

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

Small PHA Plan Update
Annual Plan for Fiscal Year: 07/01/2003

Little River County Housing Authority
AR 020

AR020v01

**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: Little River County Housing Authority

PHA Number: AR 020

PHA Fiscal Year Beginning: (07/2003)

PHA Plan Contact Information:

Name: Mary C. Crutchfield
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Email (if available): Lrhouses@mail.cswnet.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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<input type="checkbox"/> Other (List below, providing each attachment name)	

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

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

With stressed economic conditions at an all time high, more and more families are in need assisted housing. It is imperative that we, as a public entity, efficiently utilize every available dollar to maintain our housing stock in the best possible condition. It is our desire that this plan will continue providing safe, decent, sanitary housing for all eligible participants.

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.

There are no changes in the policies or programs administered by this agency that are not covered in other sections of this update.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. 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? \$ 267,425 estimated.

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 N/A

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) F

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 end of the RAB Comments in Attachment F.

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 Arkansas, County of Little River
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
 - The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
 - Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
 - Other: (list below)
3. PHA Requests for support from the Consolidated Plan Agency
 - Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

The Housing Authority of the County of Little River, Arkansas will consider the following to be changes in its Agency Plan necessary and sufficient to require a full review by the Resident Advisory Board before a corresponding change in the Agency Plan can be adopted:

- Any alteration of the PHA’s Mission Statement.
- Any change or amendment to a stated Strategic Goal.
- Any change or amendment to a stated Strategic Objective except in a case where the changes results from the objective having been met.
- Any introduction of a new Strategic Goal or a new Strategic Objective.

Any alteration in the Capital Fund Program (CFP) that affects an expenditure greater than twenty percent (20%) of the CFP Annual Budget for that year.

B. Significant Amendment or Modification to the Annual Plan:

In defining the above, the Housing Authority of the County of Little River, Arkansas intends by Strategic Goal and Strategic Objective specifically those items in its Five Year Plan and any change in the above items will be considered a “substantial deviation” from the Plan. Furthermore, the PHA considers the following changes and that these items are “significant amendments or modifications” to the Agency Plan:

1. Changes to rent or admissions policies or organization of the waiting list.
2. Additions of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund.
3. Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments by HUD.

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
X	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	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
X	Section 8 rent determination (payment standard) policies <input checked="" 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
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any required policies governing any Section 8 special housing types <input checked="" 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
X	Section 8 informal review and hearing procedures <input checked="" 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
	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	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
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Housing Authority of the County of Little River, Arkansas		Grant Type and Number Capital Fund Program: AR37P02050101 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 07/2001	
<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: 12/31/2002 <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					
3	1408 Management Improvements	50,090.00	34,310.00	24,909.41	24,909.41	
4	1410 Administration	39,255.00	39,255.00	39,255.00	29,351.88	
5	1411 Audit					
6	1415 liquidated Damages					
7	1430 Fees and Costs	6,000.00	14,946.00	14,946.00	13,696.00	
8	1440 Site Acquisition					
9	1450 Site Improvement	-0-	17,572.00	-0-	-0-	
10	1460 Dwelling Structures	173,695.00	154,012.00	148,340.24	110,113.39	
11	1465.1 Dwelling Equipment—Nonexpendable	12,440.00	14,785.00	12,045.00	12,045.00	
12	1470 Nondwelling Structures	-0-	6,600.00	6,600.00	6,600.00	
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)	281,480.00	281,480.00	245,845.65	196,715.68	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Compliance					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of the County of Little River, Arkansas	Grant Type and Number Capital Fund Program: AR37P02050101 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 07/2001	
<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: 12/31/2002 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the County of Little River, AR			Grant Type and Number Capital Fund Program #: AR37P02050101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 07/2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Mgmt. Improvements	1408		50,090.00	34,309.41			
	A) Tenant Service Vehicle					24,425.00	24,425.00	Complete
	B) Weedeaters, leaf blowers					484.41	484.41	Planning
	C) Pressure Washer/sewer machine					-0-	-0-	Planning
	D) Chain Saw					-0-	-0-	Planning
PHA WIDE	Administration	1410						
	A) Technical Salaries	1410.02		29,172.00	28,449.00	28,449.00	21,171.00	On-going
	B) Benefits	1410.09		8,483.00	8,802.00	8,802.00	6,399.56	On-going
	C) Travel Expense	1410.10		1,100.00	1,209.00	1,209.00	986.12	On-going
	D) Sundry; Advertising	1410.19		500.00	795.00	795.00	795.20	On-going
PHA WIDE	Fees & Costs	1430						
	A & E Fees			6,000.00	14,696.00	13,696.00	13,696.00	On-going
AR 20-1	Site Improvements	1450		-0-	17,572.00	-0-	-0-	Planning
	A) Street Pavement			-0-	9,000.00	-0-	-0-	Planning
	B) Benches, site furniture (etc)			-0-	5,572.00	-0-	-0-	Planning
	C) Brick Entry Sign			-0-	3,000.00	-0-	-0-	Planning

