

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

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Housing Authority of Salyersville/Magoffin County -  
KY177  
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:** Housing Authority of Salyersville/Magoffin County

**PHA Number:** KY177

**PHA Fiscal Year Beginning:** 10/2002

### PHA Plan Contact Information:

Name: Kenneth D. Patrick

Phone: 606-349-6554

TDD: 1-800-648-6056

Email (if available): smcjha@foothills.net

### Public Access to Information

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

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

### Display Locations For PHA Plans and Supporting Documents

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

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

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

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

### PHA Programs Administered:

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

**Annual PHA Plan  
Fiscal Year 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.

**Contents**

Page #

**Annual Plan**

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

**Attachments**

- x Attachment A: Supporting Documents Available for Review
- x Attachment   : Capital Fund Program Annual Statement
- x Attachment   b  : Capital Fund Program 5 Year Action Plan
- Attachment   : Capital Fund Program Replacement Housing Factor Annual Statement
- Attachment   : Public Housing Drug Elimination Program (PHDEP) Plan
- x Attachment B: Resident Membership on PHA Board or Governing Body
- x Attachment   C  : Membership of Resident Advisory Board or Boards
- x Attachment   c  : Comments of Resident Advisory Board or Boards & Explanation of PHA Reponse (must be attached if not included in PHA Plan text)
- x Other (List below, providing each attachment name)  
Executive Summary ky177a02
  
- Deconcentration Attachment D
- Voluntary Conversion Attachment E
- P&E KY36P17750100 ky177f02
- P&E KY36P17750101 ky177e02
- 2002 CFP KY36P17750102 ky177g02

**ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan  
See Attachment ky177a01

### **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.

### **2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

A. x 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? \$ 106,878

C. x 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 ky177b02

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

The Capital Fund Program Annual Statement is provided imbedded in template.

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

2. Activity Description

<b>Demolition/Disposition Activity Description</b> <b>(Not including Activities Associated with HOPE VI or Conversion Activities)</b>
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date application approved, submitted, or planned for submission:
5. Number of units affected:
6. Coverage of action (select one) Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units 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**

[24 CFR Part 903.7 9 (k)]

A.  Yes x 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.  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**

[24 CFR Part 903.7 9 (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 (File name) ky177c01

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 ky177c01.

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: (provide name here)

Commonwealth of Kentucky Statewide 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)

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

3. PHA Requests for support from the Consolidated Plan Agency

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

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

The Housing Authority of Salyersville/Magoffin County has included its residents in creating this agency plan and five-year plan. The Authority will continue to maintain and modernize its 59 housing units. The mission of The Housing Authority of Salyersville/Magoffin County is to be a leader in making excellent affordable housing available for low and moderate-income persons through effective management and the wise stewardship of public funds. We will also partner with our residents and others to enhance the quality of life in our communities. A continuing program of resident consultation has been implemented by the Authority. A four member Resident Advisory Board has been established to provide input to the Authority on the Annual Plan and contact with the residents maintained. It should be noted at this time the Housing Authority of Salyersville/Magoffin County serves predominantly the very low income in the community.

## 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:** The Housing Authority of Salyersville considers the following to be Substantial Deviations from the 5-Year Plan:

1. Adding or deleting more than two Goals would be a substantial deviation to the 5-year Plan .

**B. Significant Amendment or Modification to the Annual Plan:** The Housing Authority of Salyersville considers the following to be a Significant Amendment or Modification to the Annual Plan:

1. Changes to rent or admissions policies or organization of the waiting list.
2. Additions of non-emergency work items not included in the Annual Statement or 5-Year Action Plan.
3. The Authority is setting a 25% threshold on Capital Fund revisions. This provision is in effect unless the Executive Director declares an emergency situation exists.
4. Change in the use of any Replacement Reserve Fund.
5. Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

### Attachment A Supporting Documents Available for Review

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
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 statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	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 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 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
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 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
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	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
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	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
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional)	



**Required Attachment B: Resident Member on the PHA Governing Board**

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

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

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

- Elected  
 Appointed

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

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

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

X Other (explain): There is a lack of interest by the Residents.

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): Mayor Walter J. Howard

**Required Attachment \_\_\_C\_\_\_: Membership of the Resident Advisory Board or Boards**

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

- 1. Phyllis Flynt
- 2. Vietta Minix
- 3. Harvey Puckett
- 4. Sue Crownover

**Required Attachment \_\_D\_\_: Component 3, (6) Deconcentration and Income Mixing**

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

If yes, list these developments as follows:

<b>Deconcentration Policy for Covered Developments</b>			
<b>Development Name:</b>	<b>Number of Units</b>	<b>Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]</b>	<b>Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]</b>

**Required Attachment E : Voluntary Conversion of Developments from Public Housing Stock, Required Initial Assessments**

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

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

Development Name	Number of Units
------------------	-----------------

None

## **EXECUTIVE SUMMARY**

The Housing Authority of Salyersville-Magoffin County has prepared this Agency Plan in compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.

We have adopted the following mission statement to guide the activities of the Housing Authority of Salyersville-Magoffin County.

