

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

Small PHA Plan Update
Annual Plan for Fiscal Year: 2002

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

PHA Plan Agency Identification

PHA Name: Piedmont Housing Authority

PHA Number: WV029

PHA Fiscal Year Beginning: 04/2002

PHA Plan Contact Information:

Name: Beverly A. Kitzmiller

Phone: (304)355-2929

TDD: (304)355-2929

Email (if available): potomacvillage@mindspring.com

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.

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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 sponsored, Safety & Security Group, has continued to be instrumental in combating crime in our community. Neighborhood Crime Watch training, including "Personal Protection Awareness" and "Operation Identification" has been provided to residents. The group is supported by the Mayor, City Council, local police and the sheriffs department. We are working closely with the Piedmont Police Department to offer programs on drug prevention and safety for seniors and children.

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? \$ 168,000

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

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment

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

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: Actual or projected start date of activity: 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.

13. 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)]

14. 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)

3. In what manner did the PHA address those comments? (select all that apply)

- The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 - Yes No: below or
 - Yes No: at the end of the RAB Comments in Attachment _____.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.
- Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: State of West Virginia

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: The PHA Plan and the Consolidated Plan are committed to providing decent, safe and sanitary housing by providing available resources to meet that goal.

C. Criteria for Substantial Deviation and Significant Amendments

10. 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: Any substantial deviation in the 5 year plan that causes changes in the service provided to residents or significant changes in the agency's financial situation will be documented in subsequent annual plans. Exception to this will be made to include any changes in HUD regulatory requirements which will not be considered a significant amendment.

B. Significant Amendment or Modification to the Annual Plan: Changes that would affect

tenant's income, rent and admission and occupancy will be made within a thirty day period. All other changes will be examined on a case by case basis and modifications made to the PHA Plan will be made on an annual basis subject to a full public hearing and HUD regulations. Exception to this will be made to include any work items not previously approved in the plan, such as necessary and emergency items, will only require the approval of the Executive Director and the Board of Commissioners.

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 Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
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
	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	Annual Plan: Rent

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	for setting public housing flat rents X check here if included in the public housing A & O Policy	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
	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 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
X	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
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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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 (_____ 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
X	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 (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the 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)	Pet Policy

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	<input type="checkbox"/> check here if included in the public housing A & O 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) (list individually; use as many lines as necessary)	(specify as needed)

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

Piedmont Housing Authority	Grant Type and Number Capital Fund Program: WV15P02950102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of 2002
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Annual Statement and Evaluation Report Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)

Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Original	Revised	Obligated	Expended
non-CFP Funds				
Operations	17,500			
Management Improvements	5,000			
Administration				
Audit				
Liquidated Damages				
Fees and Costs	15,000			
Site Acquisition				
Site Improvement				
Dwelling Structures	130,500			
1 Dwelling Equipment—Nonexpendable				
Nondwelling Structures				
Nondwelling Equipment				
Demolition				
Replacement Reserve				
Moving to Work Demonstration				
1 Relocation Costs				
Mod Used for Development				
Contingency				
Amount of Annual Grant: (sum of lines 2-19)	168,000			
Amount of line 20 Related to LBP Activities				

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

Piedmont Housing Authority	Grant Type and Number Capital Fund Program: WV15P02950102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of 2002
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Annual Statement and Evaluation Report Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)

Primary by Development Account	Total Estimated Cost		Total Actual Cost	
Amount of line 20 Related to Section 504 Compliance				
Amount of line 20 Related to Security				
Amount of line 20 Related to Energy Conservation Measures				

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

Piedmont Housing Authority		Capital Fund Program WV15P02950102 Replacement Housing Factor #:			Federal FY of Grant: 2002		
Account	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
	Resident Maintenance Wages	1406		17,500			
	Computer Upgrade	1408		5,000			
	A & E Fees	1430		15,000			
	Replace Stair Towers in M/R	1460		50,000			
	Floor Replacement	1460		2,500			
	Entry & Storm Door Replacement / TH	1460		38,000			
	Vinyl Soffit/ M/R	1460		10,000			
	Siding/Spouting/Soffit Replacement/ TH	1460		30,000			

Fund Program 5-Year Action Plan

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

CFP 5-Year Action Plan		
Statement <input type="checkbox"/> Revised statement		
029	Development Name (or indicate PHA wide)	Piedmont Housing Authority
Number of Needed Physical Improvements or Management Items	Estimated Cost	Planned Start Date (HA Fiscal Year)
Maintenance Wages	17,500	2003
Upgrade	5,000	2003
	16,000	2003
Replacement-GA (14 units), MR common areas	60,000	2003
Stove, hall, kitchen lighting, TH, GA, MR	19,500	2003
	20,000	2003
Replacement-MR Common Areas	20,000	2003
Living Room & Lobby Furniture	15,000	2003
Stove Upgrade	5,000	2003
Appliance	5,000	2004
Maintenance Wages	18,000	2004
Upgrade	5,000	2004
	16,000	2004
Stoves, GA, TH, MR	5,000	2004
Appliance/furniture	40,000	2004
Window bi-fold doors	12,000	2004
Stoves/ TH, GA, MR	20,000	2004
Kitchen cabinets	49,000	2004
Hot water tank	3,000	2005
Tractor attachment/tractor	3,000	2005

aintenance Wages		2005
ppgrade	18,000	2005
	5,000	2005
stos floor tile in TH with VCT (13 units)	15,000	
ise	100,000	2006
	30,000	2006
aintenance Wages		2006
ppgrade	18,000	2006
	5,000	2006
ment in garage	15,000	2006
lacement	5,000	2006
ment	10,000	
lacement	10,000	
stos floor tile with VCT (13 units)	5,000	
	100,000	
ted cost over next 5 years	858,000	[REDACTED]

PHA Public Housing Drug Elimination Program Plan

PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Not

General Information/History

Amount of PHDEP Grant \$ _____
Funding type (Indicate with an "x") N1 _____ N2 _____ R _____
Which funding is requested _____

Brief Summary of Annual PHDEP Plan

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

Target Areas

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

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

Duration of Program

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

12 Months _____ 18 Months _____ 24 Months _____

Program History

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

PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date

PHDEP Plan Goals and Budget

PHDEP Plan Summary

Below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

PHDEP Budget Summary

Amount of PHDEP funding allocated to each line item.

