cost per cab.

GARBAGE COST	5720
UNIFORMS	3720
PEST CONTROL	20000
MISC	14110
YARD MAINT.	42000
TOTAL	85550



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
Troubled Agency Recovery Center, Memphis Office

One Memphis Place
200 Jefferson Avenue, Suite 300
Memphis, Tennessee 38103-2335

MAY 17 2000

Kathleen M. Revene
Executive Director
Housing Authority of the City of Alma
401 East Twelfth Street
Alma, GA 35510-0190

Dear Ms. Revene:

SUBJECT: Low Income Public Housing - Operating Budget Approval
Project No. GA133-001-00D

We have received the Housing Authority's submission of its Operating Budget for Fiscal Year Ending (FYE) 12/31/2000. The budget is approved as modified. We have enclosed a copy for your records.

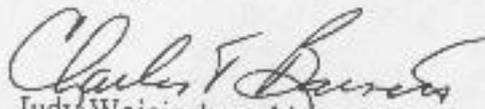
According to the Performance Funding System (PFS) calculation, the HA is eligible for \$472,840 in Operating Subsidy. This funding is based on 98.5% of the Federal Fiscal Year (FFY) 2000 PFS eligibility. In addition, we have reviewed and processed the mandatory PFS adjustments for FYE 12/31/1999. Due to HUD's current funding procedures, these adjustments were not processed with the budget at this time.

We forwarded the form HUD-52721, Direct Disbursement Payment Schedule Data, to the CFO National Finance Center for payment. The payment schedule will be forwarded to you by separate cover letter.

If you have any questions, please contact Sam Perrin, Financial Analyst, at (901) 544-3439 or Jesse Westover, Deputy Director, (901) 544-3434.

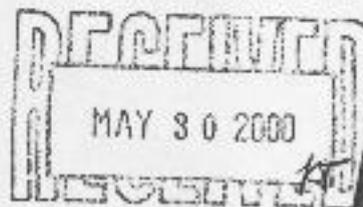
 **COPY**

Sincerely,



Judy Wojciechowski
Director
Troubled Agency Recovery Center

Enclosure



cc: Mr. Mark A. Johnson, Chairperson
Housing Authority of the City of Alma
P.O. Box 135
Alma, GA 31510

Mr Boyce Norris Jr., PIH Director
Office of Public Housing
Five Points Plaza
40 Marietta Street, 17th Floor
Atlanta, GA 30303-2806

Mr. Sam Oni, Community Builder
Office of the Secretary's Representative
Five Points Plaza
40 Marietta Street
Atlanta, GA 30303-2806

TARC Team

Reading File

6AFF Finance Center

**Operating Budget
Schedule of All Positions and Salaries**

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

OMB Approval No. 2577-0026 (Exp. 10/31/97)

Name of Housing Authority		Locality				Fiscal Year End						
ALMA HOUSING AUTHORITY		ALMA, GEORGIA 31510				12/31/2000						
Position Title and Name By Organizational Unit and Function	Present Salary Rate As of (date)	Requested Budget Year			Allocation of Salaries by Program							
		Salary Rate	No. Months	Estimated Payment Amount	Management	Modernization	Development	Section 8 Programs	Other Programs	Longevity	Method of Allocation	
(1)	(1a)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
ADMINISTRATION:												
EXECUTIVE DIRECTOR K. REVENE	A-NT	47,250	50085	12	50085	45,076	5,009					6- 90.0% 7- 10.0%
ADMINISTRATIVE ASSISTANT K. TAYLOR	A-NT	16,224	30000	12	30000	24,000	3,000			3,000		6- 90.0% 7- 10.0% 10- 10.0%
OCCUPANCY SPECIALIST H. AHL	A-NT	21,091	21320	12	21320	21,320						6-100.0%
TOTALS					101405	90,396	8,009			3,000		
TENANT SERVICES:												
SOCIAL WORKER BETTY ELLIS	N-T	6,470	1618	3	1618	1,618						6-100.0%
PH CLERK/RESIDENT INITIATIVES L. HOLMES	N-T	13,998	16640	12	16640	16,640						6-100.0%
TOTALS					18258	18,258						
MAINTENANCE:												
MODERNIZATION COORDINATOR M. RIGDON	M	31,212	31836	12	31836		31,836					7-100.0%
MAINTENANCE SUPERVISOR A. RICHARDSON	M	28,868	29445	12	29445	29,445						6-100.0%
MAINTENANCE MECHANIC GLEN SMITH	M	24,086	24565	12	24565	24,565						6-100.0%

To the best of my knowledge, all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Executive Director or Designated Official:

Kathleen M. Revene

Date:

03/24/2000

**Operating Budget
Schedule of All Positions and Salaries**

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

OMB Approval No. 2577-0028 (Exp. 10/31/97)

Name of Housing Authority ALMA HOUSING AUTHORITY	Locality ALMA, GEORGIA 31510	Fiscal Year End 12/31/2000
--	--	--------------------------------------