**The Housing Authority of Salyersville-Magoffin County is to be a leader in making excellent affordable housing available for low and moderate-income persons through effective management and the wise stewardship of public funds. We will also partner with our residents and others to enhance the quality of life in our communities.**

We have also adopted the following goals and objectives for the next five years.

### **FIVE-YEAR GOALS**

#### **MANAGEMENT ISSUE**

**GOAL 1:** Manage the Housing Authority of Salyersville-Magoffin County-existing public housing program in an efficient and effective manner thereby qualifying as a high performer.

#### **Objectives:**

1. By December 31, 2001, the Housing Authority of Salyersville-Magoffin County shall have a waiting list of sufficient size so we can fill our public housing units within 5 days of them becoming vacant.

**During FY 01-02 the average turnover rate was .69 to 1 day.**

2. The Housing Authority of Salyersville-Magoffin County shall achieve and sustain an occupancy rate of 97% by December 31, 2004.

**As of 03/31/01 occupancy has been 100%.**

3. The Housing Authority of Salyersville-Magoffin County- shall promote a motivating work environment with a capable and efficient team of employees to operate as a customer-friendly and fiscally prudent leader in the affordable housing industry.

**2 new maintenance workers have been hired, as well as a secretary to help the Administrative Assistant be able to focus all of her energies on the Housing Authority's #1 customer, its' tenants.**

## **SECURITY ISSUES**

### **Goals**

1. Provide a safe and secure environment in the Housing Authority's public housing developments.
2. Improve resident and community perception of safety and security in the Housing Authority's public housing developments.

### **Objectives**

1. The Housing Authority of Salyersville-Magoffin County shall reduce crime in its developments by 75% by December 31, 2004.

**The Police Officer files crime-tracking reports so we can track throughout the years. This just began as of 10/2001. New security lighting, speed bumps, well lit secure school bus waiting house, and fenced in playground areas have been installed. Criminal checks are done on each applicant over eighteen.**

2. The Housing Authority of Salyersville-Magoffin County shall attract 1 police officer to live in its developments by December 31, 2004.

**A City Police Officer moved into a unit on 10/12/00.**

## **MAINTENANCE ISSUE**

**GOAL:** Maintain the Housing Authority of Salyersville-Magoffin County's real estate by delivering high quality maintenance in a timely manner to the residents.

## **Objectives**

1. The Housing Authority of Salyersville-Magoffin County shall create an appealing, up-to-date environment in its developments by December 31, 2002.

**Capital Fund money is being used to keep up the appearance of the housing authority.**

2. The Housing Authority of Salyersville-Magoffin County shall achieve and maintain an average response time of 8 hours in responding to emergency work orders by December 31, 2002.

**As of 09/30/00 we are still in compliance with this objective according to PHAS management records: 100% in 24 hours.**

3. The Housing Authority of Salyersville-Magoffin County shall achieve and maintain an average response time of 5 days in responding to routine work orders by December 31, 2002.

**Since 09/30/2000, the Authority has been in compliance, with the average response time of only 1.02 days.**

## **EQUAL OPPORTUNITY ISSUE**

**GOAL:** Operate the Housing Authority of Salyersville-Magoffin County in full compliance with all Equal Opportunity laws and regulations.

**Objective:** The Housing Authority of Salyersville-Magoffin County shall mix its public housing development populations as much as possible ethnically, racially, and income wise as much as possible.

## **PUBLIC IMAGE ISSUES**

### **Possible Goal**

1. Enhance the image of public housing in our community.

## Objective

1. The Housing Authority of Salyersville-Magoffin County shall ensure that there are at least 2 positive stories a year in the local media about the Housing Authority or one of its residents.

**The Housing Authority donated pole lights to the city for its' park. The authority is currently planning on donating stoves and storm doors.**

Our Annual Plan is based on the premise that if we accomplish our goals and objectives we will be working towards the achievement of our mission.

The plans, statements, budget summary, policies, etc. set forth in the Annual Plan all lead towards the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach towards our goals and objectives and are consistent with the Consolidated Plan. Here are just a few highlights of our Annual Plan:

- Install new tub surrounds
- Install new prime doors
- Install air conditioning in 12 units

In summary, we are on course to improve the condition of affordable housing in Salyersville-Magoffin County.

Sincerely,

Kenneth D. Patrick  
Executive Director

# Capital Fund Program Five-Year Action Plan

## Part I: Summary

PHA Name Salyersville-Magoffin County						X Original 5-Year Plan <input type="checkbox"/> Revision No:
Development Number/Name/H A-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2003 PHA FY:	Work Statement for Year 3 FFY Grant: 2004 PHA FY:	Work Statement for Year 4 FFY Grant: 2005 PHA FY:	Work Statement for Year 5 FFY Grant: 2006 PHA FY:	
	Annual Statement					
KY177-01		86,878	86,878	86,878	0	
HA-wide		20,000	20,000	20,000	106,878	
Total CFP Funds (Est.)		\$106,878	\$106,878	\$106,878	\$106,878	
Total Replacement Housing Factor Funds						

