

SmallPHAPlanUpdate

AnnualPlanforFiscalYear: 2002

PHA Plan Agency Identification

PHA Name: Housing Authority of Martin

PHA Number: KY038

PHA Fiscal Year Beginning: (mm/yyyy) 04/ 2002

PHA Plan Contact Information:

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Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

PHA Programs Administered :

- Public Housing and Section 8 Section 8 Only Public Housing Only

Annual PHA Plan

Fiscal Year 20 02

[24CFR 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 Plan file, provide the filename in parentheses in the space to the right of the title.

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ii.ExecutiveSummary

[24CFRPart903.79(r)]

AtPHAoption,provide abriefoverviewoftheinformationintheAnnualPlan

1.SummaryofPolicyorProgramChangesfortheUpcomingYear

Inthissection,brieflydescribechangesinpoliciesorprogramsdiscussedinlastyear'sPHAPlanthatarenotcovered inothersecti onsofthisUpdate.

DevelopandaddaTrespassPolicy;

NotenforceCommunityBasedServicesPolicyduetochangesinrequirements;

2.CapitalImprovementNeeds

[24CFRPart903.79(g)]

Exemptions:Section8onlyPHAsarenotrequiredtocomplete thiscomponent.

A. Yes No: IsthePHAeligibletoparticipateintheCFPinthefiscalyear coveredbythisPHAPlan?

B. WhatistheamountofthePHA'sestimatedoractual(ifknown)CapitalFund Programgrantfor theupcomingyear?\$_222,315.00_

C. Yes No DoesthePHAplantoparticipateintheCapitalFundProgramin theupcomingyear?Ifyes,completetherestofComponent7.Ifno,skiptonext component.

D. Capita IFundProgramGrantSubmissions

(1)CapitalFundProgram5 -YearActionPlan

TheCapitalFundProgram5 -YearActionPlanisprovidedasAttachment C

(2)CapitalFundProgramAnnualStatement

TheCapitalFundProgramAnnualStatementis providedasAttachment B

3.D emolitionandDisposition

[24CFRPart903.79(h)]

Applicability:Section8onlyPHAsarenotrequiredto completethissection.

1. Yes No: DoesthePHAplantconductanydemolitionordisposition activities(pursuanttosection18oftheU.S.HousingActof1937 (42U.S.C.1437p))intheplanFiscalYear?(If"No",skiptonext component;if"yes",completeoneactivitydescriptionforeach 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: <u> (DD/MM/YY)</u>	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)	
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

4. Voucher Homeownership Program

[24CFR Part 903.79(k)]

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

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

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

- Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family's resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

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

5. Safety and Crime Prevention: PHDEP Plan

[24CFR Part 903.7(m)]

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

- A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _
- C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. Yes No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24CFR Part 903.79(r)]

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

1. Yes No : Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment (Filename) _____ G
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 _____ G.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment _____.
- Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: Commonwealth of Kentucky

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

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

3. PHA Requests for support from the Consolidated Plan Agency

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

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

The Consolidated Plan for the Commonwealth of KY supports the PHA Plan of the Housing Authority of Martin to focus on removing road blocks to affordable housing for low- and very low-income persons.

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: A change greater than 50% of the total grant amount from one account to another.

B. Significant Amendment or Modification to the Annual Plan: A change greater than 50% of the total grant amount from one account to another.

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
X	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 statements 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
X	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
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
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
	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
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	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, PIH99 -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 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
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
X	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
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
X	The result 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 result 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)

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

PHAName: Housing Authority of Martin, Martin, KY -KY038- Grant Type and Number CIAPKY36P038907 -98 Federal FY of Grant: 1998
 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		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	1,230		1,230	1,230
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	8,000		8,000	8,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	89,900		89,900	89,900
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non -dwelling Structures				
13	1475 Non -dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	870		870	870
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	100,000		100,000	100,000
21	Amount of line 20 Related to LBP Activities	-0-			
22	Amount of line 20 Related to Section 504 Compliance	-0-			
23	Amount of line 20 Related to Security	-0-			