Position Title and Name By Organizational Unit and Function	Present Salary Rate As of (date) 01/01/1999	Requested Budget Year				Allocation of Salaries by Program						
		Salary Rate	Estimated Payment		Management	Modernization	Development	Section 8 Programs	Other Programs	Longevity	Method of Allocation	
			No. Months	Amount								
(1)	(1a)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
MAIN WAREHOUSE CLERK/INSPECTOR W. LEE	M	24,086	24565	12	24565	24,565						S-100.0%
MAINTENANCE MECHANIC R. JOHNSON	M	19,282	20384	12	20384	20,384						S-100.0%
MAINTENANCE LABORER J. ARMSTER	M	14,352	15496	12	15496	15,496						S-100.0%
MAINTENANCE LABORER D. THOMPSON	M	5,844	7176	12	7176	7,176						S-100.0%
MAINTENANCE CLERK C. MEEKS	M	13,624	14310	12	14310	14,310						S-100.0%
ON CALL PAY MAINTENANCE LABORER T. FOLSOM	M	7,720	7913	12	7913	7,913						S-100.0%
	M	5,720	7176	12	7176	7,176						S-100.0%
TOTALS					182866	151,030	31,836					

To the best of my knowledge, all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Executive Director or Designated Official

Kathleen M. Leune

Date

03/24/2000

Operating Budget

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

OMB Approval No. 2577-0026 (exp. 10/31/87)

Public reporting burden for this collection of information is estimated to average 116 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3800 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0026), Washington, D.C. 20503. Do not send this completed form to either of the above addresses.

a. Type of Submission <input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No.: _____		b. Fiscal Year Ending 12/31/2000	c. No. of months (check one) <input checked="" type="checkbox"/> 12 mo. <input type="checkbox"/> Other (specify) _____	d. Type of HUD assisted project(s) 01 <input checked="" type="checkbox"/> PHA/IHA-Owned Rental Housing 02 <input type="checkbox"/> IHA Owned Mutual Help Homeownership 03 <input type="checkbox"/> PHA/IHA Leased Rental Housing 04 <input type="checkbox"/> PHA/IHA Owned Turnkey III Homeownership 05 <input type="checkbox"/> PHA/IHA Leased Homeownership
e. Name of Public Housing Agency / Indian Housing Authority (PHA/IHA) ALMA HOUSING AUTHORITY				
f. Address (city, State, zip code) P.O. BOX 190 ALMA, GEORGIA 31510				
g. ACC Number A-2736		h. PAS/LDCCS Project No. GA 133-001-00D	i. HUD Field Office ATLANTA, GEORGIA	
j. No. of Dwelling Units 322	k. No. of Unit Months Available 3,864	l. No. of Projects 8		

Line No.	Acct. No.	Description (1)	Actuals Last Fiscal Yr. 1998 PUM (2)	Estimates or Actual Current Budget Yr. 1999 PUM (3)	Requested Budget Estimates			
					PHA/IHA Estimates		HUD Modifications	
					PUM (4)	Amount (to nearest \$10) (5)	PUM (6)	Amount (to nearest \$10) (7)
Homebuyers Monthly Payments for:								
010	7710	Operating Expense						
020	7712	Earned Home Payments						
030	7714	Nonroutine Maintenance Reserve						
040	Total Break-Even Amount (sum of lines 010, 020, and 030)							
050	7716	Excess (or deficit) in Break-Even						
060	7790	Homebuyers Monthly Payments - Contra						
Operating Receipts:								
070	3110	Dwelling Rental	47.31	38.48	55.61	214,880		
080	3120	Excess Utilities	.47	.37	.45	1,900		
090	3190	Nondwelling Rental	.00	.00	.00	0		
100	Total Rental Income (sum of lines 070, 080, and 090)		47.78	38.85	56.10	216,780		
110	3610	Interest on General Fund Investments	1.25	.70	1.10	4,240		
120	3690	Other Income	35.51	1.28	1.19	4,600		
130	Total Operating Income (sum of lines 100, 110, and 120)		84.53	40.82	58.39	225,620		
Operating Expenditures - Administration:								
140	4110	Administrative Salaries	21.47	21.82	23.40	90,400		
150	4130	Legal Expense	1.05	1.16	1.29	5,000		
160	4140	Staff Training	.59	.78	.78	3,000		
170	4150	Travel	1.92	1.87	1.81	7,000		
180	4170	Accounting Fees	1.85	1.78	1.80	6,950		
190	4171	Auditing Fees	1.14	.74	.96	3,700		
200	4190	Other Administrative Expenses	10.65	8.57	10.14	39,200		
210	Total Administrative Expense (sum of lines 140 thru line 200)		38.68	36.72	40.18	155,250		
Tenant Services:								
220	4210	Salaries	5.18	1.81	4.73	18,260		
230	4220	Recreation, Publications and Other Services	.00	.00	.00	0		
240	4230	Contract Costs, Training and Other	.00	.00	.00	0		
250	Total Tenant Services Expense (sum of lines 220, 230, and 240)		5.18	1.81	4.73	18,260		
Utilities:								
260	4310	Water	1.59	1.89	1.62	6,270		
270	4320	Electricity	13.33	9.64	11.85	45,800		
280	4330	Gas	3.65	2.98	4.13	15,960		
290	4340	Fuel	.00	.00	.00	0		
300	4350	Labor	.00	.00	.00	0		
310	4390	Other utilities expense	1.57	1.89	2.62	6,270		
320	Total Utilities Expense (sum of line 260 thru line 310)		20.14	16.40	19.23	74,300		

