

Small PHA Plan Update  
Annual Plan for Fiscal Year: 2002

**LYNCH HOUSING AUTHORITY  
AGENCY PLAN**

**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:** LYNCH Housing Authority

**PHA Number:** NE043

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

### PHA Plan Contact Information:

Name: Leo Kalkowski, Executive Director

Phone: 402-569-2910

TDD: 402-569-2910

Email (if available): housing @threeivers.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  
Lynch Housing Authority  
HC72 Box 114  
Lynch, NE 68746
- 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.

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<input type="checkbox"/> Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan	
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<input checked="" type="checkbox"/> Attachment H: Voluntary Conversion of Developments from Public Housing Stock	



## **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.

The Housing Authority is working on Community Service requirements but no policy is established to date. No other changes.

### **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  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? \$17,275.

C.  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 D

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

The Capital Fund Program Annual Statement is provided as Attachment C

### **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  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 <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for      units <input type="checkbox"/> Public housing for      units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for      units (describe below)	
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

**Component 3, (6) Deconcentration and Income Mixing** (Insert from PIH 2001-4decon)

- a.  Yes  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>			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

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

[24 CFR Part 903.7 9 (k)]

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

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

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

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

#### **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) 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 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: State of Nebraska Non-Entitlement Areas
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:  
**The 2001-2004 Consolidated Plan does not quantify housing needs.**

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: The 2001-2004 State of Nebraska Consolidated Plan does not quantify housing needs. This Plan calls for maintaining existing and creating additional affordable housing. In this sense the efforts of LYNCH Housing Authority to maintain the public housing inventory is in accordance with the State Consolidated Plan.

### 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 Substantial Deviation from the 5-year Plan is any changes in the mission statement and/or strategies to implement the mission of the authority. This includes but is not limited to the reallocation of funds or the redefinition of clients. Changes that result from HUD mandates are excluded.

##### b. Significant Amendment or Modification to the Annual Plan:

A Significant Amendment or Modification to the Annual Plan includes: changes in budget items and capital fund projects due to emergencies, adjustment in policies to address issues such as vacancies; and initiate development projects that will affect the use of capital funds. Changes that result from changes in regulations and other HUD mandates that are excluded

Public Hearing was held 10-1-2001. The annual plan was approved and adopted by the Board of Directors.

### D. Voluntary Conversion of Developments from Public Housing Stock

See Attachment H. (ne043efgh01)

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year: 2002

**LYNCH HOUSING AUTHORITY  
ATTACHMENT A**

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

**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>
ø	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
N/A	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
✓	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
✓	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
✓	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
✓	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
✓	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
✓	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
✓	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
✓	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**

<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
✓	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
	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
✓	Public housing grievance procedures <input 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
✓	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
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency

**List of Supporting Documents Available for Review**

Applicable & On Display	Supporting Document	Related Plan Component
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <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
☐	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
☐	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
	Othersupporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Small PHA Plan Update  
Annual Plan for Fiscal Year: 2002

**LYNCH HOUSING AUTHORITY  
ATTACHMENT B  
Performance and Evaluation Report**

Copy from PIH 2000-4a

## 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)</b>					
<b>Part 1: Summary</b>					
PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Capital Fund Program Grant No: NE26P043 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2000</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: June 30, 2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations		1700.00	0	0
3	1408 Management Improvements Soft Costs		900.00	0	0
	Management Improvements Hard Costs				
4	1410 Administration		850.00	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement		4000.00	0	0
10	1460 Dwelling Structures	16999.00	9549.00	0	0
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				

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

PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Capital Fund Program Grant No: NE26P043 Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2000</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: _____) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: June 30, 2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	16999.00	16999.00	0	0
	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				



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

PHA Name: LYNCH Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: NE26P043 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
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		
NE043							Projects on schedule	

## 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)</b>					
<b>Part 1: Summary</b>					
PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Capital Fund Program Grant No: NE26P043 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2001</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: June 30, 2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	1700.00	1700.00	0	0
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	900.00	900.00	0	0
4	1410 Administration	850.00	850.00	0	0
5	1411 Audit	500.00	500.00	0	0
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	2000.00	2000	0	0
10	1460 Dwelling Structures	11049.00	11325.00	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				

