

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

## **PHA Plan Agency Identification**

**PHA Name:** Warren Housing Authority

**PHA Number:** AR082

**PHA Fiscal Year Beginning:** (01/2002)

### **PHA Plan Contact Information:**

Name: Mike Jolley

Phone: 870-226-2600

TDD:

Email (if available): wha@seark.net

### **Public Access to Information**

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

- XX 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)

- XX 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)

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

### **PHA Programs Administered:**

XX Public Housing and Section 8      Section 8 Only      Public Housing Only

## **Annual PHA Plan**

## Fiscal Year 2002

[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 file name in parentheses in the space to the right of the title.

	<b>Contents</b>	<b><u>Page #</u></b>
<b>Annual Plan</b>		
.Table of Contents		3
.Executive Summary (optional)		4
.Annual Plan Information		4
.Description of Policy and Program Changes for the Upcoming Fiscal Year		4
.Capital Improvement Needs		4
.Demolition and Disposition		4-5
.Homeownership: Voucher Homeownership Program		5
.Crime and Safety: PHDEP Plan		6
.Other Information:		6-7
. Resident Advisory Board Consultation Process		
. Statement of Consistency with Consolidated Plan		
. Criteria for Substantial Deviations and Significant Amendments		
<b>Attachments</b>		
XX Attachment A: Supporting Documents Available for Review		
XX Attachment B: Capital Fund Program Annual Statement-1999		
XX Attachment C: Capital Fund Program Annual Statement-2000		
XX Attachment D: Capital Fund Program Annual Statement-2002		
XX Attachment E: Capital Fund Program 5 Year Action Plan		
Attachment __: Capital Fund Program Replacement Housing		
Factor Annual Statement		
Attachment __: Public Housing Drug Elimination Program		
(PHDEP) Plan		
XX Attachment F: Resident Membership on PHA Board or Governing Body		
XX Attachment G: 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)		

### **ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

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

Page 3

### **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.

There were no changes in policies or programs in preparation of this year's update. Since the initial program started in 2000, we have completed several much needed tasks. The PHA has greatly improved the quality of life of all the residents in our 171 unit development. Our community has appreciated the funds being spent on upgrading public housing units as well as seeing their tax dollars at work. We will continue to strive the importance of providing a decent, safe, and sanitary place for our low income individuals to live.

The Warren Housing Authority disagrees with the survey to change public housing units to Section 8 vouchers. We currently have 47 vouchers which at times are very hard to issue because of finding adequate housing in this area. We have a great need for additional housing for both low and moderate income individuals. As a member of the industrial corporation we are currently trying to address this issue but finding developers has been problematic.

## **2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

A. XX 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? \$ 275,000.00

C. XX 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 E

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

The Capital Fund Program Annual Statement is provided as Attachment D

## **3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

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

## 2. Activity Description

### **Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)**

1a. Development name: 1b. Development (project) number:

2. Activity type: Demolition Disposition

3. Application status (select one) Approved Submitted, pending approval Planned application

4. Date application approved, submitted, or planned for submission: (DD/MM/YY)

5. Number of units affected: 6. Coverage of action (select one) Part of the development Total development

7. Relocation resources (select all that apply) Section 8 for units Public housing for units Preference for admission to other public housing or section 8 Other housing for units (describe below)

8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

### **4. Voucher Homeownership Program**

[24 CFR Part 903.7 9 (k)]

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

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

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

Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources

Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

Page 5

### **5. Safety and Crime Prevention: PHDEP Plan**

[24 CFR Part 903.7 (m)]

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

. Yes XX 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 XX 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**

[24 CFR Part 903.7 9 (r)]

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

1. Yes XX 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 (File name)

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 or

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 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: (Arkansas)

Page 6

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)

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

. PHA Requests for support from the Consolidated Plan Agency

Yes XX 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)

### **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:**

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

### **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

- XX PHA Plan Certifications 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
  - 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
- XX 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
- XX Most recent board-approved operating budget for the public housing program Annual Plan: Financial Resources
- XX Public Housing Admissions and (Continued) Occupancy Policy (A&O/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 check here if included in the public housing A&O Policy Annual Plan: Eligibility, Selection, and Admissions Policies
- XX Section 8 Administrative Plan 2002 Annual Plan: Eligibility, Selection, and Admissions Policies
- XX Public housing rent determination policies, including the method for setting public housing flat rents X check here if included in the public housing A & O Policy 2002 Annual Plan: Rent Determination
  - Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy Annual Plan: Rent Determination
- XX Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan 2002 Annual Plan: Rent Determination
- XX Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation) 2002 Annual Plan: Operations and Maintenance
- XX Results of latest binding Public Housing Assessment System (PHAS) Assessment
  - Annual Plan: Management and Operations
- XX Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)
  - Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
- XX Results of latest Section 8 Management Assessment System (SEMAP) Annual Plan: Management and Operations
  - Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan Annual Plan: Operations and Maintenance
- XX Public housing grievance procedures X check here if included in the public housing A & O Policy Annual Plan: Grievance Procedures
- XX Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative Plan 2002 Annual Plan: Grievance Procedures
- XX The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year Annual Plan: Capital Needs
  