ALMA HOUSING AUTHORITY

12/31/2000

Line No.	Acct. No.	Description (1)	Actuals Last Fiscal Yr. 1998 PUM (2)	Estimates <input checked="" type="checkbox"/> or Actual Current Budget Yr. 1999 PUM (3)	Requested Budget Estimates			
					PHA/IHA Estimates		HUD Modifications	
					PUM (4)	Amount (to nearest \$10) (5)	PUM (6)	Amount (to nearest \$10) (7)
Ordinary Maintenance and Operation:								
330	4410	Labor	42.11	44.34	39.09	151,030		
340	4420	Materials	4.47	4.07	5.43	21,000		
350	4430	Contract costs	6.41	12.18	22.14	85,550		
360		Total Ordinary Maintenance & Operation Expense (lines 330 to 350)	52.99	60.59	66.66	257,580		
Protective Services:								
370	4480	Labor	.00	.00	.00	0		
380	4470	Materials	.00	.00	.00	0		
390	4480	Contract Costs	.00	.00	.00	0		
400		Total Protective Services Expense (sum of lines 370 to 390)	.00	.00	.00	0		
General Expense:								
410	4510	Insurance	8.62	10.56	10.69	41,300		
420	4520	Payments in Lieu of Taxes	3.76	2.24	3.64	14,050		
430	4530	Terminal Leave Payments	1.34	.00	.00	0		
440	4540	Employee Benefit Contributions	22.77	21.25	20.78	80,280		
450	4570	Collection Losses	9.35	3.47	3.21	12,410		
460	4590	Other General Expense	.00	.00	.00	0		
470		Total General Expense (sum of lines 410 to 460)	44.84	37.51	38.32	148,050		
480		Total Routine Expense (sum of lines 210, 250, 320, 360, 400, and 470)	161.83	153.04	169.11	653,440		
Rent for Leased Dwellings:								
490	4710	Rents to Owners of Leased Dwellings	.00	.00	.00	0		
500		Total Operating Expense (sum of lines 480 and 490)	161.83	153.04	169.11	653,440		
Nonroutine Expenditures:								
510	4610	Extraordinary Maintenance	.00	.00	.38	1,400		
520	7520	Replacement of Nonexpendable Equipment	.05	(.10)	8.63	33,350		
530	7540	Property Betterments and Additions	.22	.06	.38	1,450		
540		Total Nonroutine Expenditures (sum of lines 510, 520, and 530)	.27	(.04)	9.37	36,200		
550		Total Operating Expenditures (sum of lines 500 and 540)	162.09	152.99	178.48	689,640		
Prior Year Adjustments:								
560	6010	Prior Year Adjustments Affecting Residual Receipts	34.16	.25	.00	0		
Other Expenditures:								
570		Deficiency in Residual Receipts at End of Preceding Fiscal Yr	.00	.00	.00	0		
580		Total Operating Expenditures, including prior year adjustments and other expenditures (line 550 plus or minus line 560 plus line 570)	196.25	153.24	178.48	689,640		
590		Residual Receipts (or Deficit) before HUD Contributions and provision for operating reserve (line 130 minus line 580)	(111.72)	(112.42)	(120.09)	(454,020)		
HUD Contributions:								
600	8010	Basic Annual Contribution Earned - Leased Projects: Current Year	.00	.00	.00	0		
610	8011	Prior Year Adjustments - (Debit) Credit	.00	.00	.00	0		
620		Total Basic Annual Contribution (line 600 plus or minus line 610)	.00	.00	.00	0		
630	8020	Contributions Earned - Op. Sub: - Cur. Yr. (before year-end adj)	124.96	126.77	121.14	468,071	124.23	480,041
640		Mandatory PFS Adjustments (net):	.00	.00	.00	0		
650		Other (specify):	.00	.00	.00	0		
660		Other (specify): <i>Unfunded 1.5%</i>	.00	.00	.00	0	(1.86)	(7,201)
670		Total Year-end Adjustments/Other (plus or minus lines 640 thru 660)	.00	.00	.00	0		
680		Total Operating Subsidy-current year (line 630 plus or minus line 670)	124.96	126.77	121.14	468,071	122.37	472,840
690		Total HUD Contributions (sum of lines 620 and 680)	124.96	126.77	121.14	468,071	122.37	472,840
700		Residual Receipts (or Deficit) (sum of line 590 plus line 690) Enter here and on line 810	13.25	14.35	1.05	4,051	2.28	8,820