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

PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Capital Fund Program Grant No: NE26P043 Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2001</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: June 30, 2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	16999.00	17275.00		
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE043 Replacement Housing Factor Grant No:				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 Work
					ORIGINAL	REVISED	ORIGINAL	REVISED	
NE043	Operations		1406		1700	1,700	0	0	.
	Management Improvements		1408		900	900	0	0	
	Administration		1410		850	850	0	0	
	Audit		1430		500	500			
	Site Improvement Pavement, Cement, Landscaping		1450		2000	2000	0	0	
	Dwelling Structure Roofing Carpet & Paint		1460		11049	11,325 (10,325) (1,000)	0	0	
	Dwelling Equipment		1465		0	0			
	Non Dwelling Equipment		1475		0	0			
					0				
	TOTAL				16999	17275			

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

PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Program No: NE043 Replacement Housing Factor No:					Federal FY of Grant: 2001
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	
NE043							

**CIAP Budget /Progress Report**  
**Part I: Summary**

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2577-0044  
(exp. 04/30/2004)

**Comprehensive Improvement Assistance Program (CIAP) Office of Public and Indian Housing**

HA Name: Lynch Housing Authority		Modernization Project Number NE26P043 902-99		FFY of Grant Approval: 1999	
<input type="checkbox"/> Original CIAP Budget		<input type="checkbox"/> Revised CIAP Budget/Revision Number		<input checked="" type="checkbox"/> Progress Report for Period Ending 6/30/2001	
				<input type="checkbox"/> Final Progress Report	
Line No.	Summary by Development Account	Total Funds Approved		Total Funds	
		Original	Revised	Obligated	Expended
1	Total Non-CIAP Funds				
2	1406 Operations (may not exceed 10% of line 16)	1805.00	1505.00	1805.00	1326.60
3	1408 Management Improvements				
4	1410 Administration	-0-	300.00	-0-	-0-
5	1415 Liquidated Damages				
6	1430 Fees and Costs				
7	1440 Site Acquisition				
8	1450 Site Improvement				
9	1460 Dwelling Structures	6100.00	7195.46	6100.00	6475.46
10	1465.1 Dwelling Equipment—Nonexpendable	6340.00	6340.00	1689.60	1689.60
11	1470 Nondwelling Structures				
12	1475 Nondwelling Equipment	3650.00	2554.54	2819.70	1493.10
13	1485 Demolition				
14	1495.1 Relocation Cost				
15	1498 Mod Used for Development				
16	<b>Amount of CIAP Grant</b> (Sum of lines 2-14)	17895.00	17895.00	12414.30	10984.76
17	Amount of line 16 Related to LBP Activities				
18	Amount of line 16 Related to Security				
19	Amount of line 16 Related to Section 504 Compliance				
20	Amount of line 16 related to Energy Conservation Measures				
Signature of Executive Director		<b>HUD Certification:</b> In approving this budget and providing assistance to a specific housing development(s),			
Date (mm/dd/yyyy)		I hereby certify that the assistance will not be more than is necessary to make the assisted activity feasible			
		after taking into account assistance from other government sources (24 CFR 12.50).			
		Signature of Director, Office of Public Housing / ONAP Administrator		Date (mm/dd/yyyy)	
		form HUD-52825 (10/96) ref Handbook 7485.1			



**CIAP Budget /Progress Report  
Part III: Implementation Schedule**

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

**OMB Approval No. 2577-0044  
(exp. 04/30/2004)**

Development Number	Architect/Engineer Contract Awarded			All Funds Obligated			All Funds Expended		
	Original	Revised (Attach explanation)	Actual	Original	Revised (Attach explanation)	Actual	Original	Revised (Attach explanation)	Actual
NE043									

form **HUD-52825** (10/96)  
ref Handbook 7485.1

Small PHA Plan Update  
Annual Plan for Fiscal Year: 2002

**LYNCH HOUSING AUTHORITY**  
**ATTACHMENT C**  
**Capital Fund Annual Plan**

Copy from PIH 2000-4a

## 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)</b>					
<b>Part 1: Summary</b>					
PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE043 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2002</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	900.00	1700.00	-0-	-0-
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	850.00	900.00	-0-	-0-
4	1410 Administration	1700.00	850.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	4049.00	4049.00	-0-	-0-
10	1460 Dwelling Structures	8000.00	8276.00	-0-	-0-
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	1500.00	1500.00	-0-	-0-
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
		Original	Revised		

