

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

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: The Jacksonville Housing Authority, Alabama

PHANumber: AL -139

PHAFiscalYearBeginning:(07/2002)

PHA Plan Contact Information:

Name: Ms. Jenny Dothard

Phone: 256-435-2485

TDD: None

Email (if available): jha@cableone.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.

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X Attachment E: Resident Membership on PHA Board or Governing Body	
X Attachment F: Membership of Resident Advisory Board or Boards	
<input type="checkbox"/> Attachment_: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
X Other (List below, providing each attachment name)	
Attachment: G = Progress Report,	
Attachment: H = Resident Survey Follow-up plan	
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ii.Executi veSummary

[24CFRPart903.79(r)]

AtPHAAoption,provideabriefoverviewoftheinformationintheAnnualPlan

1.SummaryofPolicyorProgramChangesfortheUpcomingYear

Inthissection,brieflydescribchangesinpoliciesorprogramsdiscuss edinlastyear'sPHAPlanthatarenotcoveredinother sectionsofthisUpdate.

- 1 WehavediscontinuedtheCommunityservicepolicyandrequirements duetothefinalruleonCommunityservice.**
- 2 WehavealsoincludedourResidentSurveyfollow -upplantoi ncrease communicationbetweenthe residentsandAuthority.**
- 3 Weareintheprocessofdevelopingaprogramtoprovidehousingfor lawenforcementofficers.Wearedevelopingthisprogramtogiveour residentasinceofsecurityandtodetercriminalactivit yinour developments.**

2.CapitalImprovementNeeds

[24CFRPart903.79(g)]

Exemptions:Section8onlyPHAsarenotrequiredto completethiscomponent.

A.XYes No: IsthePHAeligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. WhatistheamountofthePHA'sestimatedoractual(ifknown)CapitalFundProgramgrant fortheupcomingyear?Estimated \$282,978.60=thisfigurewasestimatedbyanticipatingthe proposed15%budgetcutsfromcongress atthetimeofthedevelopmentofthisplan.The CapitalFundsannualstatementwasdevelopedusinglastyears fundingfigures.TheHousing Authoritywilladjustthestatementaccordinglywhenthefinalfiguresarepublished.

C.XYes No DoesthePHAplantoparticipateintheCapitalFundPrograminthe upcomingyear?Ifyes,completetherestofComponent7.Ifno,skiptonextcomponent.

D.CapitalFundProgramGrantSubmissions

(1)CapitalFundProgram5 -YearActionPlan

TheCapitalFundProgram5 -YearActionPlanisprovidedasAttachmentC

Attached Below

(2)CapitalFundProgramAnnualStatement

The Capital Fund Program Annual Statement is provided as Attachment B Attached Below

3.D Demolition and Disposition

[24CF R 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

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

4. Voucher Homeownership Program

[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 come 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. X 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? \$42,996 _____

C. X 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. X Yes No: The PHDEP Plan is attached at Attachment __D__

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).

This PHA plan is still consistent with the State consolidation plan.

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) The PHA has not deviated from its approved plan from 2000. If the PHA has deviations with its annual plan it will seek approval from the consolidation plan agency.

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 Consolidation plan and PHA plan are consistent and support each other's goals and objectives for serving the people 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: shall mean any action taken by the PHA that changes or modifies:

- 1 Rent or admission policies or organization of the waiting list;**
- 2 The Capital Fund Program plane either through the addition or deletion of items or projects from the list of planned activities or change in use of replacement reserves funds under capital funds; and**
- 3 Planned demolition or disposition, designation, homeownership programs or conversion activities.**

Exceptions. Exception to this definition will be made for any of the above actions that are made to reflect a change in HUD regulatory requirements.

B. Significant Amendment or Modification to the Annual Plan: shall mean any action taken by the PHA that changes or modifies:

- 1 Rent or admission policies or organization of the waiting list;**
- 2 The Capital Fund Program plane either through the addition or deletion of items or projects from the list of planned activities or change in use of replacement reserves funds under capital funds; and**
- 3 Planned demolition or disposition, designation, homeownership programs or conversion activities.**

Exceptions. Exception to this definition will be made for any of the above actions that are made to reflect a change in HUD regulatory requirements.

