

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

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

**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: Parrish Housing Authority

PHA Number: AL-153

PHA Fiscal Year Beginning: (mm/yyyy) 1 /2003

PHA Plan Contact Information:

Name: Betty Thomas /Janet Eustice

Phone: 205-686-7621 / 205-648-5963

TDD:

Email (if available): walkercountyha@csi.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 2003**
[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.

NONE

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? \$ 26,147.00

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 C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

1. 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: 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 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 _____ .
 - 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 G .
 - 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 Alabama Consolidated Plan)

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

- 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)

Based on the Housing Authority's waiting list.

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)

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:

As imposed upon by HUD or as needed to be in compliance with HUD regulations.

A. Significant Amendment or Modification to the Annual Plan:

**Changes to rent or admissions policies or organization of the waiting list;
Additions of non-emergency work items;
Items not included in the current Annual Statement or 5-year Action Plan;
Changes in use of replacement reserve funds under the Capital Fund;
And 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.

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
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
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	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
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	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
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
X	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
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
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
N/A	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
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The 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
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report Attachment B
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/

PHA Name: PARRISH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: ALO9P153501-03 Capital Fund Program Replacement Housing Factor Grant No:
---	--

Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised A
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		
		Original	Revised	
1	Total non-CFP Funds			
2	1406 Operations	\$ 2,700.00		
3	1408 Management Improvements			
4	1410 Administration	\$ 2,000.00		
5	1411 Audit			
6	1415 liquidated Damages			
7	1430 Fees and Costs	\$ 1,600.00		
8	1440 Site Acquisition			
9	1450 Site Improvement	\$ 5,000.00		
10	1460 Dwelling Structures	\$ 11,847.00		
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Nondwelling Structures			
13	1475 Nondwelling Equipment	\$ 3,000.00		
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)	\$ 26,147.00		
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

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

PHA Name: PARRISH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: AL09P153501-03 Capital Fund Program Replacement Housing Factor #:			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	
				Original	Revised
AL15301	Operations a) To Put into General Account	1406		\$2,700.00	
AL15301	Administration a) Administration Expense such as professional services procurement, management and staff time.	1410		\$2,000.00	
AL15301	Fees & Costs a) Architectural preparation of plans, assist in bidding, award of contract, construction engineering.	1430		\$1,600.00	
AL15301	Site Improvements a) Tree stump and root removal, sidewalk replacement, ramps and rails, clearing property lines.	1450		\$5,000.00	
AL15301	Dwelling Structures a) Painting interiors, exteriors, replacing and repairing sewer lines, replacing windows and window screens.	1460		\$11,847.00	
AL15301	Non Dwelling Structures a) Computer	1475		\$ 3,000.00	

Capital Fund Program 5-Year Action Plan Attachment C

Complete one 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 planned 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 this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
AL153-01	PARRISH HOUSING AUTHORITY	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
A) Complete Remodeling of Bathrooms B) Landscaping C) Lead Base Paint Testing and Abatement D) Window Blinds Throughout Apts. E) Repair of Sewer Lines	\$80,000.00 \$28,000.00 \$12,000.00 \$ 5,000.00 \$30,000.00	
Total estimated cost over next 5 years	\$155,000.00	

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

A. Amount of PHDEP Grant \$ N/A

B. Eligibility type (Indicate with an "x") N1_____ N2_____ R_____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space 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

E. 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 total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

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

F. 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. For "Other", identify the # of months).

12 Months_____ **18 Months**_____ **24 Months**_____

G. PHDEP Program History

Indicate each 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 funded programs have 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 as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

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

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

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

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY ____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	

9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

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

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9170 - Drug Intervention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							

3.					
----	--	--	--	--	--

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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: **Jimmy Maples**

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

- Elected
 Appointed

C. The term of appointment is (include the date term expires): **The Town of Parrish has not provided me with this information**

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

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

B. Date of next term expiration of a governing board member:

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

Ruby Nelson
Jimmye Maples
Karen Paschal

ATTACHMENT G

**COMMENTS OF
RESIDENT ADVISORY BOARD
&
EXPLANATION OF PHA RESPONSE**

In January 2003 the Resident Advisory Board presented to the Board of Commissioners the following statement.