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

PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE043 Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2002</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines 2-19)	16,999.00		17,275.00	
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: LYNCH Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P043 Replacement Housing Factor Grant No:			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 Work
				Original	Revised	Original	Revised	
NE043	Operation	1406			1700			
	Management Improvements Hard & Soft Costs	1408			900			
	Administration	1410			850			
	Audit	1411						
	Fees & Costs	1430						
	Site Improvement <ul style="list-style-type: none"> <li>▪ Pavement</li> <li>▪ Cement Work</li> <li>▪ Landscaping</li> </ul>	1450			4049			
	Dwelling Structures <ul style="list-style-type: none"> <li>▪ Renovating Roofs</li> <li>▪ Carpet, Painting &amp; Vertical Blinds</li> </ul>	1460			8,276 (2,276) (6,000)			
	Dwelling Equipment	1465.1						
	Non-Dwelling Structure	1470						
	Non-Dwelling Equipment Washer/Dryer	1475			1500			
	Total				17,275.00			



Small PHA Plan Update  
Annual Plan for Fiscal Year: 2002

**LYNCH HOUSING AUTHORITY  
ATTACHMENT D  
Five Year Action Plan**

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## Capital Fund Program Five-Year Action Plan

### Part I: Summary

PHA Name: LYNCH Housing Authority					<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 03				
Development Number/Name/HA-Wide	Year 1 2001 & 2002	Work Statement for Year 3 FFY Grant: 2003 PHA FY:10/2003		Work Statement for Year 4 FFY Grant: 2004 PHA FY: 10/2004		Work Statement for Year 5 FFY Grant: 2005 PHA FY: 10/2005		Work Statement for Year 6 FFY Grant: 2006 PHA FY: 10/2006	
NE 043	Annual Statemen								
		OPERATIONS	1700	OPERATIONS	1700	OPERATIONS	1700	OPERATIONS	1700
		MANAGEMENT IMPROVEMENTS	900	MANAGEMENT IMPROVEMENTS	900	MANAGEMENT IMPROVEMENTS	900	MANAGEMENT IMPROVEMENTS	900
		ADMINISTRATION	850	ADMINISTRATION	850	ADMINISTRATION	850	ADMINISTRATION	850
		FEES AND COSTS	0	FEES AND COSTS	500	FEES AND COSTS	0	FEES AND COSTS	0
		SITE IMPROVEMENT	4276	SITE IMPROVEMENT	0	SITE IMPROVEMENT	5000	SITE IMPROVEMENT	0
		DWELLING STRUCTURE	4549	DWELLING STRUCTURE	2276	DWELLING STRUCTURE	2000	DWELLING STRUCTURE	13825
		DWELLING EQUIPMENT	0	DWELLING EQUIPMENT	11049	DWELLING EQUIPMENT	6825	DWELLING EQUIPMENT	0
		NON-DWELLING STRUCTURE:	0	NON-DWELLING STRUCTURE	0	NON-DWELLING STRUCTURE	0	NON-DWELLING STRUCTURE	0
		NON-DWELLING EQUIPMENT	5000	NON-DWELLING EQUIPMENT	0	NON-DWELLING EQUIPMENT	0	NON-DWELLING EQUIPMENT	
<b>Total CFP Funds (Est.)</b>		<b>17275.00</b>		<b>17275.00</b>		<b>17275.00</b>		<b>17275.00</b>	
Total Replacement Housing Factor Funds									

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

Activities for 2001 & 2002	Activities for Year : 2003 FFY Grant: 2003 PHA FY:10/2003			Activities for Year: 2004 FFY Grant: 2004 PHA FY: 10/2004		
	Operations	# 1406	\$ 1700	Operations	1406	\$ 1700
	Management Improvements • Computer Help, Training, Nahro Training & Meetings	1408	900	Management Improvements • Computer Help, Training, Nahro Training & Meetings	1408	900
	Administration	1410	850	Administration	1410	850
	Audit	1411	0	Audit	1411	500
	Site Improvement: Pavement, Cement and Landscaping	1450	4276	Site Improvement: Pavement, Cement and Landscaping	1450	0
	Dwelling Structures Carpet & Painting	1460	4549	Dwelling Structure Carpet & Painting	1460	2276
	Dwelling Equipment	1465	0	Dwelling Equipment 10 units – Air Conditioners	1465	11049
	Non-Dwelling Structure	1470	0	Non-Dwelling Structure	1470	0
	Non-Dwelling Equip: New Lawn Mower	1475	5000	Non-Dwelling Equip:	1475	0
	<b>Total Amount of Grant</b>		<b>\$17275</b>			<b>\$17275</b>