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

PHAName: Housing Authority of Martin, Martin, KY -KY038- Grant Type and Number CIAPKY36P038907 -98 Federal FY of Grant: 1998
 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	Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures	-0-	

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

PHAName: Housing Authority of Martin, Martin, KY -KY038 - Grant Type and Number CIAPKY36P038907 -98 Federal FY of Grant: 1998
 Capital Fund Program#:
 Capital Fund Program
 Replacement Housing Factor#:

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
KY038-003 Grigsby Heights	Administration	0031410	1	1,230		1,230	1,230	Complete
KY038-003 Grigsby Heights	Fees & Costs - A/E Services	0031430	1	8,000		8,000	8,000	Complete
KY038-003 Grigsby Heights	Dwelling Structure - Repair two buildings with structural damage	0031460	1	89,900		89,900	89,900	Complete
KY038-003 Grigsby Heights	Re-location Cost	0031495.1	1	870		870	870	Complete

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

PHAName: Housing Authority of Martin, Martin, KY -KY038- Grant Type and Number: CIAPKY36P038908 -99 Federal FY of Grant: 1999
 Capital Fund Program:
 Capital Fund Program
 Replacement Housing Factor Grant No:

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 3)
 Performance and Evaluation Report for Period Ending: 12/31/2001 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	3780	3780	3780	3780
4	1410 Administration	4110	900	4110	3182
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	84380	95192	80610	67587
11	1465.1 Dwelling Equipment — Nonexpendable	63380	50874	63380	50875
12	1470 Non Dwelling Structures	60278	57356	60278	56130
13	1475 Non Dwelling Equipment	0	3770	3770	3770
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)	215928	215928	215928	185324
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

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

PHA Name: Housing Authority of Martin, Martin, KY -KY038-	Grant Type and Number: CIAPKY36P038908 -99 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 1999
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 3)
 Performance and Evaluation Report for Period Ending: 12/31/2001
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
23	Amount of line 20 Related to Security	18000	27440	27440	27440
24	Amount of line 20 Related to Energy Conservation Measures	1670	1680	1680	1680

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

PHAName: Housing Authority of Martin, Martin, KYKY038		Grant Type and Number: CIAPKY36P038908 -99 Capital Fund Program#: Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 1999		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Management Improvement s-Maint. Equip.	1408		3780	3780	3780	3780	Done
HA-Wide	Administration-Adv. Wages	1410		4110	900	890	890	Done
HA-Wide	Termite Protection	1460	1	0	18500	18500	18500	Done
HA-Wide	Replace Porch Lights	1460	127	2380	750	750	750	Done
38-001	Replace Thermostat w/limitertype	1460	39	700	700	680	680	Done
38-001	Replace GFCI's	1460	90	2230	1170	1170	1170	Done
38-003	Replace GFCI's	1460	190	2670	1750	1750	1750	Done
38-003	Replace Floor in Upstairs Bathroom	1460	34	10800	10800	3400	0	In-Process
38-003	Replace Front Screen Door	1460	60	18000	19055	19055	19055	Done
38-003	Replace Thermostat w/limitertype	1460	60	970	970	970	970	Done
38-003	Structural Repairs 900 & 1100 Bldg	1460	2	48230	13218	13218	1680	In-Process
38-001	Replace Refrigerators & Stoves	1465	40 & 25	22880	18219	18219	18219	Done
38-003	Replace Refrigerators & Stoves	1465	60 & 60	40500	32655	32655	32655	Done
38-002	Expand Community Room	1470	1	35778	35778	35778	35778	Done
38-002	Add Handicap Laundry -fm CIAP905	1470	1	1800	1800	1800	1800	Done
38-001	Convert Maint. Bldg to Laundry	1470	1	24500	20356	20356	20356	Done
HA-Wide	Maintenance Equipment	1475	1	0	3770	3770	3770	Done
HA-Wide	Force Account Labor	1460	1	0	29500	29500	23258	In-Process
HA-Wide	Force Account Overhead	1460	1	0	2257	2257	1926	In-Process