- XX Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants Annual Plan: Capital Needs
  - Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing Annual Plan: Capital Needs
  - 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  
 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 homeownership programs/plans Annual Plan:  
 Homeownership  
 Policies governing any Section 8 Homeownership program (section \_\_\_\_\_ of the Section 8  
 Administrative Plan) Annual Plan: Homeownership  
 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  
 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  
 The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual  
 performance report Annual Plan: Safety and Crime Prevention  
 PHDEP-related documentation: ú Baseline law enforcement services for public housing  
 developments assisted under the PHDEP plan; ú 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); ú  
 Partnership agreements (indicating specific leveraged support) with agencies/organizations  
 providing funding, services or other in-kind resources for PHDEP-funded activities; ú Coordination  
 with other law enforcement efforts; ú Written agreement(s) with local law enforcement agencies  
 (receiving any PHDEP funds); and ú 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  
 XX 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  
 XX 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  
 Other supporting documents (optional) (list individually; use as many lines as necessary)  
 (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: Warren Housing Authority      Grant Type and Number      Capital Fund Program: AR37P082906-99      Capital Fund Program  
 Replacement Housing Factor Grant No:      Federal FY of Grant: 09/1999

Original Annual Statement      Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 09/30/01      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				
4	1410 Administration	5830.00	-0-	-0-	-0-
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	15000.00	15000.00	15000.00	15000.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	186100.00	190816.16	190816.16	190816.16
11	1465.1 Dwelling Equipment-Nonexpendable	15250.00	15250.00	15250.00	12174.07
12	1470 Nondwelling Structures	37000.00	37000.00	37000.00	37000.00
13	1475 Nondwelling Equipment	10850.00	11963.84	11963.84	11963.84
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	270030.00	270030.00	270030.00	266954.07
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

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

PHA Name: Warren Housing Authority    Grant Type and Number    Federal FY of Grant 1999

Capital Fund Program #: AR37P082906-99

Capital Fund Program

Replacement Housing Factor #:

Development Number Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity Original	Total Estimated Cost		Total Acual Cost		Status of Proposed Work
				Revised	Funds	Funds	Obligated Expended	
HA-Wide	Architect to develop plans and specs for Physical work and administer contract	1430	15000.00			15000.00	15000.00	Completed
HA-Wide	Staff Training and Administration	1410	5830.00	-0-		-0-	-0-	
AR82-1	Install Heat & Air Units Alto Court	1460	135000.00			135000.00	135000.00	Completed
AR82-1	Replace entrance doors (292)	1460	51100.00	55816.16		55816.16	55816.16	Completed
AR82-1	Purchase interiors doors @ 150.00 each	1465.1	6250.00			6250.00	6250.00	Completed
AR82-1	Air Conditioners 15,000 BTU (15)	1465.1	9000.00			9000.00	5927.07	Ongoing
AR82-1	Build Washateria	1470	37000.00			37000.00	37000.00	Completed
AR82-1	Washing Machines (7)	1475	5600.00	6713.84		6713.84	6713.84	Completed
AR82-1	Gas Dryers (8)	1475	5250.00			5250.00	5250.00	Completed

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

PHA Name: Warren Housing Authority    **Grant Type and Number**    Capital Fund Program #: AR37P082906-99    Capital Fund Program Replacement Housing Factor #:  
**Federal FY of Grant:1999**

Development Number	Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original    Revised	Actual	Original	Revised	Actual		
AR82-1		10-31-1999			03-31-2001		

## Attachment C

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

**PHA Name: Warren Housing Authority**      **Grant Type and Number**      Capital Fund Program: AR37P082501-00      Capital Fund Program  
 Replacement Housing Factor Grant No:      **Federal FY of Grant: 09/2000**

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

**XX Performance and Evaluation Report for Period Ending: 09/30/01**      **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				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	15000.00		15000.00	11250.00
8	1440 Site Acquisition				
9	1450 Site Improvement	85000.00		85000.00	10000.00
10	1460 Dwelling Structures	176485.00		176485.00	140785.10
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures	23000.00		23000.00	9765.40
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	299485.00		299485.00	171800.50
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