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

Activities 2001& 2002	Activities for Year : 2005 FFY Grant: 2005 PHA FY: 10/2005		Activities for Year: 2006 FFY Grant: 2006 PHA FY10/2006			
	Operations	1406	1700	Operations	1406	1700
	Management Improvements • Computer Help, Training, Nahro Training & Meetings	1408	900	Management Improvements • Computer Help, Training, Nahro Training & Meetings	1408	900
	Administration	1410	850	Administration	1410	850
	Audit	1411	0	Audit	1411	0
	Site Improvement • Pavement, Cement and Landscaping	1450	5000	Site Improvement	1450	0
	Dwelling Structures Carpet & Painting	1460	2000	Dwelling Structures • Sinks, faucets & drains • Carpet & painting • New Shower Valves	1460	13825 (5000) (5000) (3825)
	Dwelling Equipment • Ranges for Kitchens • Air Conditioner units	1465	6825	Dwelling Equipment	1465	0
	Non dwelling Structure	1470	0	Non Dwelling Structure	1470	0
	Non Dwelling Equipment	1475	0	Non Dwelling Equipment	1475	0
	<b>Total Annual Grant</b>		<b>17275</b>	<b>Total Annual Grant</b>		<b>17275</b>
	<b>Total estimated cost over next 5 years</b>		<b>\$ 86375.00</b>			

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year: 2002

**LYNCH HOUSING AUTHORITY  
ATTACHMENTS E, F, G, H**

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

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

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

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

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

Elected

Appointed

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

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

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain):

The Executive Director has posted notice of Resident Commissioner requirements and contacted residents personally to fill the position. No resident of the Lynch Housing Agency is interested. All residents are elderly and do not want to be a resident commissioner. The Executive Director has fulfilled his obligation to this requirement through his personal contact efforts and posted notices.

B. Date of next term expiration of a governing board member: 9-30-2002

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

**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.)

**PUBLIC HOUSING RAB MEMBERS:**

Nola Ducker	Term 10-1-2000 to 12-31-2005
Dolores Schmitz	Term 1-1-2000 to 12-31- 2004
A. B. McDonald	Term 1-1-2000 to 12-31- 2003

**Required Attachment G:  
Comments of Resident Advisory Board or Boards**

**RAB BOARD RECOMMENDATIONS AND LYNCH HOUSING AUTHORITY RESPONSE:**

At the tenant meeting held on 9-27-2001 the RAB recommendations to the housing authority were as follows:

The Resident Advisory Board did not have any further comments pertaining to our Agency Plan.

**Required Attachment H:  
VOLUNTARY CONVERSION OF DEVELOPMENT(S) FROM  
PUBLIC HOUSING STOCK:  
REQUIRED INITIAL ASSESSMENTS**

October 1, 2001 Excerpt from the Board of Commissioners Meeting

#1 HUD requires a one-time Initial Assessment of Voluntary Conversion of Developments from Public Housing Stock by October 1, 2001, with report submitted in the FY 2002 Agency Plan along with subsequent certification of the assessment by the board of commissioners.

#2 An Initial Assessment was completed by the Executive Director of the Lynch Housing Authority with the following results:

#3 The Lynch Housing Authority has conducted an assessment of their public housing stock and the community and after due consideration has concluded that conversion of the development is inappropriate because removal of the development would not meet the necessary conditions for voluntary conversion for the following reason(s):

- a. Conversion would be more expensive than continuing to operate the development as public housing;
- b. Conversion to Section 8 tenant based assistance would not effect the ability to occupy the housing development; and
- c. Workability of vouchers within the Lynch community would be inappropriate.

#4 The Lynch Housing Authority has opted not to convert public housing stock to Section 8 Tenant Based Assistance.