FY _____ PHDEP Budget Summary Attachment _____

Implementation dated:	
Line Item	Total Funding
Reimbursement of Law Enforcement	
Special Initiative	
Buyback TA Match	
Security Personnel	
Employment of Investigators	
Part-time Tenant Patrol	
Physical Improvements	
Prevention	
Intervention	
Treatment	
Program Costs	
DEP FUNDING	

PHDEP Plan Goals and Activities

Below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each activity (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information for activities where no goals or objectives are planned. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities should be left blank.

Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators

Special Initiative					Total PHDEP Funding: \$		
Initiatives	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
	██████	██████████					
	██████	██████████					
	██████	██████████					

Buyback TA Match					Total PHDEP Funding: \$		
Initiatives	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
	██████	██████████					
	██████	██████████					
	██████	██████████					

Priority Personnel	Total PHDEP Funding: \$
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ies	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators

Employment of Investigators	Total PHDEP Funding: \$
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ies	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators

Anty Tenant Patrol	Total PHDEP Funding: \$
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ies	# of Persons	Target Population	Start Date	Expected Complete	PHEDEP Funding	Other Funding	Performance Indicators

Served	Population	Date	Complete Date	Funding	(Amount /Source)	

Physical Improvements	Total PHDEP Funding: \$
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Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators

Injury Prevention	Total PHDEP Funding: \$
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Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators

Intervention	Total PHDEP Funding: \$
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ies	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators

Treatment	Total PHDEP Funding: \$
------------------	--------------------------------

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

r Program Costs	Total PHDEP Funds: \$
------------------------	------------------------------

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

Required Attachment ____: 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)

4. Name of resident member(s) on the governing board: Rick Adams

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

Elected

Appointed

C. The term of appointment is : 2 year term, Term expires 03/25/2002

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

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

B. Date of next term expiration of a governing board member: 04/06/2002

6. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Tony Francis, Mayor
City of Piedmont

Required Attachment _____: 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.)

Betty Jo Bartlett
51 Jones Street, Apt. 310
Piedmont, WV 26750

Geri Dawson
51 Third Street
Piedmont, WV 26750

Lynn Kithcart
62 Third Street, Apt. 1A
Piedmont, WV 26750

Mary K. Shook
51 Jones Street, Apt. 509
Piedmont, WV 26750

ATTACHMENT: RASS FOLLOW-UP PLAN

* NEIGHBORHOOD APPEARANCE: A new cleaning schedule has been implemented as of November 27, 2001. Duties are to be divided among the maintenance workers with weekly inspections by the maintenance supervisor. Residents will be encouraged to report any problem areas in the development.

*** COMMUNICATION:**

- 1) The Admission and Occupancy Policy as well as a copy of the Lease are posted in the lobby of the main office building. Leases are reviewed thoroughly upon tenant move-in. Management has planned to distribute a newsletter to residents on a semi-monthly basis to address the "rules of the lease" and other topics.
- 2) Information about meeting and events are posted in the lobby of the main office building as well as distributed to the door of each of our 100 resident families. The housing authority can not improve upon this method. We can only assume that residents are not reading the notices.
- 3) The resident organization is supported by approximately three residents. The remaining resident population is non-supportive. The housing authority continues to support any endeavor taken upon by these individuals.
- 4) Through the newsletter and with direct personal contact, residents will be encouraged to voice their questions and concerns. The housing staff has always strived to be responsive to resident needs.

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

PHA Name: Piedmont Housing Authority	Grant Type and Number Capital Fund Program: WV15P02950100 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
Performance and Evaluation Report for Period Ending: 9/30/01
Reserve for Disasters/ Emergencies
Revised Annual Statement (revision no:)
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	-0-	16,000	16,000	4085.12
3	1408 Management Improvements				
4	1410 Administration	2,000	-0-		
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	15,000	15,000	14,600	9850.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	148,165	134,165	84,722.96	2972.96
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	165,165	165,165	115,322.96	16,908.08
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

24	Amount of line 20 Related to Energy Conservation Measures				
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Statement/Performance and Evaluation Report
Grant Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Supporting Pages

Piedmont Housing Authority		Grant Type and Number Capital Fund Program #: WV15P02950100 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000		
Account	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
	Resident Maintenance Wages	1406		-0-	16,000	16,000	4085.12
	Administration	1410		2,000	-0-		
	A & E Fees	1430		15,000	15,000	14,600	9850.00
	Elevator Refurbish	1460		87,165	87,165	82,171.96	421.96
	Door Replacement	1460		25,000	28,000	-0-	-0-
	Floor Replacement	1460		26,000	10,204	2,551	2,551
	Security System	1460		-0-	8,796	-0-	-0-
	Locks	1460		2,000	-0-		
	Hot Water Tanks	1460		8,000	-0-		
			TOTAL	165,165	165,165	115,322.96	16,908.08

	Original	Revised	Actual	Original	Revised	Actual	

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