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

PHA Name: Housing Authority of Martin, Martin, KY -KY038-	Grant Type and Number Capital Fund Program: CAPKY36P038501 -00 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 09/30/2001
 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	29590	29590	29590	22730
4	1410 Administration	2290	2290	2290	360
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22900	22900	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	23080	23080	6900	6900
10	1460 Dwelling Structures	132012	132012	24892	9331
11	1465.1 Dwelling Equipment —Nonexpendable	10150	10150	10150	10150
12	1470 Non Dwelling Structures	3520	3520	0	0
13	1475 Non Dwelling Equipment	6090	6090	6090	6402
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)	229632	229632	79912	55873
21	Amount of line 20 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

PHA Name: Housing Authority of Martin, Martin, KY -KY038-	Grant Type and Number Capital Fund Program: CAPKY36P038501 -00 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 09/30/2001
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security	12930	12930		
24	Amount of line 20 Related to Energy Conservation Measures	29170	29170	1680	1680

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

PHAName: Housing Authority of Martin, Martin, KYKY038		Grant Type and Number Capital Fund Program#: KY36P038501 -00 Capital Fund Program Replacement Housing Factor#:			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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Management Improvements - Maint. Equip.	1408		29590	29590	29590	22730	In-Process
HA-Wide	Administration-Adv. Wages/Benefits	1410		2290	2290	2290	360	In-Process
HA-Wide	Fees and Costs A/E & Consult	1430		22900	22900	0	0	In-Process
38-002	Grounds: Termite/Repair Concrete	1450	1	8780	8780	6900	6900	In-Process
38-003	Grounds: trees/parking/bicycleracks	1450	1	14300	14300	0	0	In-Process
38-001	Replace GFCI/bathlights & vents/smoke & CO detectors/kitvent	1460	39	17210	17210	2390	2390	In-Process
38-001	Install gal. Roofvent	1460	39	7840	7840	0	0	In-Process
38-001	Replace int.dr/st.dr.hdwr/paint stormdr & ent.Door	1460	39	4530	4530	4530	4530	In-Process
38-002	Upgrade emer.Switches/Paint	1460	28	6290	6290	0	0	In-Process
38-002	Upgrade Roof/ventwalkway	1460	2	3600	3600	0	0	In-Process
38-003	Upgrade smoke & CO detector/entDr.lock	1460	60	5732	5732	2390	2390	In-Process
38-003	Upgrade kitsink & commodehdwr/wtrhtr	1460	60	31240	31240	0	0	In-Process
38-003	Upgrade lving in rmlighs/fans/furnaces	1460	60	55030	55030	0	0	In-Process
38-002	Upgrade refrigerators	1465	28	10150	10150	10150	0	In-Process
38-003	Upgrade cmm	1470	1	3520	3520	0	0	In-Process
38-002	Upgrade Laundry boiler	1475	1	4350	6400	6400	6400	Done
38-003	Upgrade cmm equipment	1475	1	1740	1740	1740	0	In-Process

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

PHAName: Housing Authority of Martin	Grant Type and Number Capital Fund Program: KY36P038501 -01 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09/01
 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	15000	7500	7500	0
4	1410 Administration	2340	2340	2340	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	23430	18715	11715	0
8	1440 Site Acquisition				
9	1450 Site Improvement	9255	9240	9255	0
10	1460 Dwelling Structures	184300	181300	0	0
11	1465.1 Dwelling Equipment — Nonexpendable		7700		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment		7500	7500	0
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)	234325	234325	38310	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHAName: Housing Authority of Martin		Grant Type and Number Capital Fund Program: KY36P038501 -01 Capital Fund Program 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: 09/01		<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
23	Amount of line 20 Related to Security	70000	70000	
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

