

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year: 2002

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

## PHA Plan Agency Identification

**PHAName:** Phil Campbell Housing Authority

**PHANumber:** AL090

**PHAFiscalYearBeginning:(mm/yyyy)** 07/01/2002

### PHA Plan Contact Information:

Name: John C. O'Neal

Phone: (256) 332-1561

TDD: (256) 332-1568

Email (if available): joneal@getaway.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 2001

[24 CFR Part 903.7]

### i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the filename in parentheses in the space to the right of the title.

<b>Contents</b>	<u>Page#</u>
<b>Annual Plan</b>	
i. Executive Summary (optional)	2
ii. Annual Plan Information	2
iii. Table of Contents	1
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2. Capital Improvement Needs	2
3. Demolition and Disposition	3
4. Homeownership: Voucher Homeownership Program	3
5. Crime and Safety: PHDEP Plan	4
6. Other Information:	4
A. Resident Advisory Board Consultation Process	4
B. Statement of Consistency with Consolidated Plan	5
C. Criteria for Substantial Deviations and Significant Amendments	6

#### **Attachments**

- Attachment A: Supporting Documents Available for Review
- Attachment \_\_: Capital Fund Program Annual Statement 09050102.v1
- Attachment \_\_: Capital Fund Program 5 Year Action Plan 09050102.v1
- Attachment \_\_: Capital Fund Program Replacement Housing Factor Annual Statement
- Attachment \_\_: Public Housing Drug Elimination Program (PHDEP) Plan
- Attachment\_B\_: Resident Membership on PHA Board or Governing Body
- Attachment\_C\_: Membership of Resident Advisory Board or Boards
- Attachment \_\_: 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)

CIAP  
al09090799.v1  
CFP  
Al09050100.v1  
Al09050101.v1

**ii. Executive Summary**

[24CFR Part 903.79(r)]

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

**The Housing Authority of Phil Campbell has prepared this Agency Plan in compliance with Section 51 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.**

**We have adopted the following mission statement to guide the activities of the Housing Authority of Phil Campbell:**

**The mission of the Housing authority of Phil Campbell is to promote adequate affordable housing, economic opportunity, and suitable living environment for the families we serve, without discrimination.**

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

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

**None**

**2. Capital Improvement Needs**

[24CFR Part 903.79(g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

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

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 123,000

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

D. Capital Fund Program Grant Submissions

**(1) Capital Fund Program 5 - Year Action Plan**

The Capital Fund Program 5 - Year Action Plan is provided as Attachment 09050102.v1

**(2) Capital Fund Program Annual Statement**

The Capital Fund Program Annual Statement is provided as Attachmental09050102.v1

**3.D Demolition and Disposition**

[24CFR Part 903.79(h)]

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

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

2. Activity Description

<b>Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)</b>	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: <u>          (DD/MM/YY)          </u>	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for           units <input type="checkbox"/> Public housing for           units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for           units (describe below)	
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

**4. Voucher Homeownership Program**

[24CFR Part 903.79(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 down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment 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**

[24CFR Part 903.7(m)]

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

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

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

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

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

**6. Other Information**

[24CFR Part 903.79(r)]

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

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

2. If yes, the comments are Attached at Attachment (Filename)

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

- The PHA changed portions of the PHA Plan in response to comments. A list of these changes is included
  - Yes  No: below
  - Yes  No: at the end of the RAB Comments in Attachment \_\_\_\_\_.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment \_\_\_\_\_.
- Other: (list below)

**B. Statement of Consistency with the Consolidated Plan**

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

1. Consolidated Plan jurisdiction: STATE OF ALABAMA

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

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

3. PHA Requests for support from the Consolidated Plan Agency

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

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) **The Housing Authority of Phil Campbell has prepared this Agency Plan in compliance with Section 511 of the Quality**

# Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements these requirements support the Consolidated Plan of Alabama.