We the tenants and Advisory Board Members have attended several meetings concerning our apartments living conditions and invironmental Surroundings. Improvements are definitely needed.

- a) The inside of our apartments need to be painted.**
- b) Our outside light fixtures need to be changed for better lighting.**
- c) Several apartment units need storage units.**
- d) Bathroom work is needed on apartment 13 and also a washer and dryer fixture.**
- e) Door locks need to be changed for 1 key to open front and back door.**

These are just a few things that we are in need of. Please consider these needs and let Waldrop Apts. in Parrish, AL be on your agenda.

**RESPONSE TO THESE COMMENTS
FROM EXECUTIVE DIRECTOR**

These issues will be addressed in respect to available funds.

Executive Director

Attachment H
Mission Plans & Goals

Progress Report

In the beginning of our 5 year Agency Plan our Mission and Goals were as follows:

One of these goals was to modernize the units by adding central heat and air. This has been accomplished.

The authority will continue to pursue and achieve our goals.

The long range scope of the authority is to improve the facilities and community for all its residents. The Authority plans to make site improvements by adding landscaping and by refurbishing many sidewalks.

We are also planning to replace the roofs on developments 1 and 2 with metal roofing for preventative maintenance reasons as well as to give the development a new and attractive look for the community.

The authority will continue to serve the HA community not only by providing them with decent housing but also by improving the community of its residents.

ATTACHMENT I.

Parrish Housing Authority
Project AL153
Criteria For Substantial Deviations and Significant Amendments

Definitions & Response

a) Amendment and Deviation Definitions

24 CFR Part 903.7®

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:**

As imposed upon by HUD or as needed to be in compliance with HUD.

a) **Significant Amendment or Modification to the Annual Plan:**

**Changes to rent or admissions policies or organization of the waiting list;
Additions of non-emergency work items
Items not included in the current Annual Statement or 5-year Action Plan
Changes in use of replacement reserve funds under the Capital Fund;
And any change with regard to demolition or disposition, designation,
homeownership programs or conversion activities.**

ATTACHMENT J

Parrish Housing Authority
Deconcentration Policy

SECTION XXVI. DECONCENTRATION RULE

- 1. Objective: The objective of the Deconcentration Rule for public housing units is to insure that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development. The specific objective of the housing authority is to house no less than 40 percent of its public housing inventory with families that have income at or below 30% of the area median income by public housing development. Also the housing authority will take actions to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the housing authority does not concentrate families with higher Income levels, it is the goal of the housing authority not to house more than 60% Of its units in any one development with families whose income exceeds 30% of The area median income. The housing authority will track the status of family Income, by development, on a monthly basis by utilizing income reports Generated by the housing authority’s computer system.
 - a) Actions: To accomplish the deconcentration goals, the housing authority will take the following actions:
 - a. At the beginning of each housing authority fiscal year, the housing Authority will establish a goal for housing 40% of its new admissions With families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of Move-ins from the previous housing authority fiscal year.
 - b. To accomplish the goals:
 - (1) Housing not less than 40% of its public housing inventory on an annual basis with families that have incomes at or below 30% of area median income, and;
 - a) Not housing families with incomes that exceed 30% of the area Median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, the housing authority’s Tenant Selection and Assignment Plan, which is a part of this policy, provides for skipping families on the waiting list to accomplish these goals.

Component 3, (6) Deconcentration and Income Mixing

- 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:

Deconcentration Policy for Covered Developments			
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)]
Parrish Housing Authority	18	Less than 100 units. Exempt.	

ATTACHMENT K
VOLUNTARY CONVERSION FROM PUBLIC HOUSING STOCK
REQUIRED INITIAL ASSESSMENT

The Parrish Housing Authority has made an assessment of its current public housing stock as required in the Federal Register (FR-4476-03) using data from our Financial Data Schedule dated (12-31-2002) and our estimated long-range capital improvements costs.

In accordance with 972.200(b) each development was reviewed and the results are as follows. We have only one development as follows:

Project AL153001	Cost to Operate:	\$328.08
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Compared to:

Section 8 Voucher Program	Cost to Operate:	\$216.37
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As a result of the conversion assessment it is our opinion that project AL153001 would require conversion, however we feel that at this time it is inappropriate to perform any conversion of public housing stock at this time.