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the County of Little River, AR		Grant Type and Number Capital Fund Program #: AR37P02050101 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 07/2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
AR 20-1	DWELLING STRUCTURES	1460						
	Air Conditioning-Family Units		30	48,800.00	33,743.22	33,743.22	33,743.22	Completed
AR 20-2	DWELLING STRUCTURES	1460						Completed
	Air Conditioning – Family units		10	12,400.00	7,651.00	7,651.00	7,650.84	Completed
AR 20-3	DWELLING STRUCTURES	1460		55,995.00	52,449.00	45,595.00	19,011.85	On-going
	A) Lav Faucets, cut-off valves, etc		11	2,475.00	2,475.00	2,475.00		Force acct
	B) Washer Connect valves & boxes		12	1,620.00	1,620.00	1,620.00		Force Acct
	C) Kitchen Cabinets, faucets, ventahood		11	38,500.00	38,500.00	38,500.00		Force Acct
	D) Replace bi-fold closet doors		11	3,000.00	3,000.00	3,000.00		Force Acct
	E) Replace Carpet		6	10,400.00	6,854.00	-0-	-0-	Planning
AR 20-4	DWELLING STRUCTURES	1460						
	A) Replace Carpet – Elderly Units		4	-0-	3546.00	3546.24	3546.24	Completed
AR 20-4	NON-DWELLING STRUCTURE/Ashdown Shop	1470	1	-0-	1,475.00	1,475.00	1,475.00	Completed
AR 20-3	NON-DWELLING STRUCTURE/Foreman Office	1470	1	-0-	3,325.00	3,325.00	3,325.00	Completed
AR 20-1	NON-DWELLING STRUCTURE/Ashdown Office	1470	1	-0-	1,800.00	1,800.00	1,800.00	Completed

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

PHA Name: Housing Authority of the County of Little River, AR		Grant Type and Number Capital Fund Program #: AR37P02050101 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 07/2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
AR 20-5	DWELLING STRUCTURES	1460						
	Air conditioning – Family Units		24	43,100.00	44,085.00	44,085.00	44,085.28	Completed
AR 20-6	DWELLING STRUCTURES	1460						
	Air Conditioning – Family Units		8	13,400	12,538.00	12,538.00	12,537.76	Completed
	TOTAL DWELLING STRUCTURES			173,695.00	154,012	147,158.24	110,113.39	
PHA WIDE	NON-DWELLING EQUIPMENT	1465.1		12,440.00	14,785.00	12,045.00	12,045.00	
	A) Refrigerators @ 325.		25	8,125.00	11,915.00	9,995.00	9,995.00	On-going
	B) Ranges @ 205.50		19	4,315.00	2,870.00	2,050.00	2,050.00	On-going