## C. Criteria for Substantial Deviation and Significant Amendments

### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

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

#### A. Substantial Deviation from the 5-year Plan:

Substantial Deviation Policy

Policy defining a substantial deviation and change in the agency plan

Phil Campbell Housing Authority will consider the following actions to be significant amendments or modifications: Change to rent or admission policies organization of the waiting list. Additions of non-emergency work items (items not included in the current Annual Statement of 5-Year Action Plan) or change in use of replacement reserve funds under Capital Fund. Additions of new activities not included in the current PHDEP Plan. Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements, such changes will not be considered significant amendments by HUD.

#### B. Significant Amendment or Modification to the Annual Plan:

none

**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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
N/A	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	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 method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
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, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any required policies governing any Section 8 special housing types <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 Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI 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 regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH99 -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	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· 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);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· 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.</li> </ul>	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)



**Required Attachment \_\_B\_\_: Resident Member on the PHA Governing Board**

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

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

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

- Elected
- Appointed

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

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

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

B. Date of next term expiration of a governing board member: April 2002

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

**Required Attachment C: Membership of the Resident Advisory Board or Boards**

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

The PHA doesn't have a Resident Advisory Board at this time. The Russellville Housing Authority has taken control of the management of the PHA this was effective the 29<sup>th</sup> of October 2001. This problem will be addressed as soon as possible by the new management.

**OTHER ATTACHMENTS**

**(6) Deconcentration and Income Mixing**  
**Component 3, (6) Deconcentration and Income Mixing**

- a.  Yes  No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b.  Yes  No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

<b>Deconcentration Policy for Covered Developments</b>			
<b>Development Name :</b>	<b>Number of Units</b>	<b>Explanation (if any) [see step 4 at §903.2(c)(1) (iv)]</b>	<b>Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]</b>
90-1 Underwood Circle	20	All Incomes Below 85%	See Attached Policy
90-2 Nix Road Apts.	22	All Incomes Below 85%	See Attached Policy
90-4 Stalcup Circle	22	All Incomes Below 85%	See Attached Policy

**Deconcentration Rule for Public Housing**

- Objective: The objective of the Deconcentration Rule for public housing units is to ensure that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development. The specific objective of the housing authority is to house no less than 40% of its public housing inventory with families that have below 30% of the area median income by public housing development. Also the housing authority will take action to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the housing authority does not concentrate families with higher income levels, it is the goal of the housing authority not to house more than 60% of its units in any one development with families whose income exceeds 30% of the area median income. The housing authority will track the status of family income, by development, on a monthly basis by utilizing income reports generated by the housing authority's computer system.
- Actions: To accomplish deconcentration goals, the housing authority will take the following action: At the beginning of each housing authority fiscal year, the housing authority will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be

calculated by taking 40% of its new admissions with families whose incomes are or below the area median income. The annual goal will be calculated by taking 40% of the total number of moves from the previous housing authority fiscal year.

3. To Accomplish the goal of:
  - a. Housing not less than 40% of its public housing inventory on an annual basis with families that have incomes at or below 30% of area median, and no housing families with incomes that exceed 30% of the area median income in development with incomes that exceed 30% of the area median income. The housing authority's Tenant Selection and Assignment Plan, which is a part of this policy, provides for skipping families on the waiting list to accomplish these goals.

### ***Voluntary Conversion of Public Housing Development Analysis Required Initial Assessment***

**HOUSING AUTHORITY OF:** PHIL CAMPBELL, ALABAMA

***Determination of requirement for initial assessment:***

This assessment must be completed once for each of the authority's developments, unless the development falls under one of the four following categories:

1. The development has already been determined to be subject to mandatory conversion under 24 CFR part 971;
2. The development is the subject of an application for demolition or disposition that has not been disapproved by HUD;
3. The development has been awarded a HOPEVI revitalization grant; or
4. The development is designated for occupancy by the elderly and/or persons with disabilities (i.e., is not a general occupancy development).