ALMA HOUSING AUTHORITY

12/31/2000

		Operating Reserve	PHA/IHA Estimates	HUD Modifications
Part I - Maximum Operating Reserve - End of Current Budget Year				
740	2821	PHA/IHA-Leased Housing - Section 23 or 10(c) 80% of Line 480, column 5, form HUD-52564	326,720	

		Part II - Provision for and Estimated or Actual Operating Reserve at Fiscal Year End		
780		Operating Reserve at End of Previous Fiscal Year - Actual for FYE (date): 12-31-98	160,338	
790		Provision for Operating Reserve - Current Budget Year (check one) <input type="checkbox"/> Estimated for FYE <input checked="" type="checkbox"/> Actual for FYE	51,321	
800		Operating Reserve at End of Current Budget Year (check one) <input type="checkbox"/> Estimated for FYE <input checked="" type="checkbox"/> Actual for FYE	211,659	
810		Provision for Operating Reserve - Requested Budget Year Estimated for FYE Enter Amount from line 700	4,051	8,820
820		Operating Reserve at End of Requested Budget Year Estimated for FYE (Sum of lines 800 and 810)	215,710	220,479
830		Cash Reserve Requirement - _____ % of line 480		

Comments:

PHA/IHA Approval

Name Kathleen ReveneTitle Executive DirectorSignature Kathleen M. ReveneDate 03/24/2000

Field Office Approval

Name for Judy WojcieszowskiTitle Memphis TARC DirectorSignature Charles T. BainesDate 5/17/2000

**Operating Budget
Schedule of Nonroutine Expenditures**

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

OMB Approval No. 2577-0026 (Exp. 10/31/97)

Public Reporting Burden for this collection of information is estimated to average 0.75 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0026), Washington, D.C. 20503. Do not send this completed form to either of the above addresses.

Local Housing Authority: **ALMA HOUSING AUTHORITY**
 Locality: **ALMA, GEORGIA 31510**
 Fiscal Year Ending: **12/31/2000**

Work Project Number (1)	Description of Work Project (List Extraordinary Maintenance and Betterments and Additions separately) (2)	Housing Project Number (3)	Total Estimated Cost (4)	Percent Complete Current Budget Year End (5)	Requested Budget Year		Description of Equipment Items (List Replacements and Additions separately) (8)	Equipment Requirements		
					Estimated Expenditure in Year (6)	Percent Complete Year End (7)		Requested Budget		
								No. of Items (9)	Item Cost (10)	Estimated Expenditure in Year (11)
	EXTRAORDINARY MAINTENANCE:						REPLACEMENTS:			
00-1	RE-ROOF STORAGE BUILDING DEV 6		1,400		1,400		STOVES	15	280	4,200
	TOTALS		1,400		1,400		REFRIGERATORS	15	450	6,750
							WEEDEATER	1	300	300
							EDGER	1	300	300
							TRUCK	1	19,500	19,500
							PORTABLE TWO WAY RADIO	4	425	1,700
							TYPEWRITERS	2	300	600
							TOTALS			33,350
							ADDITIONS:			
							TRUCK GATE LIFT	1	1,450	1,450
							TOTALS			1,450

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Operating Budget
Schedule of Administration
Expense Other Than Salary

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

OMB Approval No. 2577-0026 (Exp. 10/31/97)

Public Reporting Burden for this collection of information is estimated to average 1.0 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0026), Washington, D.C. 20503. Do not send this completed form to either of the above addressees.

Name of Housing Authority: **ALMA HOUSING AUTHORITY** Locality: **ALMA, GEORGIA 31510** Fiscal Year End: **12/31/2000**

(1) Description	(2) Total	(3) Management	(4) Development	(5) Section 8	(6) Other
1 Legal Expense (see Special Note in Instructions)	5,000	5,000			
2 Training (list and provide justification)	3,000	3,000			
3 Travel Trips to Conventions and Meetings (list and provide just.)	5,000	5,000			
4 Other Travel: Outside Area of Jurisdiction					
5 Within Area of Jurisdiction	2,000	2,000			
6 Total Travel	7,000	7,000			
7 Accounting	6,950	6,950			
8 Auditing	3,700	3,700			
9 Sundry Rental of Office Space					
10 Publications					
11 Membership Dues and Fees (list organization and amount)	900	900			
12 Telephone, Fax, Electronic Communications	8,800	8,800			
13 Collection Agent Fees and Court Costs	2,500	2,500			
14 Administrative Services Contracts (list and provide just.)	7,100	7,100			
15 Forms, Stationary and Office Supplies	8,000	8,000			
16 Other Sundry Expense (provide breakdown)	11,900	11,900			
17 Total Sundry	39,200	39,200			
18 Total Administration Expense Other Than Salaries	64,850	64,850			

To the best of my knowledge, all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Signature of authorized representative & Date:

X *Kathleen M. Brown*

Executive Director

March 24, 2000

Justification/Breakdown:

ACCOUNTING FEES REMAIN THE SAME \$579 PER MONTH

AUDIT FEE \$3700

LEGAL EXPENSE AND STAFF TRAINING BASED ON PAST ACTUALS AND ANTICIPATED EXPENSES.