PHAName: Housing Authority of Martin		Grant Type and Number Capital Fund Program#: KY36P038501 -01 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Management Improvements	1408	1	15000	7500	7500	0	In-Process
HA-Wide	Administration	1410	1	2340	2340	2340	0	In-Process
HA-Wide	Fees and Costs	1430	1	23430	18715	11715	0	In-Process
HA-Wide	Site Improvement	1450	3	9255	9240	9240	0	In-Process
38-001	Storage area/building	1460	40	28000	28000	0	0	In-Process
38-003	Storage area/building	1460	60	42000	42000	0	0	In-Process
HA-Wide	Paint Apartments	1460	127	114300	111300	0	0	In-Process
38-002	Upgrade stoves	1465	28	0	7700	7700	0	In-Process
HA-Wide	Upgrade Maint. Equip.	1475	1	0	7500	7500	0	In-Process

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

PHA Name: Housing Authority of Martin, Martin, KY - KY038-	Grant Type and Number Capital Fund Program: KY36P038501 -02 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	26720			
3	1408 Management Improvements	7500			
4	1410 Administration	4690			
5	1411 Audit	3850			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	18000			
8	1440 Site Acquisition				
9	1450 Site Improvement	6000			
10	1460 Dwelling Structures	119555			
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non -dwelling Structures				
13	1475 Non -dwelling Equipment	6000			
14	1485 Demolition				
15	1490 Replacement Reserve	30000			
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)	222315			
21	Amount of line 20 Related to LBP Activities	-0-			
22	Amount of line 20 Related to Section 504 Compliance	-0-			
23	Amount of line 20 Related to Security	15000			

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

PHAName: Housing Authority of Martin, Martin, KY - KY038-	Grant Type and Number Capital Fund Program: KY36P038501 -02 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost	Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures	-0-	

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

PHAName: Housing Authority of Martin, Martin, KY - KY038 -		Grant Type and Number Capital Fund Program#: KY36P038501 -02 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
KY038HA -Wide	Operations	1406	1	26720				
KY038HA -Wide	Management Improvements	1408	1	7500				
KY038HA -Wide	Administration	1410	1	4690				
KY038HA -Wide	Audit	1411	1	3850				
KY038HA -Wide	Fees and Costs	1430	1	18000				
KY038HA -Wide	Site Improvement	1450	1	3000				
KY038-001	Clothes Line/Trash Cans	1460	40	3000				
KY038-002	Door Bells/Lv Rm Lights/Fans	1460	28	5320				
KY038-003	Roofs/Windows	1460	60	132235				
KY038HA -Wide	Maint. Equipment	1475	1	3000				
KY038-003	Replacement Reserve	1490	1	15000				

Capital Fund Program Five - Year Action Plan

Part I: Summary

PHAName Housing Authority of Martin, Martin, KY KY038		<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: 2003 PHAFY: 2003	Work Statement for Year 3 FFY Grant: 2004 PHAFY: 2004	Work Statement for Year 4 FFY Grant: 2005 PHAFY: 2005	Work Statement for Year 5 FFY Grant: 2006 PHAFY: 2006
	Annual Statement				
HA-Wide					
001 Pageant Hill		Waste Drains	Upgrade Electric Service	A/C	
001 Pageant Hill			Roofs	Replace Siding/Insulate	
002 Town Center			Concrete walks/areas	HVAC	Elevator
002 Town Center			Plumbing Fixture/Fittings	Boilers	
003 Grigsby Heights			Screens	Remodel Office/CmRm	Floor Tile
003 Grigsby Heights					
003 Grigsby Heights					
CFP Funds Listed for 5 - year planning		160,000	162,060	172,600	169,500
Replacement Housing Factor Funds					

