

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

Small PHA Plan Update

Annual Plan for Fiscal Year: April 1, 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: Housing Authority of the City of Calhoun, GA

PHA Number: GA119

PHA Fiscal Year Beginning: (April/2002)

PHA Plan Contact Information:

Name: Patsy O. Trimble
Phone: 706-629-9183
TDD: 706-629-9183
Email (if available): p.thacker@mindspring.com

Public Access to Information

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

- X 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)

- X 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)

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

PHA Programs Administered:

Public Housing and Section 8 Section 8 Only X Public Housing Only

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

i. Table of Contents

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

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Annual Plan		

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.Capital Improvement Needs	(See attachment B&C)
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Attachments

- Attachment A : Supporting Documents Available for Review
- Attachment B: Capital Fund Program Annual Statement (ga119b05)
- Attachment C: Capital Fund Program 5 Year Action Plan (ga119c05)
- Attachment N/A: Capital Fund Program Replacement Housing Factor Annual Statement
- Attachment D: Public Housing Drug Elimination Program (PHDEP)Plan Not applicable
- Attachment E: Resident Membership on PHA Board or Governing Body
- Attachment F: Membership of Resident Advisory Board or Boards
- Attachment G: Comments of Resident Advisory Board or Boards (ga119g05) & Explanation of PHA Response (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)
- Attachment H: Progress in meeting the 5-year plan mission and goals (ga119h05)
- Attachment I: Criterial for substantial deviation and significant amendments (ga119i05)
- Attachment J: Component 10 (B) Voluntary Conversion Initial Assessments (ga119j06)

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

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

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 is no change in any policies or programs. However, there was a mistake on the five-year plan. Please see (page 14 a). An applicant is moved to the bottom of the list if they refuse one apartment unless unusual circumstances are present. This is based on our ACOP.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. Yes : 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? \$365,000.00

C. Yes 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 C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

1. 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

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

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

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

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

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

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

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

- A. N/A : Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? HUD has advised PHA's that an additional 8.1% increase over the

fiscal year 2001 funding level will be provided to help cover the anti-crime/anti-drug program. PHAs will no longer be required to submit the PHDEP template.

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? N/A

C. N/A 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. N/A The PHDEP Plan is attached at Attachment D

6. Other Information

[24 CFR Part 903.79 (r)]

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

1. Yes : 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 (ga119g05)

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

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 (ga119g05).

Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: State of Georgia five-year consolidated plan

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)

X 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.

- X The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- X 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

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 Document	Related Plan Component	Supporting
Certifications of Compliance with the PHA Plans and Related Regulations Annual Plans	X State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update) Annual Plans	PHA Plan 5 Year and
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. Annual Plans	X	Fair Housing 5 Year and
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 Housing Needs	X	Housing Annual Plan:
board-approved operating budget for the public housing program Financial Resources	X	Most recent Annual Plan:
Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] Eligibility, Selection, and Admissions Policies	X	Public Annual Plan:
Any policy governing occupancy of Police Officers in Public Housing if included in the public housing A&O Policy Eligibility, Selection, and Admissions Policies	Section 8 Administrative Plan	check here Annual Plan: Annual Plan:
Eligibility, Selection, and Admissions Policies	X	Public check here if Annual Plan:
housing rent determination policies, including the method for setting public housing flat rents if included in the public housing A & O Policy Rent Determination	X Schedule of flat rents offered at each public housing development if included in the public housing A & O Policy Rent Determination	check here if Annual Plan:
Section 8 Administrative Plan Rent Determination	Section 8 rent determination (payment standard) policies if included in	Annual Plan:
housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation) Operations and Maintenance	X	Public Annual Plan:
latest binding Public Housing Assessment System (PHAS) Assessment Management and Operations	X	Results of Annual Plan:
Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary) Results of latest Section 8 Management Assessment System (SEMAP)	X	Annual Plan: Annual Plan:

Any required policies governing any Section 8 special housing types included in Section 8 Administrative Plan Operations and Maintenance check here if Annual Plan:

X Public Annual Plan:

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 check here if included in Annual Plan: Section 8 Administrative 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

grants Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP 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

housing Approved or submitted applications for demolition and/or disposition of public Annual Plan: Demolition and Disposition

Housing Plans) Approved or submitted applications for designation of public housing (Designated 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

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 FSS Action Plan/s for public housing and/or Section 8 Annual Plan:

Community Service & Self-Sufficiency X Section 3 documentation required by 24 CFR Part 135, Subpart 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: PHDEP-related documentation: · 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