TRAVEL EXPENSES REMAIN THE SAME.

Instructions for Preparation of Form HUD-52571

Prepare this form to reflect detailed estimates of Administration Expense, other than salaries, and the distribution to all programs administered by the Housing Authority.

The identification boxes in the upper right hand corner are self-explanatory.

1. Legal Expense: Enter in Column (2), Line 1 the estimated cost of legal service. Enter in Columns (3) through (6) the pro rata shares of amounts in Column (2) chargeable to programs administered by the Housing Authority.

Special Note: The amount entered on Form HUD-52564 should also include salaries of Staff Attorneys as shown on Form HUD-52566 and included on line for "Other" in the Summary of Staffing and Salary Data section of Form HUD-52573.

2. Training: List and provide justification for all training.

Travel Expense: Justification must be provided for travel.

3. Trips to Conventions and Meetings: Under Justification/Breakdown, list each convention and meeting to be attended by commissioners and staff, with the location. Enter the number of persons expected to attend and show the aggregate number of travel days and the estimated total cost of each trip including subsistence allowance, cost of transportation, and reimbursable miscellaneous expenses. Enter the sum of the total costs of all trips in Column (2). Enter in Columns (3) through (6) the pro rata shares of amounts in Column (2) chargeable to programs administered by the Housing Authority.

4. Other Travel: Outside Area of Jurisdiction: Enter in Column (2), Line 4 the estimated cost for travel by commissioners and staff, including subsistence, transportation, and reimbursable miscellaneous expenses. Follow instruction 3 above for columns (3) through (6).

5. Other Travel: Within Area of Jurisdiction: Enter in Column (2), Line 5 the estimated cost for travel, including fixed monthly allowances for reimbursement on a mileage basis for use of privately owned automobiles; and reimbursement for authorized use of local public transportation. Follow instructions 3 above for columns (3) through (6).

6. Total Travel: Sum Lines 3, 4, and 5 for Columns (2) through (7) and enter total for each on Line 6 "Total Travel."

7, thru 16. Accounting, Auditing and Sundry: Enter the estimated total for all programs in Column (2) for each item of expense in Lines 7 through 16. In Columns (3) through (6) enter the pro rata share of amounts shown in Column (2) chargeable to all programs administered by the Housing Authority.

14. Administrative Services Contracts: List and provide justification for all contracts (excluding accounting contracts).

16. All Other Sundry Expense: List all items identified under this expense.

18. Total Administration Expense Other Than Salaries:

Add the amounts on the following Lines:

Line 1	Legal Expense
Line 2	Training
Line 6	Total Travel
Line 7	Accounting
Line 8	Auditing
Line 17	Total Sundry

On Line 18 enter the appropriate totals in Columns (2) through (6). The amount shown in Column (3), lines 1, 2, 6, 7, 8, and 17, should be carried forward to Lines 150 through 200 of Form HUD-52564, Operating Budget.

**Operating Budget
Summary of Budget Data
and Justifications**

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

OMB Approval No. 2577-0028 (Exp. 10/31/97)

Public Reporting Burden for this collection of information is estimated to average 0.75 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0028), Washington, D.C. 20503. Do not send this completed form to either of the above addressees.

Name of Local Housing Authority: ALMA HOUSING AUTHORITY	Locality: ALMA, GEORGIA 31510	Fiscal Year Ending: Dec 31, 2000
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Operating Receipts

Dwelling Rental: Explain basis for estimate. For HUD-aided low-rent housing, other than Section 23 Leased housing, state amount of latest available total HA monthly rent roll, the number of dwelling units available for occupancy and the number accepted for the same month end. Cite HA policy revisions and economic and other factors which may result in a greater or lesser average monthly rent roll during the Requested Budget Year. For Section 23 Leased housing, state the number of units under lease, the PUM lease price, and whether or not the cost of utilities is included. If not included, explain method for payment at utility costs by HA and/or tenant.

DWELLING RENTAL IS BASED ON RENT ROLL AT 12/1/1999. TOTAL RENT CHARGED WAS 13,063 WITH 196 UNITS OCCUPIED OUT OF 322 UNITS AVAILABLE. LINE 070 OF HUD 52564 DETERMINED BY LINE 18 OF HUD 52564.