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of the County of Little River, AR			Grant Type and Number Capital Fund Program #: AR37P02050101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 07/2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
AR 20-1	06/30/2003			06/30/2005			
AR 20-2	06/30/2003			06/30/2005			
AR 20-3	06/30/2003			06/30/2005			
AR 20-4	06/30/2003			06/30/2005			
AR 20-5	06/30/2003			06/30/2005			
AR 20-6	06/30/2003			06/30/2005			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of the County of Little River, Arkansas		Grant Type and Number Capital Fund Program: AR37P02050102 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 07/2002
<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: 12/31/2002 <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	10,060.00	-0-		
3	1408 Management Improvements	30,000.00	30,000.00	6,674.39	6,674.39
4	1410 Administration	41,220.00	41,220.00	41,220.00	198.23
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	-0-	10,060.00	-0-	-0-
8	1440 Site Acquisition				
9	1450 Site Improvement	16,500.00	16,500.00	-0-	-0-
10	1460 Dwelling Structures	169,645.00	169,645.00	-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	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	267,425.00	267,425.00	47,894.39	6,872.62
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: Housing Authority of the County of Little River, Arkansas		Grant Type and Number Capital Fund Program: AR37P02050102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 07/2002
<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: 12/31/2002 <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the County of Little River, AR			Grant Type and Number Capital Fund Program #: AR37P02050102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 07/2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Operations	1406		10,060.00	-0-	-0-	-0-	Revised
PHA WIDE	Management Improvements	1408		30,000.00	30,000.00	6,674.39	6,674.39	On-going
PHA WIDE	ADMINISTRATION	1410		41,220.00	41,220.00	41,220.00		
	A) Salary – CFP Coordinator	1410.02		30,632.00		30,632.00	-0-	On-going
	B) Benefits	1410.09		9,331.00		9,331.00	-0-	On-going
	C) Travel/Training	1410.10		757.00		757.00	198.23	On-going
	D) Sundry/Advertising	1410.19		500.00		500.00	-0-	On-going
PHA WIDE	FEES & COST	1430						
	Architect & Engineer Fees			-0-	10,060.00	-0-	-0-	On-going
	SITE IMPROVEMENTS	1450		16,500.00	16,500.00	-0-	-0-	
AR 20-4	Paint Metal Fencing			4,500.00	4,500.00	-0-	-0-	Planning
AR 20-5	Paint Metal Fencing			12,000.00	12,000.00	-0-	-0-	Planning
	DWELLING STRUCTURES	1460						
AR 20-1	Rain Gutters		30	21,000.00		-0-	-0-	Planning
AR 20-2	Rain Gutters		12	8,400.00		-0-	-0-	Planning
AR 20-3	Rain Gutters		12	8,400.00		-0-	-0-	Planning

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the County of Little River, AR			Grant Type and Number Capital Fund Program #: AR37P02050102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 07/2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
AR 20-4	Rain Gutters, carpet, remodel kitchen & bath, closet doors, washer valves		24	131,845.00		-0-	-0-	Planning

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of the County of Little River, AR			Grant Type and Number Capital Fund Program #: AR37P02050102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 07/2002	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
AR 20-1	06/17/2004			06/17/2006			
AR 20-2	06/17/2004			06/17/2006			
AR 20-3	06/17/2004			06/17/2006			
AR 20-4	06/17/2004			06/17/2006			
AR 20-5	06/17/2004			06/17/2006			
AR 20-6	06/17/2004			06/17/2006			

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Housing Authority of the County of Little River, Arkansas		Grant Type and Number Capital Fund Program: AR37P02050103 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 07/2003	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<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	13,000.00				
3	1408 Management Improvements	26,000.00				
4	1410 Administration	45,515.00				
5	1411 Audit					
6	1415 liquidated Damages					
7	1430 Fees and Costs	6,680.00				
8	1440 Site Acquisition					
9	1450 Site Improvement	12,000.00				
10	1460 Dwelling Structures	160,230.00				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures	4,000.00				
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)	267,425.00				
21	Amount of line 20 Related to LBP Activities					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: Housing Authority of the County of Little River, Arkansas		Grant Type and Number Capital Fund Program: AR37P02050103 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 07/2003
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the County of Little River, AR			Grant Type and Number Capital Fund Program #: AR37P02050103 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 07/2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Operations	1406		13,000.00				
PHA WIDE	Management Improvements	1408						
	Shop Additions			26,000.00				Planning
PHA WIDE	Administration	1410		45,515.00				
	A) Tech Salary – CFP Coordinator	1410.02		32,165.00				On-going
	B) Benefits	1410.09		10,350.00				On-going
	C) Travel/Training	1410.10		2,000.00				On-going
	D) Sundry/Advertising	1410.19		1,000.00				On-going
PHA WIDE	Fees & Costs	1430		6,680.00				Planning
PHA WIDE	SITE IMPROVEMENTS	1450						
	Entry Signs and benches for all sites, dirt to fill holes, sidewalk edging, etc.			12,000.00				Planning
20-1	DWELLING STRUCTURES	1460						
	A) Redesign Rooflines for curb appeal		12	100,000.00				
	B) Security Locks – Front & Back		30	5,550.00				
20-2	Security Locks – Front & Back		12	2,220.00				

