

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

Small PHA Plan Update
Annual Plan for Fiscal Year: January 1, 2001

Baird Housing Authority

Baird, Texas

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: Baird Housing Authority

PHA Number: TX197v02

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

PHA Plan Contact Information:

Name: Ben Stephenson

Phone: 915/854-1660

TDD:

Email (if available): bpha@txol.net

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- Main administrative office of the local, county or State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

PHA Programs Administered:

Public Housing and Section 8 Section 8 Only Public Housing Only

Annual PHA Plan
Fiscal Year 20
 [24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. **Contents Page#**

Annual Plan (etc.) in the space to the left of the name of the attachment. If the attachment is provided as a separate file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.	Contents Page#
Executive Summary (optional)	2
Annual Plan Information	2
Table of Contents	
Description of Policy and Program Changes for the Upcoming Fiscal Year	2
Capital Improvement Needs	3
Demolition and Disposition	N/A
Homeownership: Voucher Homeownership Program	N/A
Crime and Safety: PHDEP Plan	N/A
Other Information:	4-6
Resident Advisory Board Consultation Process	
Statement of Consistency with Consolidated Plan	
Criteria for Substantial Deviations and Significant Amendments	

Attachments

- Attachment A : Supporting Documents Available for Review
- Attachment B : Capital Fund Program Annual Statement
- Attachment C : Capital Fund Program 5 Year Action Plan
- Attachment ____ : Capital Fund Program Replacement Housing Factor Annual Statement
- Attachment ____ : Public Housing Drug Elimination Program (PHDEP) Plan
- Attachment D : Resident Membership on PHA Board or Governing Body
- Attachment E : Membership of Resident Advisory Board or Boards
- Attachment F : Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

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

Baird Housing Authority administers 50 units of Public Housing and 85 units of Section 8. The Baird Housing Authority is a provider of low cost homes for those unable to find adequate housing, and we will assist residents in achieving self-sufficiency.

Our residents and others shall be treated with dignity and respect, and we will continually strive to improve the quality of life for all resident of the community.

We are dedicated to achieving our organizational objectives through the pride and commitment to excellence by the board of commissioners and staff.

It is our intent to accomplish this mission by:

- A. Developing and implementing effective resident initiatives programs that include education, training, employment, which instill individual responsibility and encourages resident participation in the housing authority operation.
- B. Seeking out and securing additional sources of revenue.
- C. Addressing the long term needs of community and authority through the development and on-going review of the 5 year plan process.

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in sections of this Update.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

- D. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

E. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 86,579.00

F. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

G. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)	
1a.	Development name:
1b.	Development (project) number:
2.	Activity type: Demolition Disposition
3.	Application status (select one) Approved Submitted, pending approval Planned application
4.	Date application approved, submitted, or planned for submission: (DD/MM/YY)
5.	Number of units affected:
6.	Coverage of action (select one)

	Part of the development
	Total development
7.	Relocation resources (select all that apply) Section 8 for units Public housing for units Preference for admission to other public housing or section 8 Other housing for units (describe below)
8.	Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

B. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

C. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____

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

E. Yes No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

Resident Advisory Board (RAB) Recommendations and PHA Response

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

3. If yes, the comments are Attached as Attachment F

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

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

A list of these changes is included

Yes No: below or

Yes No: at the end of the RAB Comments in Attachment _____.

Yes No Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.

Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here)

State of Texas

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

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

PHA Requests for support from the Consolidated Plan Agency

- Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

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

- A. Promote adequate and affordable housing
- B. Promote economic opportunity
- C. Promote a suitable living environment without discrimination.

C. Criteria for Substantial Deviation and Significant Amendments

Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA must subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

B. Substantial Deviation from the 5-year Plan:

C. Significant Amendment or Modification to the Annual Plan:

Made amendments to ACOP and Administrative Plan See Attachment D

A & O Policy Updates

P. 11 - after #8 under “included income”, add

9. Imputed welfare income (see definition) if family has received a specified welfare benefit reduction as a result of fraud by a family member in connection with the welfare program; or because of welfare agency sanction against a family member for noncompliance with a welfare agency requirement to participate in an economic self-sufficiency program.

P. 12 - eliminate #13; renumber 14 - 18 so that 18 is now 17. Under 17, substitute the following for c.

- c. who, within 6 months previous to new employment, was assisted through TANF (temporary assistance for needy families) in the amount of at least \$500, as verified by the local TANF agency.

P. 17 - insert new definition

Covered Family

Family who receives welfare assistance or other public assistance from a state or other public agency under a program for which federal, state, or local law requires that a member of the family participate in an economic self-sufficiency program as a condition of such assistance.