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

Activities for Year 1	Activities for Year : 2003			Activities for Year: 2004		
		FFY Grant: PHA FY:			FFY Grant: PHA FY:	
	177-01	Install new windows	66,878	177-01	Install new windows	75,000
		Prime Doors	20,000		Air Conditioning	11,878
	HA-wide	Operations	20,000	HA-wide	Operations	20,000
			106,878			106,878

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

Activities for Year 1	Activities for Year : 2005 FFY Grant: PHA FY:			Activities for Year: 2006 FFY Grant: PHA FY:		
	177-01	Air Conditioning	32,878			
		Site Work	39,000			
		Playground equip.	15,000			
	HA-wide	Operations	20,000	HA-wide	Operations	106,878
			106,878			106,878

## **RESIDENT COMMENTS**

The Housing Authority of Salyersville/Magoffin County is seeking resident and public comments on our Agency Plan. In the course of compiling the Plan we engaged in the following process.

A Resident Advisory Board Meeting was held on May 20<sup>th</sup> in attendance were Phyllis Flynt (RAB), Sue Crownover and Vietta Minix, all residents of the Housing Authority. Also attending were Kenneth Patrick, Executive Director, Shelvie Arnett, the secretary, Elisa Cooper and Ed Cooper from Consultants Plus.

Items discussed were new stoves, which most have been replaced, A/C 12 more units are needed. Windows need to be done before A/C is put in. The residents would like to see more playground equipment, more to be purchased in 2005-2006. They would also like to have storage units built.

The public meeting was held on July 9<sup>th</sup> at 1pm. In attendance were Kenneth Patrick, Executive Director, Shelvie Arnett, the secretary, Ed and Elisa Cooper of Consultants Plus. The Plan was discussed.

**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Salyersville/Magoffin County		Grant Type and Number Capital Fund Program Grant No: KY36-P177-50101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 2) x Performance and Evaluation Report for Period Ending: 03/31/02 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	20,000		10,000	10,000
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,800		1,800	1,800
8	1440 Site Acquisition				
9	1450 Site Improvement	50,000			
10	1460 Dwelling Structures	17,427			
11	1465.1 Dwelling Equipment—Nonexpendable	19,950			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				

18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	109,177		11,800	11,800
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				





**Capital Fund Program Five-Year Action Plan**

**Part I: Summary**

PHA Name				Original 5-Year Plan Revision No:	
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
<hr/> <hr/>					
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					
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**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b> Salyersville/Magoffin County		<b>Grant Type and Number</b> Capital Fund Program Grant No: KY36-P177-50100 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2000
<b>Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: ) x Performance and Evaluation Report for Period Ending: 03/31/02 Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	13,399.82		13,399.82	12,400
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	948.79		948.79	948.79
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	23,767.39		23,767.39	23,767.39
10	1460 Dwelling Structures	45,182		45,182	45,182
11	1465.1 Dwelling Equipment—Nonexpendable	23,685		23,685	23,685
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				

16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	106,983		106,983	105,983.18
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b>								
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>								
<b>Part II: Supporting Pages</b>								
PHA Name: Salyersville/Magoffin County Joint HA			Grant Type and Number Capital Fund Program Grant No: KY36P17750100 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost	Total Actual Cost		Status of Work
PHAW	Operations		1406	1	13,399.82	12,400		93
KY177-1	Administration		1410	1	948.79	948.79		100
KY177-1	Sidewalk Repair		1450	1	0	0		0
KY177-1	Ditch/Culvert		1450	1	4,400	4,400		100
KY177-1	Replace Light Poles		1450	10	9,800	9,800		100
KY177-1	Replace HVAC		1460	21	35,700	35,700		100
KY177-1	Install Fire Escape		1460		0	0		0
KY177-1	Install GFCIs		1460	59	1,652	1,652		100
KY177-1	New Refrigerators		1465	59	23,685	23,685		100
KY177-1	Termite Treatment		1450	1	7,500	7,500		100
KY177-1	New Smoke Detectors		1460		3,700	3,700		100
KY177-1	Replace Storm Doors		1460	26	4,130	4,130		100
KY177-1	Replace Porch Platforms		1450		2067.39	2067.39		100

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

PHA Name: Salyersville/Magoffin County Joint Housing Authority		Grant Type and Number Capital Fund Program No: KY36P17750100 Replacement Housing Factor No:			Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHAW	9/30/02			9/30/04			
KY177-1	9/30/02			9/30/04			

# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: <b>Housing Authority of Salyersville- Magoffin County</b>	Grant Type and Number Capital Fund Program Grant No: KY36-P177-50102 Replacement Housing Factor Grant No:	Federal FY of Grant: <b>2002</b>
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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	20,000			
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	66,878			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	20,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	106,878			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				



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

PHA Name: Housing Authority of Burkesville		Grant Type and Number Capital Fund Program No: KY36-P055-50102 Replacement Housing Factor No:					Federal FY of Grant: 2002
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHAW	9/30/04			9/30/06			
KY177-01	9/30/04			9/30/06			