General. For the purposes of the 5 Year and Annual Public Housing Agency Plan any substantial deviation or significant amendment or modification to the plans will be subject to the review of the Resident Advisory Board and Full public hearing process requirements.

Attachment A Supporting Documents Available for Review

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

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Schedule of flat rents offered each public housing development X check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	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
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Public housing grievance procedures X check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for 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
	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
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 -52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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
	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
X	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 consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP plan. 	Annual Plan: Safety and Crime Prevention
	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) X check here if included in the public housing A&O Policy	Pet Policy

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
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
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X	Other supporting documents (optional) (list individually; use as many lines as necessary) Deconcentration Questions, Conversion Analysis	(specify as needed)

Attachment B

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program Grant No: ALO9P13950102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	\$13,000.00			
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$18,105.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$285,758.00			
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	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: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program Grant No: ALO9P13950102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
20	Amount of Annual Grant: (sum of lines 2 -19.....)	\$316,863.00			
	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				
24	Amount of line XX Related to Energy Conservation Measures	\$85,800.00			
	Collateralization Expense sor Debt Service				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages									
PHA Name: The Housing Authority of the City of Jacksonville			Grant Type and Number Capital Fund Program Grant No: AL09P13950102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001-2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
AL139 -3	New Prime Windows		1460		\$85,800				Budget
Roebuck Manor	New security window screens		1460		\$41,600				
	New Kitchen fixtures		1460		\$10,400				
	New range hoods and splash guards		1460		\$6,240				
	New Kitchen cabinets		1460		\$114,678				
	New entry deadbolt/passage assemblies		1460		\$6,240				
	Paint exterior porch posts, doors frames, and shutters		1460		\$20,800				
PHAWide	Operations		1406		\$13,000				
	Fee & Costs		1430		\$18,105				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program No: AL09P13950102 Replacement Housing Factor No:			Federal FY of Grant: 2001-2002		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
A1139 -003	9/30/03			12/30/04			
PHAWide							
1406	9/30/03			06/30/04			
1430	9/30/03			06/30/04			

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHAName: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program Grant No: ALO9P13950101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
<input type="checkbox"/> original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X 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	\$13,390.00				
3	1408 Management Improvements Soft Costs					
	Management Improvements Hard Costs					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$18,086.00				
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	\$301,440.00		\$270,064.98		
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	1499 Development Activities					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2 - 19.....)	\$332,916.00				
	Amount of line XX Related to LBP Activities					

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHAName: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program Grant No: ALO9P13950101 Replacement Housing Factor Grant No:		Federal FY of Grant: 2001
<input type="checkbox"/> original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)				
X 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
	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			
24	Amount of line X X Related to Energy Conservation Measures	\$85,800.00		
	Collateralization Expenses or Debt Service			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages									
PHA Name: The Housing Authority of the City of Jacksonville			Grant Type and Number Capital Fund Program Grant No: AL09P13950101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001-2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
AL139 -Profile and eastwood homes	New Window Security Screens New Ceramic Tile Bath Installation of new bath doors and frames and related demolition		1460	\$44,000 \$57,600 \$75,000					Budget
AL139 -3 Church Street and East Vann Homes	New Window Security screens		1460	\$39,040					
AL139 -3 Roebuck Manor	Install new primewindow units		1460	\$85,800					
PHAWide	Operations Fees and cost		1406 1430	\$13,390 \$18,086					
	Total anticipated expenditures for FFY 2001			\$332,916.					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages									
PHAName: The Housing Authority of the City of Jacksonville			Grant Type and Number Capital Fund Program Grant No: AL09P13950101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001-2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program No: AL09P13950101 Replacement Housing Factor No:			Federal FY of Grant: 2001-2002		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide							
1406	9/30/02			6/30/03			
1430	9/30/02			6/30/03			
AL-139-1	9/30/02			12/30/02			
AL-139-2	9/30/02			06/30/03			
AL-139-3	9/30/02			12/30/03			