*Please complete this table for all developments of your PHA to determine if an initial assessment is required.*

***\*If any question is answered yes, development is exempt from the voluntary conversion requirements.***

<b>DEV. NUMBER</b>	<b>DEVELOPMENT NAME</b>	<b>*IS THE DEV. SUBJECT TO MANDATORY CONVERSION?</b>	<b>*ISA DEMOLITION APPLICATION PENDING?</b>	<b>*IS THE DEV. DESIGNATED ELDERLY/DISABLED?</b>	<b>*DEV. HAS HOPEVI APPROVED?</b>	<b>IS DEV. EXEMPT?</b>
90-1	Underwood Circle	NO	NO	NO	NO	NO
90-2	Nix Road Apts.	NO	NO	NO	NO	NO
90-4	Stalcup Circle	NO	NO	NO	NO	NO


**Complete an individual development analysis for each development not exempt.  
 INDIVIDUAL DEVELOPMENT ANALYSIS  
 Voluntary Conversion of Public Housing Development Analysis  
 Required Initial Assessment**

**DEVELOPMENT NUMBER** AL09 P 90-1

*As required by 24 CFR Part 972 – Complete each section to determine if Conversion of Public Housing to Tenant -Based Assistance, maybe appropriate:*

<b>Necessary conditions for voluntary conversion:</b>
<ul style="list-style-type: none"> <li>• Will not be more expensive than continuing to operate the development (or portion of it) as public housing;</li> <li>• Will principally benefit the residents of the public housing development to be converted and the community; and</li> <li>• Will not adversely affect the availability of affordable housing in the community.</li> </ul>

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year \_\_\_\_\_ -end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: (BM) 193.62

b. Section 8 HUD 52681, Line 30\_57, 195 divided by Line 11: 139 = avg. unit cost 411.37

**(If you do not have Section 8, you may contact another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist)**

c. Is Line 1b higher? Yes X No \_\_\_\_\_

If line is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? YES \_\_\_\_\_  
 NO \_\_\_\_\_

a. Would the conversion adversely affect the availability of affordable housing in the

community? Yes \_\_\_ No \_\_\_\_\_

Comments:

[Empty comment box]

(The amount of low -income housing is currently insufficient as evidenced by the PH waiting list, by the number of unsuccessful Section 8 vouchers issued, etc. Not that the converted units could be sold, demolished or rented to market renters reducing the available units.)

b. Would the conversion provide the development residents with better housing choices? Yes \_\_\_ No \_\_\_\_\_

Comments:

[Empty comment box]

(There is (is not) an ample supply of better quality, affordable private rental units in the community, etc.)

c. Would the conversion help to de -concentrate low -income families in the community? Yes \_\_\_ No \_\_\_\_\_

Comments:

[Empty comment box]

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes \_\_\_ No \_\_\_\_\_

Comments:

[Empty comment box]

(Sell older unit on prime real estate and rebuild up -to-date units in more economical areas, etc.)

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? YES \_\_\_ NO \_\_\_

Comments:

[Empty comment box]

(Lack of affordable units in the area, long waiting lists for all affordable units, lack of vacancies in affordable units. What would loss of public housing units do to number of affordable units, i.e. vouchers only available on a year -to-year basis with no guarantee of future availability)

If line 3 is no, this development is not appropriate for conversion.

We have determined that conversion is:

\_\_\_ Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

\_\_X\_\_ Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

**All highlighted areas are provided for guidance and should be deleted when completed!**

\_\_\_\_\_  
Signature of Executive Director

\_\_\_\_\_  
Date

### **Voluntary Conversion of Public Housing Development Analysis Required Initial Assessment**

**DEVELOPMENT NUMBER AL09P** 90 -2

As required by 24 CFR Part 972 – Complete each section to determine if Conversion of Public Housing to Tenant -Based Assistance, may be appropriate:

<b>Necessary conditions for voluntary conversion:</b>
<ul style="list-style-type: none"> <li>• Will not be more expensive than continuing to operate the development (or portion of it) as public housing;</li> <li>• Will principally benefit the residents of the public housing development to be converted and the community; and</li> <li>• Will not adversely affect the availability of affordable housing in the community.</li> </ul>

2. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year \_\_\_\_\_ -end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: \_\_\_\_\_ (PUM) 193.62

b. Section 8 HUD 52681, Line 30\_57, 195 divided by Line 11: 139 = \_\_\_\_\_ avg. unit cost 411.47

(If you do not have Section 8, you may contact another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist)

c. Is Line 1b higher? Yes X No \_\_\_\_\_

If line is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? YES \_\_\_\_\_ NO \_\_\_\_\_