P. 18 - new definition of disabled family and disabled person

Disabled Family

A family whose head/ co-head/ spouse or sole member is a person with disabilities. The term includes two or more persons with disabilities living together, and one or more such persons living with one or more persons including live-in aides determined to be essential to the care and well-being of the person or persons with disabilities. (24 CFR 5.403)

Disabled Person

A person who is under a disability as defined in Section 223 of the Social Security Act (42 U.S.C. 423), who has a developmental disability as defined in Section 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act [U.S.C. 6001(7)], or has a disability as determined by HUD regulations at 24 CFR 5.403 and 8.3.

1. **Section 223:** disability defined as inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months, or in the case of an individual who attained the age of 55 and is blind and unable by reason of such blindness to engage in substantial gainful activity requiring skills or ability comparable to those of any gainful activity in which he/she has previously engaged with some regularity and over a substantial period of time.
2. **Section 102(7):** developmental disability defined as a severe chronic disability that:
 - a. is attributable to a mental or physical impairment or combination of the two
 - b. is manifested before the person attains age twenty-two (22)
 - c. is likely to continue indefinitely
 - d. results in substantial functional limitation in three or more of the following areas of major life activity: self care, receptive and responsive language, learning, mobility, self-direction, capacity for independent living, economic self-sufficiency.
 - e. reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment or other services which are of lifelong or extended duration and are individually planned and coordinated.
3. A person having a physical, mental or emotional impairment that:
 - a. is expected to be of long, continued and indefinite duration
 - b. substantially impedes the person's ability to live independently
 - c. is of such a nature that such ability could be improved by more suitable housing conditions.
4. For purposes of qualifying for housing programs, the term does not include any individual whose disability is based solely on any drug or alcohol dependence.
5. Individual with handicaps, as defined in 24 CFR 8.3, as follows: means any person who has a physical or

mental impairment that substantially limits one or more major life activities; has a record of such an impairment; or is regarded as having such an impairment. As used in this definition, the phrase:

- (a) Physical or mental impairment includes:
 - (1) Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: Neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genito-urinary; hemic and lymphatic; skin; and endocrine; or
 - (2) Any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.
 - (3) The term physical or mental impairment includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental retardation, emotional illness, drug addiction and alcoholism.
 - (b) Major life activities means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.
 - (c) Has a record of such an impairment means has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities.
 - (d) Is regarded as having an impairment means:
 - (1) Has a physical or mental impairment that does not substantially limit one or more major life activities but that is treated by a recipient as constituting such a limitation;
 - (2) Has a physical or mental impairment that substantially limits one or more major life activities only as a result of the attitudes of others toward such impairment; or
 - (3) Has none of the impairments defined in paragraph (a) of this section but is treated by a recipient as having such an impairment.
6. The definition of handicap in Section 504 of the Rehabilitation Act of 1973 does not include homosexuality, bisexuality, or transvestitism. *(these characteristics do not disqualify an otherwise disabled applicant/resident from being covered).*

P. 20 - add definition

Disallowance

An exclusion from annual income.

P. 20 - replace definition

Elderly Family

A family whose head, co-head, spouse or sole member is at least 62 years of age. It may include two or more elderly persons living together, and one or more such persons living with one or more persons, including live-in aides, determined to be essential to the care and well-being of the elderly person or persons. (24 CFR 5.403)

P. 22 - under Hardship definition, replace 1. with

1. Family has lost eligibility for or is awaiting approval of federal, state, or local assistance (includes family with member who is a noncitizen who is lawfully admitted for permanent residence)

P. 23 - add definition

Imputed Welfare Income

The amount of annual income not actually received by a family, as a result of a specified welfare benefit reduction, that is nonetheless included in the family's annual income for purposes of determining rent.

P. 29 - add definition

Specified Welfare Benefit Reduction

1. A reduction of welfare benefits by the welfare agency, in whole or in part, for a family member, as determined by the welfare agency, because of fraud by a family member in connection with the welfare program; or because of welfare agency sanction against a family member for noncompliance with a welfare agency requirement to participate in an economic self-sufficiency program.
2. does not include a reduction or termination of welfare benefits by the agency
 - (a) at expiration of a lifetime or other time limit on the benefits
 - (b) because a family member is not able to obtain employment, even though the family member has complied with welfare agency economic self sufficiency or work activities requirements; or
 - (c) because a family member has not complied with other welfare agency requirements.

P. 30 - replace old definition with new definition

D. Utility Reimbursement (24 CFR 5.603)

The amount, if any, by which the utility allowance for the unit, if applicable, exceeds the Total Tenant Payment for the Family occupying the unit. In such a case, the amount will be reimbursed to the family on a monthly basis or directly to the utility company on behalf of the family.