Annual PI

Annual PI

public housing sites assisted under the PHDEP Plan. Annual Plan:
 Safety and Crime Prevention X Policy on
 Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) check here if included in the public housing A & O Policy X Pet Policy
 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 X The results of
 PHAs Troubled PHAs: MOA/Recovery Plan Troubled
 Other supporting documents (optional) (list individually; use as many lines as necessary) (specify as needed)

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

PHA Name: Grant Type and Number Capital Fund
 Program: Capital Fund Program Replacement Housing Factor Grant No:
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

Line No.	Summary by Development Account	Total Estimated Cost Original	Revised	Total Obli
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			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment-Nonexpendable			
12	1470 Nondwelling Structures			
13	1475 Nondwelling Equipment			
14	1485 Demolition			
15	1490 Replacement Reserve			
16	1492 Moving to Work Demonstration			
17	1495.1 Relocation Costs			
18	1498 Mod Used for Development			
19	1502 Contingency			
20	Amount of Annual Grant: (sum of lines 2-19)			
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

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

PHA Name:		Grant Type and Number	Capital Fund
Program #:	Capital Fund Program	Replacement Housing Factor #:	
Development Number	General Description of Major Work Categories		Dev. Acct No.
	Quantity		Total Estimated Cost
	Total Actual Cost		Status of Proposed
Name/HA-Wide Activities			

Original

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:

Budget Line Item	Total Funding
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	PHEDEP Funding	Other
Funding (Amount/ Source)	Performance Indicators		
1.			
2.			
3.			

9115 - Special Initiative

Total

PHDEP Funding: \$

Goal(s)

Objectives

Proposed Activities

of Persons Served

Target Population

Start Date

Expected Complete Date

- 1.
- 2.
- 3.

9116 - Gun Buyback TA Match

Total PHDEP

Funding: \$

Goal(s)

Objectives

Proposed Activities

of Persons Served
Expected Complete Date
Performance Indicators

Target Population
PHEDEP Funding

Start Date
Other Funding

(Amount /Source)

- 1.
- 2.
- 3.

9120 - Security Personnel

Total PHDEP

Funding: \$

Goal(s)

Objectives

Proposed Activities

of Persons Served

Target Population

Start Date

Expected Complete Date

- 1.
- 2.
- 3.

9130 - Employment of Investigators

Total PHDEP

Funding: \$

Goal(s)

Objectives Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date
1.				
2.				
3.				

9140 - Voluntary Tenant Patrol

Total PHDEP

Funding: \$

Goal(s)

Objectives

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date
1.				
2.				
3.				

9150 - Physical Improvements

Total PHDEP

Funding: \$

Goal(s)

Objectives

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date
1.				
2.				
3.				

9160 - Drug Prevention

Total

PHDEP Funding: \$

Goal(s)

Objectives

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date
1.				
2.				
3.				

9170 - Drug Intervention

Total

PHDEP Funding: \$

Goal(s)

Objectives

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date
1.				
2.				
3.				

9180 - Drug Treatment

Total PHDEP

Funding: \$

Goal(s)

Objectives

Proposed Activities

of Persons Served
Expected Complete Date
Performance Indicators

Target Population
PHEDEP Funding

Start Date
Other Funding

(Amount /Source)

- 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

- 1.
- 2.
- 3.

Required Attachment E: Resident Member on the PHA Governing Board

- 1. Yes: 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: Harold Thompson

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

Elected

Appointed X

C. The term of appointment is (include the date term expires): May 10 1999 through March 25, 2004

- 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:

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

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.)

Pat Tutherford, Betty Fain, Julia Crowe, Julia Nelson, Harold Thompson, Wilder Kay.

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

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

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

Capital Funds 501-2002

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
		1450			\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior:	1460			\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
GA119-03A	Dwelling Units: Begin and complete installation of Heat and Air units in 24 apt.	1460	24 units	\$78,196.00	\$0.00	\$0.00	\$0.00	
GA119-04A	Begin and complete remod on units Remod kitchen & bath & living rm cabinets, plumbing & accessories paint walls, ceilings, & doors floor tile, base boards, light fixtures new water heater & accessories		20 units	\$247,000.00	\$0.00	\$0.00	\$0.00	
			Total	\$325,196.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas:	1470			\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00	
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00	
Total,			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

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

Comprehensive Grant Program (CGP) Part III: Implementation Schedule

Office of Public and Indian Housing

Capital Funds 501-2002

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Administration	09/30/03			09/30/04			
HA-Wide Nonroutine vacancy prep.	09/30/03			09/30/04			
GA119-03A Hillhouse Homes	09/30/03			09/30/04			
GA119-04A	09/30/03			09/30/04			