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHAName: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program Grant No: ALO9P13950100 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:)					
X 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	\$30,000	\$50,000	\$50,000	\$50,000
3	1408 Management Improvements Soft Costs	\$3,500		0	
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$14,494.	23,694	23,694	\$17,774.98
8	1440 Site Acquisition				
9	1450 Site Improvement	49,200	\$49,000	\$49,000	0
10	1460 Dwelling Structures	\$203,958	\$201,193	\$201,193	0
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$20,000	0	0	0
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	\$6,435			0
					0
	Amount of Annual Grant: (sum of lines.....)	\$327,587			\$67,774.98
	Amount of line XX Related to LBP Activities		\$118,408		0

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHAName: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program Grant No: ALO9P13950100 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:)					
X 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	
	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				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages							
PHA Name: The Housing Authority of the City of Jacksonville		Grant Type and Number Capital Fund Program Grant No: AL09P13950100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work

Attachment C

Capital Fund Program Five - Year Action Plan

Part I: Summary

PHANameThe Housing Authority of the City of Jacksonville					<input checked="" type="checkbox"/> Original 5 - Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: AL09P13950103 PHAFY:2003	Work Statement for Year 3 FFY Grant: AL09P13950104 PHAFY:2004	Work Statement for Year 4 FFY Grant: AL09P13950105 PHAFY:2005	Work Statement for Year 5 FFY Grant: AL09P13950106 PHAFY:2006	
AL139 -1	Annual Statement	New electric ranges, New kitchen and bath fixtures and related, New lighting fixtures, Repair, seal and restripe parking areas	Landscape work, repair damaged ceilings, new heaters, new kitchen cabinets		Vinyl siding and trim	
AL139 -2		New electric ranges, new deadbolt locks/passage assemblies, New lighting fixtures, Repair, seal and restripe parking areas		New kitchen and bath fixtures and related, New hoods with splash guards, landscape work, New lighting fixtures		
AL139 -3		New steel storm doors, New kitchen and bath fixtures and related, New lighting fixtures, New water heaters		New electric ranges, New hoods with splash guards, Landscape work, Vinyl siding and trim		
AL139 -8				New water heaters, New electric ranges and refrigerators	New heat pumps, Repair, seal and restripe parking areas, landscape work, New vinyl siding and trim, new entry locks and passage sets, New roof shingles and related accessories	

Total CFP Funds (Est.)				
Total Replacement Housing Factor Funds				

**Capital Fund Program Five - Year Action Plan
Part II: Supporting Pages — Work Activities**

Activities for Year 1	Activities for Year: <u>2</u> FFY Grant: 2003 PHAFY: 2003			Activities for Year: <u>3</u> FFY Grant: 2004 PHAFY: 2004		
AL139 -1	New electric ranges, New steel doors, New kitchen and bath fixtures and related, New lighting fixtures, Repair, seal and restripe parking areas	\$122,440	AL139 -1	Landscape work, repair damaged ceilings, new heaters, new kitchen cabinets	\$246,600	
AL139 -2	New electric ranges, new dead bolt locks/ passage assemblies, New lighting fixtures, Repair, seal and restripe parking areas	\$72,500	AL139 -2			
AL139 -3	New steel storm doors, New kitchen and bath fixtures and related, New lighting fixtures, New water heaters	\$123,400	AL139 -3	New electric lighting fixtures	\$22,360	
AL139 -8	none	0	AL139 -8			
PHA Wide	Operations, management improvements, Fees and cost, modernization used for developments	\$100,100	PHA Wide	Operations, management improvements, Fees and cost, modernization used for developments	\$100,100	

**Capital Fund Program Five - Year Action Plan
Part II: Supporting Pages — Work Activities**

Activities for Year 4	Activities for Year: <u>4</u> FFY Grant: 2005 PHA FY: 2005			Activities for Year: <u>5</u> FFY Grant: 2006 PHA FY: 2006		
	AL139 -1			AL139 -1	Vinyl siding and trim	\$72,000
	AL139 -2	New kitchen and bath fixtures and related, New hood with splash guards, landscape work, New lighting fixtures	\$217,500	AL139 -2		
	AL139 -3	New electric ranges,, New water heaters	\$55,800	AL139 -3		
	AL139 -8	New water heaters, New electric ranges and refrigerators	\$26,875	AL139 -8	New heat pumps, Repair, seal and restripe parking areas, landscape work, New vinyl siding and trim, new entry locks and passage sets, New roof shingles and related accessories	\$169,750
	PHAWide	Operations, management improvements, Fees and cost, modernization used for developments	\$100,100	PHAWide	Operations, management improvements, Fees and cost, modernization used for developments	\$100,100

Attachment D

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.