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

PHA Name: Warren Housing Authority Grant Type and Number Federal FY of Grant 2000

Capital Fund Program #: AR37P082501-00

Capital Fund Program

Replacement Housing Factor #:

Development Number Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity Original	Total Estimated Cost		Total Acual Cost		Status of Proposed Work
				Revised	Funds	Funds	Obligated Expended	
HA-Wide	Architect to develop plans and specs for Physical work and administer contract	1430		15000.00		15000.00	11250.00	Ongoing
AR82-1	Parking Lot Repair Bryant Court & K-West	1450		85000.00		85000.00	10000.00	Ongoing
AR82-1	Foundation Repairs to 27-30 K-West and 51-54 K-West Area	1460		120000.00		120000.00	120000.00	Completed
AR82-1	Install new central air & heat units - Bryant Court	1460		51057.00		51057.00	20785.10	Ongoing
AR82-1	Interiors Doors (40)	1460		5428.00		5428.00	-0-	Ongoing
AR82-1	Remodel Community Room- new windows, outside siding, new outside entrance door, remodel kitchen	1470		23000.00		23000.00	9765.40	Ongoing

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

PHA Name: Warren Housing Authority    **Grant Type and Number**    Capital Fund Program #: AR37P082501-00    Capital Fund Program Replacement Housing Factor #:

**Federal FY of Grant: 2000**

Development Number	Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual		
AR82-1			09-30-2001			05-31-2003		

**Attachment D**

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

PHA Name: Warren Housing Authority      Grant Type and Number      Capital Fund Program:      Capital Fund Program  
 Replacement Housing Factor Grant No:      Federal FY of Grant: 09/2002

**XX 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	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	10000.00			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	15000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	248000.00			
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	275000.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

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

PHA Name: Warren Housing Authority Grant Type and Number Federal FY of Grant 2002

Capital Fund Program #:  
 Capital Fund Program  
 Replacement Housing Factor #:

Development Number Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity Original	Total Estimated Cost Revised	Total Acual Cost Funds Funds Obligated Expended	Status of Proposed Work
HA-Wide	Architect to develop plans and specs for Physical work and administer contract	1430		15000.00		
HA-Wide	Staff Training and Administration	1410		12000.00		
AR82-1	Install Heat & Air Units 33-65 K-West	1460		115000.00		
AR82-1	Install Insulated windows in 73 units	1460		130000.00		
AR82-1	Purchase interiors doors @ 150.00 each	1465.1		3000.00		

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

PHA Name: Warren Housing Authority	<b>Grant Type and Number</b>	Capital Fund Program #:	Capital Fund Program Replacement Housing Factor #:	<b>Federal FY of Grant: 2002</b>
Development Number Name/HA-Wide Activities	All Fund Obligated	(Quart Ending Date)	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original	Revised	Actual	Original
AR82-1			09-30-2003	Revised
				Actual
				05-31-2005

## Attachment E

### Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

<b>CFP 5-Year Action Plan</b>	<b>X Original statement</b>	<b>Revised statement</b>
<b>Development Number ) AR082</b>	<b>Development Name (or indicate PHA wide)</b>	<b>HA-Wide</b>
<b>Description of Needed Physical Improvements or Management Improvements</b>	<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Administration Cost	20,000	2003-2004
Architect Cost	60,000	2003-2006
Computer Work Station, Desks, & Computers	11,000	2003
Lawn Mowers (2) @ 2500.00 each	5,000	2003
Staff Training	8,000	2003-2006
Maintenance Warehouse	15,000	2003
Two Trucks @ 15,000.00 each	30,000	2004
<b>Total estimated cost over next 5 years</b>	<b>149,000</b>	

## Attachment E

### Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

**CFP 5-Year Action Plan**                      **X Original statement**                      **Revised statement**  
**Development Number ) AR082**                      **Development Name (or indicate PHA wide) 8-01**

Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)	
Install Heat & Air Units in 32-65 K-West & 1-22 K-East	115,000	2005	
Hot Water Heaters (10) @ \$200.00 each	2,000	2003	
New Lock Sets for all apts. in 01	39,420	2003	
Stoves (8) @ \$250.00 each	2,000	2004	
Vent-a-hoods (10) @ \$150.00 each	1,000	2004	
Foundation Repairs	105,000	2004-2005	
Parking Lot Repair & Addition Alto & Walnut Court Area	80,000	2005	
Replace Gas Lines at Kings Square West & East Area	45,000	2006	
Buildings with Dryer Hook-ups 82 Units @ 2865.85 each	235,000	2006	Storage
<b>Total estimated cost over next 5 years</b>	<b>624,420</b>		

## Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

**CFP 5-Year Action Plan**                       **Original statement**     **Revised statement**  
**Development Number ) AR082**                      **Development Name (or indicate PHA wide) 8-03**

<b>Description of Needed Physical Improvements or Management Improvements</b>	<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
<b>10 Hot Water Heaters @ \$200.00 each</b>	<b>2,000</b>	<b>2003</b>
<b>Replace Sidewalk</b>	<b>125,000</b>	<b>2003</b>
<b>Refrigerators (15) @ \$400.00 each</b>	<b>6,000</b>	<b>2003</b>
<b>Entries Doors (50) @ \$175.00 each</b>	<b>8,750</b>	<b>2004</b>
<b>Stoves (20) @ \$250.00 each</b>	<b>5,000</b>	<b>2004</b>
<b>Vent-a-hoods (20) @ \$100.00 each</b>	<b>2,000</b>	<b>2004</b>
<b>New Locks Sets (150) @ \$90.00 each</b>	<b>13,500</b>	<b>2004</b>
<b>Air Conditions for 25 units @ \$2500.00 each</b>	<b>62,500</b>	<b>2004</b>
<b>Street Work</b>	<b>48,500</b>	<b>2004</b>
<b>Interiors Doors (20) @ \$150.00 each</b>	<b>3,000</b>	<b>2004</b>
<b>Total estimated cost over next 5 years</b>	<b>276,250</b>	

## PHA Public Housing Drug Elimination Program Plan

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

### Section 1: General Information/History

**A. Amount of PHDEP Grant \$** \_\_\_\_\_

**B. Eligibility type (Indicate with an "x")**            N1 \_\_\_\_\_ N2 \_\_\_\_\_ R \_\_\_\_\_

**C. FFY in which funding is requested** \_\_\_\_\_

**D. Executive Summary of Annual PHDEP Plan**

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

**E. Target Areas**

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

**PHDEP Target Areas (Name of development(s) or site)    Total # of Units within the PHDEP Target Area(s) Total Population to be Served within the PHDEP Target Area(s)**

**F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

**12 Months** \_\_\_\_\_    **18 Months** \_\_\_\_\_    **24 Months** \_\_\_\_\_

**G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant
Extensions or Waivers	Grant Start Date	Grant Term End Date		
FY 1995				
FY 1996				
FY 1997				

FY1998  
FY 1999

## **Section 2: PHDEP Plan Goals and Budget**

### **A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, 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.

### **B. PHDEP Budget Summary**

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

**FFY \_\_\_\_\_ PHDEP Budget Summary Original statement Revised statement dated:**

<b>Budget Line Item</b>	<b>Total Funding</b>
9110 - Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	

9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	

### **TOTAL PHDEP FUNDING**

### **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: \$**

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.

#### **9115 - Special Initiative**

**Total PHDEP Funding: \$**

Goal(s)

Objectives

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

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

Goal(s)  
Objectives

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

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

Goal(s)  
Objectives

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

**9130 - Employment of Investigators      Total PHDEP Funding: \$**

Goal(s)  
Objectives

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

**9140 - Voluntary Tenant Patrol      Total PHDEP Funding: \$**

Goal(s)  
Objectives

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

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

Goal(s)  
Objectives

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

- 2.
- 3.

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

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.

**9170 - Drug Intervention      Total PHDEP Funding: \$**

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 - Drug Treatment      Total PHDEP Funding: \$**

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.

**9190 - Other Program Costs      Total PHDEP Funds: \$**

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.

## **Required Attachment F: Resident Member on the PHA Governing Board**

1. Yes  XX 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? Irma Brunson was a resident at the time she was nominated to join the board. Ms. Brunson was able to get a good job and move out of housing but her mother is still a resident at this time.

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

XX 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: April 30, 2002

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

Hugh Allen Quimby - Chairman

JeNelle Lipton - Vice-Chairman

Irma Brunson - Commissioner

Harry McCaskill - Commissioner

Harold Mann - Commissioner

**Required Attachment \_\_G\_\_: 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.)

Rosa Taylor - #6 Kings Square West

Loretha King - #11 Kings Square West

Michael Terry - #38 Kings Square West

Byron Black - #65 Kings Square West

Tamika Pickett - Section 8 Program, 117 North Watson, Warren, AR 71671