Excess Utilities: (Not for Section 23 Leased housing.) Check appropriate spaces in item 1, and explain "Other". Under item 2, explain basis for determining excess utility consumption. For example, Gas; individual check meters at OH-100-1, proration of excess over allowances at OH-100-2, etc. Cite effective date of present utility allowances. Explain anticipated changes in allowances or other factors which will cause a significant change in the total amount of excess utility charges during the Requested Budget year.

1. Utility Services Surcharged: Gas Electricity Other (Specify) _____

2. Comments

TENANTS ARE CHARGED FOR EXCESS GAS CONSUMPTION WHICH EXCEEDS THE UTILITY ALLOWANCE.

ESTIMATE: \$1900

Non-dwelling Rent: (Not for Section 23 Leasing housing.) Complete item 1, specifying each space rented, to whom, and the rental terms. For example: Community Building Space - Nursery School - \$50 per month, etc. Cite changes anticipated during the Requested Budget Year affecting estimated Non-dwelling Rental Income.

1.	Space Rented	To Whom	Rental Terms
	NO INCOME IS EARNED UNDER THIS LINE ITEM.		
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

2. Comments

Interest on General Fund Investments: State the amount of present General Fund investment and the percentage of the General Fund it represents. Explain circumstances such as increased or decreased operating reserves, dwelling rent, operating expenditures, etc., which will affect estimated average monthly total investments in the Requested Budget Year. Explain basis for distribution of interest income between housing programs.

THE PHA HAS \$52,231.80 INVESTED EARNING APP. 6.25% INTEREST. THIS LINE ITEM BASED ON THE CALCULATION OF THE ESTIMATED INVESTMENT INCOME.

ESTIMATE \$4240

Other Comments On Estimates of Operating Receipts: Give comments on all other significant sources of income which will present a clear understanding of the HA's prospective Operating Receipts situation during the Requested Budget Year. For Section 23 Leased housing explain basis for estimate of utility charges to tenants.

TENANTS ARE CHARGED A LATE FEE FOR DELINQUENT PAYMENTS ON THEIR ACCOUNTS FOR ANY RETURN ITEM FEE.

ESTIMATE \$4600

Operating Expenditures

Summary of Staffing and Salary Data

Complete the summary below on the basis of information shown on form HUD-52566, Schedule of All Positions and Salaries, as follows:

Column (1) Enter the total number of positions designated with the corresponding account line symbol as shown in Column (1), form HUD-52566.

Column (2) Enter the number of equivalent full-time positions allocable to HUD-aided housing in management. For example: A HA has three "A-NT" positions allocable to such housing at the rate of 80%, 70%, and 50% respectively. Thus, the equivalent full-time positions is two, $(8/10 + 7/10 + 5/10)$.

Column (3) Enter the portion of total salary expense shown in Column (5) or Column (6), form HUD-52566, allocable to HUD-aided housing in management, other than Section 23 Leased housing.

Column (4) Enter the portion of total salary expense shown in Column (5) or Column (10), form HUD-52566, allocable to Section 23 Leased housing in management.

Column (5) Enter the portion of total salary expense shown in Column (5) or Column (7), form HUD-52566, allocable to Modernization programs (Comprehensive Improvement Assistance Program or Comprehensive Grant Program).

Column (6) Enter the portion of total salary expense shown in Column (5) or Column (9), form HUD-52566, allocable to Section 8 Programs.

Note: The number of equivalent full-time positions and the amount of salary expense for all positions designated "M" on form HUD-52566 must be equitably distributed to account lines Ordinary Maintenance and Operation - Labor, Extraordinary Maintenance Work Projects, and Betterments and Additions Work Projects.

Account Line	Total Number of Positions (1)	Equivalent Full-Time Positions (2)	HUD-Aided Management Program			
			Salary Expense			
			Management (3)	Section 23 Leased Housing Only (4)	Modernization Programs (5)	Section 8 Program (6)
Administration - Nontechnical Salaries ¹	4	3.0	90396		8009	
Administration - Technical Salaries ¹						
Ordinary Maintenance and Operation - Labor ¹	10	9.0	1497110		31836	
Utilities - Labor ¹						
Other (Specify) (Legal, etc.) ¹	1	1.0	18258			
Extraordinary Maintenance Work Projects ²						
Betterments and Additions Work Projects ²						

¹ Carry forward to the appropriate line on HUD-52564, the amount of salary expense shown in Column (3) on the corresponding line above. Carry forward to the appropriate line on HUD-52564 (Sec. 23 Leased Housing Budget), the amount of salary expense shown in Column (4) on the corresponding line above.

² The amount of salary expense distributed to Extraordinary Maintenance Work Projects and to Betterments and Additions Work Projects is to be included in the cost of each individual project to be performed by the HA Staff, as shown on form HUD-52567.

Insurance: Give an explanation of substantial Requested Budget Year estimated increases in the PUM rate of expenditures for insurance over the Current Budget Year. Cite changes in coverage, premium rates, etc.