Annual PHDEP Plan Table of Contents:

- 1. General Information/History**
- 2. PHDEP Plan Goals/Budget**
- 3. Milestones**
- 4. Certifications**

Section 1: General Information/History

A. Amount of PHDEP Grant \$ 42,996

B. Eligibility type (Indicate with an "x") N1 _____ N2 _____ R X _____

C. FFY in which funding is requested 2001

D. Executive Summary of Annual PHDEP Plan

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

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
All 139 -1,2,3 and 8	175	700

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 "Other", identify the # of months).

6 Months _____ **12 Months** X _____ **18 Months** _____ **24 Months** _____ **Other** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs havenot been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant#	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date
FY1995	75,000	AL09DEP1391195	0		
FY1996	87,500	AL09DEP1391195	0		
FY1997	52,500	AL09DEP1391197	0		
FY1998	52,500	AL09DEP1391198	0		
FY1999	38,490	AL09DEP1391199	0	0	0
FY2000	40,114	AL09DEP1391100	35,114	0	1/31/03
FY2001	42,996	AL09DEP1391101	42,996	0	1/31/04

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, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

Due to the limited funds available for this small, high performing PHA our preventing program will consist of reimbursement for additional police patrol above the baseline and hiring a program coordinator who will coordinate prevention activities with internal and external sources to meet the overall objectives of this program---preventing the influx of drug, criminal, and gang activity.

B. PHDEP Budget Summary

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

FY_2001__PHDEP Budget Summary

BudgetLineItem	TotalFunding
9110 -Reimburseme ntofLawEnforcement	\$12,000
9120 -SecurityPersonnel	
9130 -EmploymentofInvestigators	
9140 -VoluntaryTenantPatrol	
9150 -PhysicalImprovements	
9160 -DrugPrevention	\$30,996
9170 -DrugIntervention	
9180 -DrugTreatment	
9190 -Other ProgramCosts	
TOTALPHDEPFUNDING	\$42,996

C. 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 boxes. Information provided must be concise — not to 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: \$12,000		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1. 16.5 hours additional patrols per week			02/01/2002	02/01/2003	2001		Crime Data
2.							
3.							

9120 - Security Personnel N/A					Total PHDEP Funding: \$0		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators N/A					Total PHDEP Funding: \$0		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol N/A					Total PHDEP Funding: \$0		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements N/A					Total PHDEP Funding: \$0		
Goal(s)							
Objectives							

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

9160 -Drug Prevention					Total PHEDEP Funding: \$30,996		
Goal(s)							
Objectives							
Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1 Coordinate prevention activities	700	700	02/01/2002	01/31/2003	2001v	0	Crime Data and activity participation
2.							
3.							

9170 -Drug Intervention N/A					Total PHEDEP Funding: \$0		
Goal(s)							
Objectives							
Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							

3.							
----	--	--	--	--	--	--	--

9180 -DrugTreatmentN/A					TotalPHDEPFun ding:\$0		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.							
2.							
3.							

9190 -OtherProgramCos tsN/A					TotalPHDEPFunds:\$0		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.							
2.							
3.							

Section3:Expenditure/ObligationMilestones

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

Budget Line Item#	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended (sum of the activities)	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated (sum of the activities)
<i>e.g Budget Line Item#9120</i>	<i>Activities 1,3</i>		<i>Activity 2</i>	
9110	\$12,000			
9120				
9130				
9140				
9150				
9160	\$30,996			
9170				
9180				
9190				
TOTAL	\$42,996			

Section 4: Certifications

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the “PHA Certifications of Compliance with the PHA Plan and Related Regulations.”