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes \_\_\_\_\_ No \_\_\_\_\_

Comments:

\_\_\_\_\_

(The amount of low -income housing is currently insufficient as evidenced by the PH waiting list, by the number of unsuccessful Section 8 vouchers issued, etc. Note that the converted units could be sold, demolished or rented to market renters reducing the available units.)

b. Would the conversion provide the development residents with better housing choices? Yes \_\_\_\_\_

No \_\_\_\_\_

Comments:

\_\_\_\_\_

(There is (is not) an ample supply of better quality, affordable private rental units in the community, etc.)

d. Would the conversion help to de-concentrate low-income families in the community?

Yes \_\_\_\_\_ No \_\_\_\_\_

Comments:

\_\_\_\_\_

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes \_\_\_\_\_ No \_\_\_\_\_

Comments:

\_\_\_\_\_

(Sell older units on prime real estate and rebuild up-to-date units in more economical areas, etc.)

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? YES \_\_\_\_\_ NO \_\_\_\_\_

Comments:

\_\_\_\_\_

(Lack of affordable units in the area, long waiting lists for all affordable units, lack of vacancies in affordable units. What would loss of public housing units do to number of affordable units, i.e. vouchers only available on a year-to-year basis with no guarantee of future availability)

If line 3 is no, this development is not appropriate for conversion.

We have determined that conversion is:

\_\_\_\_\_ Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

X  Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

All highlighted areas are provided for guidance and should be deleted when completed!

\_\_\_\_\_  
Signature of Executive Director

\_\_\_\_\_  
Date

**Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment**

DEVELOPMENT NUMBER AL09P \_\_\_\_\_ 90 -4 \_\_\_\_\_

As required by 24 CFR Part 972 – Complete each section to determine if Conversion of Public Housing to Tenant -Based Assistance, may be appropriate:

Necessary conditions for voluntary conversion:
<ul style="list-style-type: none"> <li>• Will not be more expensive than continuing to operate the development (or portion of it) as public housing;</li> <li>• Will principally benefit the residents of the public housing development to be converted and the community; and</li> <li>• Will not adversely affect the availability of affordable housing in the community.</li> </ul>

3. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year \_\_\_\_\_ -end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: \_\_\_\_\_ (PUM) \_\_ 193.62

b. Section 8 HUD 52681, Line 30\_57, 195 divided by Line 11: 139 \_\_\_\_ = \_\_\_\_\_ avg. unit cost 411.47 \_\_\_\_

(If you do not have Section 8, you may contact a \_\_\_\_\_ another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist)

c. Is Line 1b higher? Yes \_\_X\_\_ No \_\_\_\_

If line is yes, Section 8 is more expensive to operate and is not appropriate \_\_\_\_\_ for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? YES \_\_\_\_ NO \_\_\_\_

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes \_\_\_\_ No \_\_\_\_

Comments:

\_\_\_\_\_

(The amount of flow \_\_\_\_\_ -income housing is currently insufficient as evidenced by the PH waiting list, by the number of unsuccessful Section 8 vouchers issued, etc. No \_\_\_\_\_ tethat the converted units could be sold, demolished or rented to market renters reducing the available units.)

b. Would the conversion provide the development residents with better housing choices? Yes \_\_\_\_ No \_\_\_\_

Comments:

\_\_\_\_\_

(There is (is not) \_\_\_\_\_ an ample supply of better quality, affordable private rental units in the community, etc.)

e. Would the conversion help to de \_\_\_\_\_ -concentrate low -income families in the community? Yes \_\_\_\_ No \_\_\_\_

Comments:

[Empty comment box]

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes \_\_\_ No \_\_\_

Comments:

[Empty comment box]

(Sell older units on prime real estate and rebuild up -to-date units in more economical areas, etc.)

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? YES \_\_\_ NO \_\_\_

Comments:

[Empty comment box]

(Lack of affordable units in the area, long waiting lists for all affordable units, lack of vacancies in affordable units. What would loss of public housing units do to number of affordable units, i.e. voucher only available on a year -to-year basis with no guarantee of future availability)

If line 3 is no, this development is not appropriate for conversion.