AUTO	2000
WORKMAN COMP	10800
POL	2500
BOND	1000
MULTIPERIL	25000
TOTAL	41300

Employee Benefit Contributions: List all Employee Benefit plans participated in. Give justification for all plans to be instituted in the Requested Budget Year for which prior HUD concurrence has not been given.

FICA	7.65% OF SALARIES	19870
HOSPITAL	100% IF EMPLOYEE COVERAGE 75% OF DEPENDENT COVERAGE	38930
DENTAL	100% OF EMPLOYEE COVERAGE 75% OF DEPENDENT COVERAGE	
RETIREMENT	8.5% OF SALARIES	20880
UNEMPLOYMENT COMPENSATION		600
TOTAL		80280

Collection Losses: State the number of tenants accounts receivable to be written off and the number and total amount of all accounts receivable for both present and vacated tenants as of the month in which the estimate was computed.

THIS LINE ITEM BASED ON PRIOR ACTUALS

ESTIMATE \$12,410

Extraordinary Maintenance, Replacement of Equipment, and Betterments and Additions: Cite prior HUD approval or give justification for each nonroutine work project included in the Requested Budget and for those for future years which make up the estimate on form HUD-52570. Justify information incorporated on or attached to form HUD-52567 need not be repeated here.

REPLACEMENTS NEEDED TO REPLACE OLDER EQUIPMENT WHICH NO LONGER WORKS OR HAS BECOME TOO COSTLY TO MAINTAIN.

ADDITIONS NEEDED TO HELP HOUSING AUTHORITY RUN MORE EFFICIENTLY.

Contracts: List all contracts, other than those listed on page 3 of this form under Ordinary Maintenance & Operation (OMO). Cite the name of the contractor, type of contract, cost of contract, and contract period. Justification must be provided for all contract services proposed for the Requested Budget Year (RBY). Explain substantial RBY increases over the PUM rate of expenditure for these contracts in the Current Budget Year.

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Office of Public and Indian Housing

22. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and attachments at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.

Alma Housing Authority

GA06P133

PHA Name

PHA Number



Signed _____
Dated by PHA Board Chair or other authorized PHA Official

**PHA Certification of Compliance with the PHA Plan
And Related Regulations
Board Resolution to Accompany the PHA Plan**

The Board of Commissioners of the Alma Housing Authority approves the submission of the Annual Plan for Fiscal Year 2001 for the fiscal year beginning January 1, 2001, hereinafter referred to as the "Plan" of which this document is a part, and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
5. The PHA will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
7. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's MITCS in an accurate, complete and timely manner (as specified in PHA Notice 99-2);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).

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

8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
9. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low- or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
11. The PHA has submitted with the Plan a certification with regard to a drug free workplace required by 24 CFR Part 24, Subpart F.
12. The PHA has submitted with the Plan a certification with regard to compliance with restrictions on lobbying required by 24 CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.
13. For PHA Plan that includes a PHDEP Plan as specified in 24 CFR 761.21: The PHDEP Plan is consistent with and conforms to the "Plan Requirements" and "Grantee Performance Requirements" as specified in 24 CFR 761.21 and 761.23 respectively and the PHA will maintain and have available for review/inspection (at all times), records or documentation of the following:
 - Baseline law enforcement services for public housing developments assisted under the PHDEP plan;
 - Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);
 - Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;
 - Coordination with other law enforcement efforts;
 - Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and
 - All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.
14. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
15. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
16. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.
17. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
18. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
19. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act and 24 CFR Part 35.
20. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments) and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
21. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.

4. AHA shall also screen for and prohibit admission of persons who are dangerous sex offenders. Dangerous sex offenders are never allowed admission.
5. AHA shall also screen for and prohibit admission of persons who have been arrested or convicted of manufacturing or producing methamphetamine from public housing (section 27 of the 1937 Act). Persons convicted of manufacturing or producing methamphetamine are never allowed admission.
6. The eviction of residents who have been identified by reliable sources as participating in criminal activities in their dwelling unit, within the City of Alma or anywhere else.
7. Holding residents responsible for all unlawful, violent or disturbing actions of their households, family members, guests, visitors and invitees.
8. The screening of existing residents for criminal conduct as a part of each recertification process.
9. Enforcing a No Trespass policy which readily identifies nonresident individuals on AHA property who violate the *One Strike and You're Out Policy*.

AHA is not required to meet the criminal standard of "proof beyond a reasonable doubt." In order to terminate a lease and evict a tenant, a criminal conviction or arrest is not necessary. Before initiating termination of tenancy and eviction action, AHA should have sufficient documentation to prove in court that a tenant has violated his or her dwelling lease before taking eviction action.

These provisions will ensure that AHA meets all requirements under the *One Strike and You're Out Policy* and greatly enhance the efforts to improve the health, safety and peaceful enjoyment of its public housing communities.