Janet Eustice
Executive Director
Certified by

Annual Statement/Performance and Evaluation Report Attachment D
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/

PHA Name: PARRISH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: AL09P153501-01 Capital Fund Program Replacement Housing Factor Grant No:
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<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised A <input checked="" type="checkbox"/> Final Performance and Evaluation Report
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Line	Summary by Development Account	Total Estimated Cost		
		Original	Revised	
1	Total non-CFP Funds			
2	1406 Operations		\$ 3,436.66	\$ 3,436.66
3	1408 Management Improvements			
4	1410 Administration	\$ 1,000.00	\$ 1,800.00	\$ 1,800.00
5	1411 Audit			
6	1415 liquidated Damages			
7	1430 Fees and Costs	\$ 3,654.00	\$ 4,983.88	\$ 4,983.88
8	1440 Site Acquisition			
9	1450 Site Improvement	\$10,000.00	\$ 16,900.00	\$ 16,900.00
10	1460 Dwelling Structures	\$21,000.00	\$ 6,632.51	\$ 6,632.51
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Nondwelling Structures			
13	1475 Nondwelling Equipment		\$ 1,900.95	\$ 1,900.95
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)	\$35,654.00	\$ 35,654.00	\$ 35,654.00
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

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

PHA Name: PARRISH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: AL09P153501-01 Capital Fund Program Replacement Housing Factor #:			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	
				Original	Revised
HA WIDE	<u>OPERATIONS</u>	1406		\$ 0	\$3436.66
HA WIDE	<u>ADMINISTRATION</u>	1410		\$ 1,000.00	\$ 1,800.00
HA WIDE	<u>FEES AND COSTS</u>	1430		\$ 3,654.00	\$ 4,983.88
HA WIDE	<u>SITE IMPROVEMENTS</u>	1450		\$10,000.00	\$16,900.00
HA WIDE	<u>MODERNIZATION OF UNITS</u>	1460		\$21,000.00	\$ 6,632.51
HA WIDE	<u>NON-DWELLING EQUIPMENT</u>	1475		\$ 0	\$ 1,900.95

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

PHA Name: PARRISH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: AL09P153501-01 Capital Fund Program Replacement Housing Factor #:					Federal
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons
	Original	Revised	Actual	Original	Revised	Actual	
AL153-01	9/01/02			9/01/04		1/01/03	

Annual Statement/Performance and Evaluation Report **Attachment D**
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/

PHA Name: PARRISH HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: AL09P153501-02 Capital Fund Program Replacement Housing Factor Grant No:
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Original Annual Statement
 Reserve for Disasters/ Emergencies **Revised A**
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost	
		Original	Revised
1	Total non-CFP Funds		
2	1406 Operations	\$ 4,000.00	
3	1408 Management Improvements		
4	1410 Administration	\$ 2,000.00	
5	1411 Audit		
6	1415 liquidated Damages		
7	1430 Fees and Costs	\$ 3,000.00	
8	1440 Site Acquisition		
9	1450 Site Improvement	\$ 6,000.00	
10	1460 Dwelling Structures	\$17,678.00	
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Nondwelling Structures		
13	1475 Nondwelling Equipment	\$ 1,000.00	
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)	\$33,678.00	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Compliance		
23	Amount of line 20 Related to Security		
24	Amount of line 20 Related to Energy Conservation Measures		

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

PHA Name: PARRISH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: AL09P153501-02 Capital Fund Program Replacement Housing Factor #:			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	
				Original	Revised
HA WIDE	<u>OPERATIONS</u>	1406		\$ 4,000.00	
HA WIDE	<u>ADMINISTRATION</u>	1410		\$ 2,000.00	
HA WIDE	<u>FEES AND COSTS</u>	1430		\$ 3,000.00	
HA WIDE	<u>SITE IMPROVEMENTS</u>	1450		\$ 6,000.00	
HA WIDE	<u>DWELLING STRUCTURES</u>	1460		\$ 17,678.00	
HA WIDE	<u>NON-DWELLING EQUIPMENT</u>	1475		\$ 1,000.00	

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

PHA Name: PARRISH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: AL09P153501-02 Capital Fund Program Replacement Housing Factor #:					Federal
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons
	Original	Revised	Actual	Original	Revised	Actual	
AL153-01	1/31/03	5/31/04		7/31/03	5/31/06		