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

PHA Name: Housing Authority of the County of Little River, AR		Grant Type and Number Capital Fund Program #: AR37P02050103 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 07/2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
20-3	Security Locks – Front & Back	1460	12	2,220.00				
20-4	A) Security Locks – Front & Back		24	4,440.00				Planning
	B) Replace Mini-Blinds		22	3,600.00				Planning
20-5	A) Security Locks – Front & Back		50	9,250.00				Planning
	B) Replace Kitchen & Bath Faucets, Ventahood, ceiling fans		50	29,250.00				Planning
20-6	Security Locks		20	3,700.00				Planning
	Non-Dwelling Structures	1470	2	4,000.00				
AR 20-1	Re-Carpet Office/Ashdown			2,000.00				Planning
AR 20-3	Re-Carpet Office/Foreman			2,000.00				Planning

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of the County of Little River, AR			Grant Type and Number Capital Fund Program #: AR37P02050103 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 07/2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
AR 20-1	07/01/2005						
AR 20-2	07/01/2005						
AR 20-3	07/01/2005						
AR 20-4	07/01/2005						
AR 20-5	07/01/2005						
AR 20-6	07/01/2005						

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 type="checkbox"/> Original statement <input checked="" type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
AR 20-1 through AR 20-6	PHA Wide – Housing Authority of the County of Little River, Arkansas	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
20-5 Remodel Kitchen & bath, replace floor tile, carpet for elderly (40 remaining units)	154,115	7/2004
20-1 Federal St. Improvement redesign (8 remaining units)	70,000	7/2004
20-5 Rain gutters	25,000	7/2004
20-1 thru 20-6 Re-roof storage buildings	40,000	7/2004
20-6 Remodel kitchen & bath, replace floor tile, carpet for elderly	95,400	7/2005
20-1 Federal Street 12x12 Storage Building	24,000	7/2005
PHA Wide – Gator 4x4 w/utility trailer/18 ft. lowboy trailer	9,000	7/2005
PHA Wide – Security Door Screens (front & back) 148 units @ 400 ea	59,200	7/2006
PHA Wide – Replace maintenance two-way radios	10,000	7/2006
PHA Wide – Replace 1996 Maintenance Truck	22,000	7/2006
PHA Wide – Replace 1995 Tenant Service Van	30,000	7/2007
PHA Wide – Ranges & Refrigerator	24,000	7/2007
PHA Wide – Hot water heaters	6,500	7/2007
PHA Wide – Replace riding lawn mower – Foreman	3,000	7/2007
20-2 Re-roof 12 units (15 years old)	20,000	7/2007
	592,215	

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 \$ _____

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
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

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	PHEDE P 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	PHEDEP 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	PHEDEP 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	PHEDEP 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	PHDEP 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	PHDEP 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	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment D: 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:

Anita Bentz

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

Elected

Appointed

C. The term of appointment is (include the date term expires): 10/01/2004

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):

Required Attachment ___E___: 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.)

Ashdown Resident Advisory Board

James Hersom
Zaddie Threadgill
Joycene Williams

Foreman Resident Advisory Board

Mary Harris
Gerald Pond
Lina Wilson

Required Attachment ___F___: Comments of the Resident Advisory Board or Boards

On Friday, September 13, 2002, the Resident Advisory Board and staff members met to plan for items needed from the next Capital Fund Grant. The Advisory Board listed the following items as needs:

1. Sitting benches for all areas.
2. Play equipment for children.
3. More security in 20-1 areas.
4. Street repairs and improve drainage after heavy rain.

The Board also commented they could see improvements being made and they appreciate the work. All items listed were addressed either in this plan update or by housing staff.