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report

Five-Year Action Plan
Part I: Summary
Comprehensive Grant Program (CGP)

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

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

HA Name:		Locality: (City/County & State)				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No:
Calhoun Housing Authority		Calhoun/Gordon, Georgia				
A. Development Number/Name	Work Statement for Year 1 FFY:02	Work Statement Year 2 FFY:2003	Work Statement Year 3 FFY:2004	Work Statement for Year 4 FFY:2005	Work Statement for Year 5 FFY:2006	
Capital Funds 2002						
GA119-001 Cologa Homes	See Annual Statement		\$100,000	\$179,150		
GA119-002 Wylie McDaniel Homes		\$50,000	\$102,150			
GA119-03A&B Hillhouse & Alexander		\$252,150				
GA119-04A&B Keene & Jones Homes			\$100,000	\$179,000		\$175,000
GA119-005 T.L. Shanahan Site 2						\$153,150
GA119-005 H. Scoggins Site 1						
HA-Wide Dwelling Equipment		\$0	\$0			
HA-Wide Contingency @ X%		\$0	\$0	\$0		\$0
B. Physical Improvements Subtotal						
C. Management Improvements			\$3,000	\$3,000		
D. HA-Wide Nondwelling Structures & Equipment		\$23,000	\$23,000			
E. Administration		\$14,247	\$14,247	\$14,247	\$14,247	
F. Other (Fees & Costs and Relocation)						
G. Operations		\$30,000	\$30,000		\$30,000	
H. Demolition		\$0	\$0	\$0	\$0	
I. Replacement Reserve		\$0	\$0	\$0	\$0	
J. Mod Used for Development		\$0	\$0	\$0	\$0	
K. Total CGP Funds		\$70,247	\$70,247	\$14,247	\$44,247	
L. Total Non-CGP Funds		\$0	\$0	\$0	\$0	
M. Grand Total		\$70,247	\$70,247	\$14,247	\$44,247	
Signature of Executive Director and Date: Patricia Gail Brown		Signature of Public Housing Director/Office of Native American Programs Administrator and Date: X				

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
Comprehensive Grant Program (CGP)

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

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

Work Statement for Year 1	Work Statement for Year 2 FFY:2003			Work Statement for Year 3 FFY:2004			
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual Statement	Site: James Keene Homes			GA119 - 001 - 003A & 004B Site: Cologa - Hillhouse - C. M. Jones Homes			
		Total Site:	\$0		Total Site:	\$0	
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None		\$0	
		Total M&E:	\$0		Total M&E:	\$0	
	Building Exterior: None		\$0	Building Exterior: None		\$0	
		Total B.E.:	\$0		Total B.E.:	\$0	
	Dwelling Units: Begin & complete Exterior window replacement & install Heat & air units Begin & complete roof replacement	24 units in 03B 24 units in 002 Total DUs:	\$252,150 \$50,000 \$302,150	Dwelling Units: Start and complete heat & air units in project 002 Start and complete roof replacement/+1 maint bldg Start and complete roof replacement/+1 maint bldg	24 units in 002 44 units/+1 in 001 34 units in 04B	\$102,150 \$100,000 \$100,000	
	Dwelling Equipment: None		\$0	Dwelling Equipment: None		\$0	
		Total D.E.:	\$0		Total D.E.:	\$0	
	Interior Common Areas: None		\$0	Interior Common Areas: None		\$0	
		Total ICAs:	\$0		Total ICAs:	\$0	
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		\$0	
		Total SWFs:	\$0		Total SWFs:	\$0	
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		\$0	
		Total NDE:	\$0		Total NDE:	\$0	
		Subtotal of Estimated Cost		\$302,150	Subtotal of Estimated Cost		\$302,150

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
Comprehensive Grant Program (CGP)

Work Statement for Year 1	Work Statement for Year 4 FFY:2005			Work Statement for Year 5 FFY:2006		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement					Total Site:	- \$0
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None		\$0
		Total M&E:	\$0		Total M&E:	\$0
	Building Exterior: None		\$0	Building Exterior: None		\$0
		Total B.E.:	\$0		Total B.E.:	\$0
	GA119:Cologa Homes Dwelling Units: Begin and complete installatin of Heat & Air units	44 units in 001	\$179,150	GA119:J.Keene & T. Shanahan Homes Dwelling Units: Begin & complete installation of Heat & Air units Begin & Complete replacement of roofs in I & II of 005	34 units in 04B 40/10 units 50 total	\$175,000 \$153,150
		Total DUs:	\$179,150			
	Dwelling Equipment: None		\$0	Dwelling Equipment: None		\$0
		Total D.E.:	\$0		Total D.E.:	\$0
	Interior Common Areas: None		\$0	Interior Common Areas: None		\$0
		Total ICAs:	\$0		Total ICAs:	\$0
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		\$0
		Total SWFs:	\$0		Total SWFs:	\$0
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		\$0
		Total NDE:	\$0		Total NDE:	\$0
	Subtotal of Estimated Cost		\$302,150	Subtotal of Estimated Cost		\$328,150

Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
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U. S. Department of Housing
 and Urban Development
 Office of Public and Indian Housing

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Calhoun Housing Authority

Work Statement for Year 1	Work Statement for Year 2 FFY:2003			Work Statement for Year 3 FFY:2004		
	Development Number/Name/General Description Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA WIDE					
	Computer upgrades		\$3,000	Computer upgrades		\$3,000
	Administration - Salary expense for E.D. / Maint. Foreman / Asst. E.D.		\$14,247	Administration - Salary expense for E.D. / Maint Foreman / Asst. E.D.		\$14,247
	Operations		\$30,000	Operations		\$30,000
	Truck for Maintenance Department	1	\$23,000	Van for Imagination Station		\$23,000
	Subtotal of Estimated Cost		\$70,247	Subtotal of Estimated Cost		\$70,247

Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
Comprehensive Grant Program (CGP)

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

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Work	Work Statement for Year 4	Work Statement for Year 5
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Statement for Year 1	FFY:2005			FFY:2006		
	Development Number/Name/General Description Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA WIDE					
	Administration - Salary expense for E.D. / Maint. Foreman / Asst. E.D.		\$14,247	Administration - Salary expense for E.D. / Maint Foreman / Asst. E.D.		\$14,247
	04A-Hillhouse Build new administration office		\$179,000	Operations		\$30,000
						\$0
						\$0
	Subtotal of Estimated Cost		\$193,247	Subtotal of Estimated Cost		\$44,247

Five-Year Action Plan
Part I: Summary
Comprehensive Grant Program (CGP)

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

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

HA Name: Calhoun Housing Authority		Locality: (City/County & State) Calhoun/Gordon, Georgia				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No:
A. Development Number/Name	Work Statement for Year 1 FFY:02	Work Statement for Year 2 FFY:2003	Work Statement for Year 3 FFY:2004	Work Statement for Year 4 FFY:2005	Work Statement for Year 5 FFY:2006	
Capital Funds 2002						
GA119-001 Cologa Homes	See Annual Statement		\$100,000	\$179,150		
GA119-002 Wylie McDaniel Homes		\$50,000	\$102,150		#REF!	
GA119-03A&B Hillhouse & Alexander		\$252,150			#REF!	
GA119-04A&B Keene & Jones Homes			\$100,000	\$179,000	\$175,000	
GA119-005 T.L. Shanahan Site 2		#REF!	#REF!		\$153,150	
GA119-005 H. Scoggins Site 1		#REF!	#REF!		#REF!	
HA-Wide Dwelling Equipment		\$0	\$0		#REF!	
		#REF!	#REF!	#REF!	#REF!	
HA-Wide Contingency @ X%		\$0	\$0	\$0	\$0	
B. Physical Improvements Subtotal		#REF!	#REF!	#REF!	#REF!	
C. Management Improvements	\$3,000	\$3,000				
D. HA-Wide Nondwelling Structures & Equipment	\$23,000	\$23,000				
E. Administration	\$14,247	\$14,247	\$14,247	\$14,247		
F. Other (Fees & Costs and Relocation)						
G. Operations	\$30,000	\$30,000		\$30,000		
H. Demolition	\$0	\$0	\$0	\$0		
I. Replacement Reserve	\$0	\$0	\$0	\$0		
J. Mod Used for Development	\$0	\$0	\$0	\$0		
K. Total CGP Funds	#REF!	#REF!	#REF!	#REF!		
L. Total Non-CGP Funds	\$0	\$0	\$0	\$0		
M. Grand Total	#REF!	#REF!	#REF!	#REF!		
Signature of Executive Director and Date: Patricia Gail Brown		Signature of Public Housing Director/Office of Native American Programs Administrator and Date: X				