P. 55 - replace D with

- D. Families needing special consideration because of a disability will be accommodated before under and over housed families, whenever possible.

P. 62 - replace B (1) a with

- a. The family has lost eligibility for or is awaiting federal, state or local assistance, including a family that includes a member who is a noncitizen lawfully admitted for permanent residence.

P. 64 - under D. 2. add the following:

- a. If the family has received a specified welfare benefit reduction the amount of imputed welfare income will be included in family income for rent computation purpose.
- b. The amount of imputed welfare income will be determined by the Authority using information received from the welfare agency.
- c. When additional income earned by the family from other sources reaches an amount at least equal to the imputed welfare income amount, the imputed welfare income will be reduced to "0".
- d. The Authority may not include imputed welfare income in annual income if the family was not receiving housing assistance at the time of the sanction by the welfare agency.
- e. If the family disputes the Authority's calculated amount of imputed welfare income and the Authority denies the family's request to modify the amount, the Authority must give the family written notice stating:
 - (i) the basis for the determination of the imputed welfare income amount
 - (ii) that the family may request a hearing under the Authority's **Grievance Procedure** (the family is not required to pay an escrow deposit in this case, in order to obtain a hearing)

P. 64 - under D. 3. add the following:

- a. The first full disallowance is for a maximum of 12 cumulative months.
- b. The second 50% disallowance is also for a maximum of 12 cumulative months.
- c. The 12 months can start and stop, but in no case can an individual family member get the disallowance after 48 months from the date of initial exclusion.

P. 65 - replace XXI B. with the following:

- B. In Authority housing developments where the resident pays all or part of the utilities, total tenant payment minus the utility allowance may result in a negative figure. In this case, HUD regulations require that the Authority reimburse this amount (called “utility reimbursement”) directly to the resident or directly to the utility company on the resident’s behalf. If the Authority elects to pay the utility company directly, it will notify the resident of the amount paid.

Attachment A

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Regulations	Revised Annual Plans
X	State/Local Government Certification of Consistency with the Plan	5 Year and Annual Plans
X	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
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction in which the PHA is located and any additional backup data statement of housing needs in the jurisdiction	Additional Plan Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents and policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	PHAS Plan: Management and Operations

Applicable & On Display	Supporting Document	Applicable Plan Component
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAS)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing program <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Self-evaluation, Needs Assessment and Transition Plan required by § 504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart _____	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other relevant grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> • Baseline law enforcement services for public housing developments assisted under the PHDEP plan; • Consortium agreement/s between the PHAs participating in the 	Annual Plan: Safety and Crime Prevention

Applicable & On Display	Supporting Document	Applicable Plan Component
	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); <ul style="list-style-type: none"> • 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. 	
X	Policy on Ownership of Pets in Public Housing Family Development (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Public Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

ATTACHMENT B

Statement/Performance and Evaluation Report

PHA Name: **Baird Housing Authority** Grant Type and Number **CFP TX21P19750201** Federal FY of Grant:

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements		2,400.00		
4	1410 Administration		6,665.00		
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs		19,488.00		
8	1440 Site Acquisition				
9	1450 Site Improvement		36,476.00		
10	1460 Dwelling Structures		21,550.00		
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)		86,579.00		
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				

Name/HA-Wide Activities				Original	Funds Obligated		Funds Expended

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

PHA Name:	Baird Housing	Grant Type and Number CFP TX21P19750201			Federal FY of Grant:		
		Capital Fund Program #:					
		Capital Fund Program					
		Replacement Housing Factor #:					
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Funds Obligated		Funds Expended
	Provide funds for training	1408		2,400.00			
	Housing Authority needs part time help during CFP	1410		3,769.00			
	Provide funds for sundry items and travel	1410		2,896.00			
	Housing Authority needs on-site inspector to oversee construction	1430		6,367.00			
	Hire an Architect/Engineer to develop plans and specifications	1430		9,321.00			
	Provide funds for reproduction	1430		800.00			
	Hire a consultant to assist in preparing plan	1430		3,000.00			

Name/HA-Wide Activities				Original	Revised Obligated		Funds Expended

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Baird Housing		Grant Type and Number			Federal FY of Grant:		
		Capital Fund Program #:					
		Capital Fund Program Replacement Housing Factor #:					
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TX197-001	12/31/03			12/31/04			
TX197-002	12/31/03			12/31/04			
TX197-003	12/31/03			12/31/04			
HA WIDE	12/31/03			12/31/04			