Deconcentration of Poverty and Income-Mixing in Public Housing

AHA shall deconcentrate poverty in each of its housing developments by bringing higher income tenants into lower income public housing projects and bringing lower income tenants into higher income public housing projects. AHA shall make every effort to maintain the following income mix for each development.

- 40 percent of families with incomes below 30 percent of median ("very poor families") in a fiscal year.
- 60 percent of other admissions shall comply with eligibility limits under the current regulations (24 CFR 982.201(b)) and law.

To accomplish this, AHA will take the following steps:

Initial assessment and current occupancy

- Before the start of each fiscal year, AHA shall assess each development to determine the percentage of families whose income are at or below 30 percent of median ("very poor families") of HUD's latest published income limits. AHA will determine and compare the relative tenant incomes of each development and the incomes of the census tract in which the development is located.

- Developments where the percentage of families whose income are at or below 30 percent of median ("very poor families") of HUD's income limits exceeds 40%:
- Should AHA find that the percentage of families whose income are at or below 30 percent of median ("very poor families") of HUD's income limits exceeds 40% in any one development, AHA shall offer the opportunity for relocation to a development where the percentage of families whose income are at or below 30 percent of median ("very poor families") of HUD's income limits may be less than 40%. The offer of relocation will be based on the following:
 - Availability of appropriate units in other developments where the percentage of units available for families whose income are below 30 percent of median ("very poor families") of HUD's 1999 income limits; and
 - Ability of the relocating family to meet all admission requirements.
- For each development, should more families wish to relocate than the number of units available for families whose income are at or below 30 percent of median ("very poor families") in other developments, AHA shall conduct a lottery. The lottery will be publically held at a regularly scheduled board meeting. The name of each family wishing to relocate will be placed in the lottery box. A Board member will then draw the number of names from the box corresponding to the number of units available.
- As an incentive, AHA shall bear the cost of relocation. Relocation costs are limited to the actual cost of the move and utility deposits including telephone and cable TV, but only if the resident had a telephone and cable TV at the unit being vacated.
- Should the number of families necessary to achieve the 40% target choose not to relocate, AHA shall target the appropriate number of units and will apply the wait list skipping procedure defined below to occupy the units as units become available for occupancy.

Maintaining deconcentration - Maintaining the 40% target of families whose income are at or below 30 percent of median ("very poor families") of HUD's current income limits.

The 1998 Act allows a Housing Authority to offer incentives to eligible families that would help accomplish the deconcentration and income-mixing objectives. In addition, skipping of a family on a waiting list specifically to reach another family with a lower or higher income is permissible, provided that such skipping is uniformly applied.

1. Therefore, when a development's percentage of families meeting the 30 percent of median ("very poor families") of HUD's current income limits falls below 40% of the total units, AHA shall select the next eligible family from the wait list whose income is less than 30 percent of median ("very poor families") of HUD's current income limits and who meets all other admissions requirements. AHA shall continue selecting families in this manner until the 40% target is met.
2. Likewise, should a development's percentage of families meeting the 30 percent of median ("very poor families") of HUD's current income limits exceed 40% of the total units, AHA shall select the next eligible family from the wait list whose income is more than 30 percent of median ("very poor families")

of HUD's current income limits. AHA shall continue selecting families in this manner until the 60% target is met.

Community Service Requirements of the 1998 Act

Additionally, the lease requirements have been revised to include residents' mandatory compliance with the Community Service requirements of the 1998 Act. Each public housing lease must have a 12-month term, which must be automatically renewed for all purposes except noncompliance by an adult member with the community service requirements to contribute 8 hours per month of community service (not AHA-approved community service or economic self-sufficiency activities).

Choice of Rents Methods of Rent Calculations

AHA shall give families a choice among options for rents. The options provided shall include at least a flat rent and an income-based rent calculation. This choice shall be given to each family annually. AHA shall provide residents with enough information to make an informed choice.

Changes to These Policies

AHA is responsible for complying with all existing and subsequent changes in HUD regulations pertaining to the Public Housing Programs. If, at any time such changes conflict with these Policies, HUD regulations shall have precedence. All issues not addressed in this document related to residents and participants are governed by the 1998 Act, HUD Regulations, the Code of Federal Regulations, HUD Memos, Notices, and Guidelines or other applicable law(s).

Therefore, changes to these Policies shall be approved by AHA Board of Commissioners and are subject to a 30 calendar day review period during which the residents of AHA's communities are invited to comment. Additionally, the AHA may modify the lease at any time during the Lease term, so long as it allows a 60 day notice to tenants and resident organizations and consideration of their comments before adopting any new lease form or revision to the Lease. A written rider to the Lease is required for all revisions to the Lease. The AHA shall terminate the tenancy if the tenant refuses to sign a Lease rider within 15 calendar days following the last date of the 60 day notice to tenants and resident organizations.