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157

Work Statement for Year 1 #REF!	Work Statement for Year 4 FFY:2005			Work Statement for Year 5 FFY:2006		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement						-
					Total Site:	\$0
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
						-
		Total M&E:	\$0		Total M&E:	\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
						-
		Total B.E.:	\$0		Total B.E.:	\$0
	GA119:Cologa Homes			GA119:J.Keene & T. Shanahan Homes		
	Dwelling Units:			Dwelling Units:		
	Begin and complete installatin of Heat & Air u	44 units in 001	\$179,150	Begin & complete installation of Heat & Air unit	34 units in 04B	\$175,000
				Begin & Complete replacement of roofs in I & II of 005	50/10 units 50 total	\$153,150
	Total DUs:	\$179,150				
Dwelling Equipment:			Dwelling Equipment:			
None		\$0	None		\$0	
					-	
	Total D.E.:	\$0		Total D.E.:	\$0	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
					-	
	Total ICAs:	\$0		Total ICAs:	\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
					-	
	Total SWFs:	\$0		Total SWFs:	\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
					-	
	Total NDE:	\$0		Total NDE:	\$0	
	Subtotal of Estimated Cost		\$302,150	Subtotal of Estimated Cost	\$328,150	

Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
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U. S. Department of Housing
 and Urban Development
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Calhoun Housing Authority

Work Statement for Year 1	Work Statement for Year 2 FFY:2003			Work Statement for Year 3 FFY:2004		
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#REF!	HA WIDE					
	Computer upgrades		\$3,000	Computer upgrades		\$3,000
See	Administration - Salary expense for E.D. / Maint. Foreman / Asst. E.D.		\$14,247	Administration - Salary expense for E.D. / Maint Foreman / Asst. E.D.		\$14,247
Annual	Operations		\$30,000	Operations		\$30,000
Statement	Truck for Maintenance Department	1	\$23,000	Van for Imagination Station		\$23,000
	Subtotal of Estimated Cost		\$70,247	Subtotal of Estimated Cost		\$70,247

ATTACHMENT H

Progress in meeting the 5-year plan mission and goals

The Mission Statement of the Calhoun Housing Authority is to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination. The Housing Authorities 5-year plan included four goals, which have been or is being addressed as follows:

GOAL # 1 Objective 1: Fifty-six units of affordable housing are 100% occupied. Objective 2: The Safety and Crime prevention program is being address by the Housing Authority and local law enforcement's. We have a new Chief of Police who is determined that public housing residents have a safe place to live. Objective 3: New roofs windows, doors and the installation of air conditions will improve the safety and health of residents and increase the marketability of our units.

GOAL #2 Objective 1: We have implemented a deconcentration policy. Our records indicate that our developments have a good mixture of families with higher incomes Vs lower incomes. Objective 2: This has been accomplished. Objective 3: The Housing Authority along with the police department has implemented a procedure to report and track crime. The "One Strike and You're Out" policy is being enforced.

GOAL #3 Objective 1: The Housing Authority has contracted with The Department of Family and Children's service and Family Connection to provide family advocates for our residents. We have twelve residents who have no income. We have four residents working under the 12month-disallowance rule. We work closely with those residents who are not working to help them become self-sufficient. Objective #2: Supportive services are available through agencies such as the hospital, health department, family connection, DFCS, job placements, United Way and individual community churches and individuals. Objective 2: Supportive services such as transportation and health care are provided for the elderly and disable by Gordon County Transit System. United way provided funds for the housing authority to have senior luncheons and recreational outings.

GOAL #4 Objective #1,2,3: We have never had a finding from Fair Housing. Policies are in place and this housing authority does not tolerate discrimination of any kind.

Attachment G

Required Attachment G: Resident Advisory Board Recommendations and PHA response.

Comments from the Resident Advisory Board meeting of December 19, 2000.

1. It is important to put air conditioning in the senior citizens units first.
PHA officials advised that this is already part of the 5-year plan.
2. Seniors residents do not want to use the air conditionion.
PHA officials advised that units are controlled individually.
3. Some members of the board are interested in homeownership. **PHA Officials advised those interested to get with the with PHA staff. We will help fill out applications and advise the residents regarding this.**
4. Residents from GA119005 development asked about the closet doors.
PHA officials advised the advisory board that this item is on the list of work to be done and that prices have been received.

ATTACHMENT I

Criteria for Substantial Deviation and Significant Amendments Amendment and Deviation Definitions

Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners and public comment such as the following:

- Changes to rent or admissions policies or organizations of the waiting list.
- Additions of non-emergency work items or change in use of replacement reserve funds under the Capital Fund. Threshold for the addition of new work items in the CFP possible to \$25,000.
- Additions of new activities not included in the current PHDEP plan and
- Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

Attachment J

Component 10 (B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? 5 (five)
- 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)? 3 (three)
- c. How many Assessments were conducted for the PHA's covered Developments? 5 (five)
- d. Identify PHA developments that may be appropriate for conversion based On the Required Initial Assessments: None

Development Name

Number of Units

- e. If the PHA has not completed the Required Initial Assessment, describe the status of these assessments: N/A