Required Attachment E: Resident Member on the PHA Governing Board

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

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

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

B. Date of next term expiration of a governing board member: 3/11/02

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

The Housing Authority has a letter from the Mayor that explains none of the residents have volunteered or have expressed any interest in serving on the board.

Required Attachment ___ F ___: Membership of the Resident Advisory Board or Boards

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

- 1 Shannon Maddox -President/Secretary
5088th Ave. Apt#8
Jacksonville, Alabama 36265
- 2 April Smith -Vice President
723 Church Ave. S.E.
Jacksonville, Alabama 36265
- 3 Sandra Askew -Asst. Secretary
316A Vann St. S.E.
Jacksonville, Alabama 36265

Required Attachment ___ G ___: Progress in Meeting 5 Year Goals

The long -range scope of the Authority is to improve the facilities and community for all its residents. The Authority plans to make modernization and site improvements for each development as planned in its 5 year capital funds budget. The Authority is also planning to pursue additional section 8 vouchers for the disabled, elderly and the mentally ill that they become available.

The Authority will continue to serve the HA community not only by providing them with decent housing but also by improving the community of its residents.

Required Attachment ___ H ___: Resident Survey Follow -up Plan

THE HOUSING AUTHORITY OF THE CITY OF JACKSONVILLE FOLLOW UP PLAN FOR CUSTOMER SERVICE AND SATISFACTION SURVEY

The Housing Authority of the City of Jacksonville is dedicated to providing its residents with customer service and satisfaction. This plan is a result of the survey conducted by REAC for the year 2001. The results of the survey showed the

residents of the Jacksonville Housing Authority were dissatisfied in the communication of the Authority. The result of the survey ranked the Authority's Communication = 69.01%

The Housing Authority's plan is to address this concern by first conducting its own survey to identify specific concerns and suggestions from its residents. A copy of this survey will be included in this plan as an attachment. After the survey is completed, the Authority will address each concern and develop methods to attempt to satisfy its residents.

METHODS AND STRATEGIES FOR ADDRESSING CONCERNS

The methods and strategies the Authority will use are as follows:

Communications

- 1 Arrangements to communicate with residents by holding meetings, surveys, flyers, community bulletin boards or individual interviews on a quarterly basis.
- 2 Ensure there is adequate internal PHA communication.
- 3 Assist and encourage residents to be part of the solution, by joining or developing committees/organizations that can help improve the community.
- 4 Notify residents of improvements being made to the developments by delivering flyers and placing flyers on the Housing Authority bulletin board.

With this plan we are confident the concerns and needs of the residents will be considered and evaluated. After the evaluation is completed the Authority will take all necessary actions to satisfy its residents' concerns. The planned date for implementation is March 2002.

THE HOUSING AUTHORITY OF THE CITY OF JACKSONVILLE RESIDENT SATISFACTION FOLLOW UP SURVEY

The results are back from the residents satisfaction survey that was sent out to randomly selected residents. The survey indicated our residents were not satisfied with communications.

This survey will be sent out by HUD each year. In order to improve our score, please take a few minutes to answer the following questions:

How could communications between the office staff and residents be improved?

What would you like our office staff to do that is not already being done to inform you?

What can we do to keep you better informed about what is going on with the Authority?

Do you think the staff is courteous? _____

Why do you feel the staff is not responsive to your concerns?

Would you like to participate in a resident organization? _____

Please take a few minutes to complete this survey. You do not have to sign or put your name anywhere on it. There is a box in the front lobby to place it in. Please return this survey when you pay your rent.

Thank you for your cooperation.

Sincerely,

Jenny S. Dothard
Executive Director

Attachment I :

Component 10(B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? four
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? None
- c. How many Assessments were conducted for the PHA's covered developments? four

- d. **Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:**

Development Name	Number of Units
N/A	N/A

- e. **If the PHA has not completed the Required Initial Assessments, describe the status of these assessments. Completed October 4, 2001**

ATTACHMENT J: DECONCENTRATION

____ Yes __X__ 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.

____ Yes __X__ 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.