**We have determined that conversion is:**

\_\_\_ Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

X Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

**All highlighted areas are provided for guidance and should be deleted when completed!**

\_\_\_\_\_  
Signature of Executive Director

\_\_\_\_\_  
Date

## CAPITAL FUND PROGRAM TABLES START HERE

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Phil Campbell Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09P09050102 Replacement Housing Factor Grant No:		Federal FY of Grant: 2002	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:      ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	12,300			
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	12,000			
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	9,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	84,700			
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				

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

PHAName: Phil Campbell Housing Authority	Grant Type and Number Capital Fund Program Grant No: AL09P09050102 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no:    )

Performance and Evaluation Report for Period Ending:  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	123,000			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				





**CapitalFundProgramFive -YearActionPlan**  
**PartI:Summary**

PHAName		<input checked="" type="checkbox"/> Original5 -YearPlan <input type="checkbox"/> RevisionNo:			
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant:501 -03 PHAFY:2003	WorkStatementforYear3 FFYGrant:501 -04 PHAFY:2004	WorkStatementforYear4 FFYGrant:501 -05 PHAFY:2005	WorkStatementforYear5 FFYGrant:501 -06 PHAFY:2006
AL090-1	Annual Statement			STARTRENOVATIONS 84,700	CONTINUE RENOVATIONS84,700
AL090-2		CONTINUERENOVATIONS 84,700	COMPLETERENVOATIONS STOVES84,700		
AL090-4					
AL090-1,2,4		A&EFEEADMIN,EQUIPMENT 38,300	A&EFEEADMIN,EQUIPMENT 38,300	A&EFEEADMIN, EQUIPMENT38,300	A&EFEEADMIN, EQUIPMENT38,300
TotalCFPFunds (Est.)		123,000	123,000	123,000	123,000
TotalReplacement HousingFactorFunds					



## CAPITAL FUND PROGRAM TABLES START HERE

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
PHA Name: Phil Campbell Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09P09050101 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2001</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )						
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total Non -CFP Funds					
2	1406 Operations	10,558				
3	1408 Management Improvements Soft Costs					
	Management Improvements Hard Costs					
4	1410 Administration	5,000				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	8,500				
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	84,000				
11	1465.1 Dwelling Equipment — Nonexpendable	6,400				
12	1470 Non Dwelling Structures					
13	1475 Non Dwelling Equipment	8,000				
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1502 Contingency					

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

PHAName: Phil Campbell Housing Authority	Grant Type and Number Capital Fund Program Grant No: AL09P09050101 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 12/31/01  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant (sum of lines.....)	122,458			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				







## CAPITAL FUND PROGRAM TABLES START HERE

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Phil Campbell Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09P09050100 Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	2,500.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	80,880.00			
11	1465.1 Dwelling Equipment — Nonexpendable	6,244.00			
12	1470 Nondwelling Structures	20,000.00			
13	1475 Nondwelling Equipment	8,000.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	2,400.00			
18	1499 Development Activities				
19	1502 Contingency				

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

PHAName: Phil Campbell Housing Authority	Grant Type and Number Capital Fund Program Grant No: AL09P09050100 Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 12/31/01  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant (sum of lines.....)	120,024.00			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				







## CAPITAL FUND PROGRAM TABLES START HERE

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Phil Campbell Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09P09090799 Replacement Housing Factor Grant No:		Federal FY of Grant: 1999	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations		113,601.00		
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	1,453.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	25,688.00			
10	1460 Dwelling Structures	72,660.00			
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	1,800.00			
18	1499 Development Activities				
19	1502 Contingency				

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

PHAName: Phil Campbell Housing Authority	Grant Type and Number Capital Fund Program Grant No: AL09P09090799 Replacement Housing Factor Grant No:	Federal FY of Grant: 1999
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: 1)  
 Performance and Evaluation Report for Period Ending: 12/31/01  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	113,601.00	113,601.00		
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security -- Soft Costs				
	Amount of Line XX related to Security -- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	21,210.00			
	Collateralization Expenses or Debt Service				