CapitalFundProgramFive -YearActionPlan

PartII:SupportingPages —WorkActivities

Activitiesfor Year1	ActivitiesforYear: <u>2</u> <u> </u> FFYGrant:2003 PHAFY: 2003			ActivitiesforYear: <u>3</u> <u> </u> FFYGrant:2004 PHAFY:2004		
	Development Name/Number	MajorWorkCategories	EstimatedCost	Development Name/Number	MajorWorkCategories	EstimatedCost
See	<i>038-001PageantHill</i>	<i>WasteDrains</i>	160,000	<i>038-001PageantHill</i>	<i>Electric/Roofs</i>	118,000
Annual Statement	038-002TownCenter					
	<i>038-003GrigsbyHeights</i>			<i>038-002TownCenter</i>	<i>Concrete/Plumbing</i>	17,600
	HA-Wide			038-003GrigsbyHeights	Screens	26,460
	TotalCFPEstimatedCost		\$160,000			\$162,060

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: Ruth Daniels

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

- Elected
- Appointed

C. The term of appointment is (include the date term expires): 09/01/2005

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 governing board member:

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Thomasine Robinson, Mayor of Martin, KY

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.)

Charles Hall, Dovalene Dye, Ronnie Patton, Cline Mullins, Hazel Hicks, Edna Franklin, Bruce Nickols, Janice Little, Dee Burchett, Edith George.

Required Attachment __G__: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)

Bruce Coleman, ED, brought up question on visit time to be allowed in lease, Charles Hall suggested all 6 -8 hrs., for visiting/babysitting; if person is there in a.m. and also in p.m., then person was there all day, to be adapted into lease; ceiling and minimum rent Hazel Hicks did not understand the need to change the rate, she thought it would never change; Molly Rudder advised that other ceiling rents were higher, Ms. Hicks advised that it would be okay to change her rent again next year; make all notices to be 10 calendar days in lease and ACOP, no comments; A/C policy remove unit if past due two months Bruce Nickols; Collection Policy pay bills on promissory note with 15% down and balance in 180 days, Bruce Nickols, Janice Little suggested pay bill 100% before being housed if they owe previous phase debt.; maint. Charges no suggestions; grievance procedure have hearing officer who is not related to HA; Pet Policy - ED suggested deposit \$150 plus a fee, Charlie Hall suggested \$200 deposit plus \$10/month fee; ED advised that Community Service is no longer being enforced, Charlie Hall commented that he had already begun to perform these services, Mr. Coleman expressed his appreciation and hopes that everyone who has begun will continue, even though it is no longer required.

De-concentration and Income Mixing Analysis

Yes No Does the PHA have any general occupancy (family) public housing developments covered by the de-concentration rule?

Development Name	Bedroom Distribution	Total Income of All families in All Developments	Average Income of all Families in each Development	EIR test
KY038001	8- 1br 15-2br 14-3br 3- 4br40total	\$501771	\$12544 \$13798adj.	122% (above) 131% (above)
KY038002	20-1br 36-2br 4- 3br60total	\$528054	\$8800 \$8536	85% 81% (below)
Total income of all families	100total units	\$1029825		
Average Income of all families		\$10298 \$10504		

Yes No Do any of these covered developments have average incomes above or below 85% to 115% of the average income of all such developments:

De-concentration Policy for Covered Developments			
Development Name	Number of Units	Explanation (if any) [see step 4 at 24 CFR 903.2c(1)(iv)]	De-concentration Policy (if no explanation) [see step 5 at 24 CFR 903.2c(1)(V)]
Pageant Hill	40	Low Income Development; Applicant list short for 2, 3 and 4br; transfer households between this dev. and Grigsby Heights; some income not counted towards rent due to welfare reform law;	
Grigsby Heights	60	Very-Low Income Development; Applicant list short for 2 and 3br; transfer household between this dev. and Pageant Hill;	

Voluntary Conversion Initial Assessment

How many of the PHA's developments are subject to the Required Initial Assessments? 2

How many of the PHA's developments are not subject to the Required Initial Assessment based on exemption (e.g., elderly and/or disabled development not general occupancy project)? 1

How many Assessments were conducted for the PHA's covered developments? 1

Identify PHA development that may be appropriate for conversion based on the Required Initial Assessments: None -0-

Development Name	Number of Units
Pageant Hill	40
Town Center	28 -Elderly
Grigsby Heights	60