	Original	Revised	Actual	Original	Revised	Actual	

ATTACHMENT C

Capital Fund Program 5-Year Action Plan

CFP 5-Year Action Plan				
Original statement	Revised statement			
Development Number	Development Name (or indicate PHA wide)			
TX197-001	Baird Housing Authority			
Description of Needed Physical Improvements or Management Improvements	Estimated	Cost	Planned Start Date (HA Fiscal Year)	
Remove existing kitchen cabinets in their entirety and replace with new wood kitchen cabinets including stainless steel sinks	25,008.00		2003	
Replace existing sewer distribution with new PVC lines	14,304.00		2004	
Total estimated cost over next 5 years	39,312.00			

CFP 5-Year Action Plan				
Original statement	Revised statement			
Development Number	Development Name (or indicate PHA wide)			
TX197-002	Baird Housing Authority			
Description of Needed Physical Improvements or Management Improvements	Estimated	Cost	Planned Start Date (HA Fiscal Year)	
Replace exterior storage closet with new	15,180.00		2003	
Replace existing sewer distribution with new PVC lines	14,304.00		2003	

Total estimated cost over next 5 years	29,484.00	

CFP 5-Year Action Plan

Original statement	Revised statement		
Development Number	Development Name (or indicate PHA wide)		
TX197-003	Baird Housing Authority		
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)	
Resurface existing parking and handicapped parking including stripping	89,556.00	2002	
Replace existing sewer distribution with new PVC lines	21,668.00	2004	
Total estimated cost over next 5 years	111,224.00		

CFP 5-Year Action Plan

Original statement	Revised statement			
Development Number	Development Name (or indicate PHA wide)			
HA WIDE	Baird Housing Authority			
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)		
Purchase a new pickup with Tommy Lift	30,000.00	2003		
Provide funds for training	9,600.00	2002-2005		
Hire part time help.	15,076.00	2002-2005		
Provide funds for sundry items and travel	11,584.00	2002-2005		
Hire an inspector to over see construction	25,468.00	2002-2005		
Hire an Architect to develop plans and specifications	37,284.00	2002-2005		
Provide funds for reproduction	3,200.00	2002-2005		
Hire a consultant to assist in preparing plan	12,000.00	2002-2005		
Purchase ranges, refrigerators, and hot water heaters.	8,550.00	2002-2005		
Replace heat pumps as needed.	13,536.00	2002-2005		
Total estimated cost over next 5 years	166,298.00			

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

B. Amount of PHDEP Grant \$ _____

C. Eligibility type (Indicate with an “x”) **N1**_____ **N2**_____ **R**_____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total # of Individuals Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an “x” to indicate the length of program by # of months. For example, if the program is for 24 months, indicate “x” in the 24 month column). Identify the # of months).

12 Months _____ 18 Months _____ 24 Months _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously awarded or been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the Grant. ~~The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.~~

	PHDEP Funding Received	Grant #	Fund Balance as of Date of Submission	Anticipated Completion Date	Grant Start Date	Grant Term End
FY 1997						
FY 1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

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

FFY _____ PHDEP Budget Summary	
Budget Line Item	Total Funding
0 - Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	

9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	

PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded cells. Information provided must be consistent and not exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement

Total PHDEP Funding: \$

Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative

Total PHDEP Funding: \$

Goal(s)	
Objectives	

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match	Total PHDEP Funding: \$
------------------------------------	--------------------------------

Goal(s)	
Objectives	

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel	Total PHDEP Funding: \$
----------------------------------	--------------------------------

Goal(s)	
Objectives	

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
---------------------	---------------------	-------------------	------------	--------------------------	---------------	-------------------------------	------------------------

1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

2.							
3.							

9150 - Physical Improvements	Total PHDEP Funding: \$
-------------------------------------	--------------------------------

Goal(s)	
Objectives	

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention	Total PHDEP Funding: \$
-------------------------------	--------------------------------

Goal(s)	
Objectives	

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Total PHDEP Funding: \$

9170 - Drug Intervention

Goal(s)										
Objectives										
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators			
1.										
2.										
3.										

9180 - Drug Treatment

Total PHDEP Funding: \$

Goal(s)										
Objectives										
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators			
1.										
2.										
3.										

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Completion Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment D: Resident Member on the PHA Governing Board

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

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

Henry Etta Hord

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

- Elected
 Appointed

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

February 1, 2000 thru January 31, 2002

5. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
- the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
- Other (explain):

B. Date of next term expiration of a governing board member:

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

Required Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Susie Tomlinson

Jimmy Haley

Required Attachment E: Comments of Resident Advisory Board

Mr. Haley stated he wanted the following items:

2. Would like cabinets lowered at top or new ones.
3. Lights in clothes closets.
4. Tres trimmed
5. Cracks in front porch need either paint or corrected.

He also stated that it would probably warm weather before any of these can be done.