

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 PLAN TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTION
NOTICES**

SLOCATED IN APPLICABLE PIH

**PHA Plan
Agency Identification**

PHAName: Housing Authority of Arkansas County

PHANumber: AR058

PHAFiscalYearBeginning:04 -01-03

PHA Plan Contact Information:

Name: Alice M. Perritt

Phone: 870 -548-2643

TDD:

Email (if available): haoac@futura.net

Public Access to Information

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

Main administrative office of the PHA

PHA development management offices

Display Locations For PHA Plans and Supporting Documents

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

- X 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)

- X 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 X

Annual PHA Plan

Fiscal Year 20

[24CFR 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 filename in parentheses in the space to the right of the title.

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| Other (List below, providing each attachment name) Performance & Evaluation Report | | |

ii. Executive Summary

[24CFR Part 903.79(r)]

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

We plan to continue to provide a safe environment for the residents. Units that are easy to maintain. We will provide housing without any regard to race or creed. We are a small housing project and will continue to be involved with residents as friends and neighbors.

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.

As the need arises, we plan to redo the vacant units. To put in new

floors, replace water heaters, refrigerators or stoves, or

heating units as needed and any other emergency that may arise. Update by _____ - laws, personnel policy, disposition policy,

capitalization policy, collection loss/charge -off policy, investment policy, admission and related policies, and lease.

2. Capital Improvement Needs

[24CFR Part 903.79(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? \$ 22,526.00 _____

C. X/Yes/No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component no, skip to next component.

7. If

D. Capital Fund Program Grant Submissions

(1)CapitalFundProgram5 -YearActionPlan

TheCapitalFundProgram5 -YearActionPlanisprovidedasAttachment

(2)CapitalFundProgramAnnualStatement

TheCapitalFundProgramAnnualStatementisprovidedasAttachment

3.DemolitionandDisposition

[24CFRPart903.79(h)]

Applicability:Section8onlyPHAsarentrequiredto completethissection.

1. YesNo:X Does the PHA planto conduct anyd emolitionordispositionactivities(pursuanttosection18oftheU.S.HousingActof1937 (42U.S.C.1437p))intheplanFiscalYear?(If“No”,skiptonextcomponent;if“yes”,completeoneactivitydescriptionfor eachdevelopment.)

2.ActivityDescription

Demolition/DispositionActivityDescription(NotincludingActivitiesAssociatedwithHOPEVIorConversionActivities)

1a.Developmentname:

1b.Development(project)number:

2.Activitytype:DemolitionDisposition

3.Applicationstatus(selectone)ApprovedSubmitted,pendingapprovalPlannedapplication

4.Dateapplicationapproved,submitted,orplannedforsubmission: (DD/MM/YY)

5.Numberofunitsaffected:

6.Coverageofaction(selectone)PartofthedevelopmentTotaldevelopment

7.Relocationresources(selectallthatapply)Section8forunitsPublichousingforunitsPreferenceforadmissiontootherpublichousing orsection8Otherhousingforunits(describellow)

8. Timelineforactivity :

a. Actualorprojectedstartdateofactivity:

b. Actualorprojectedstartdateofrelocationactivities:c.Projectendeddateofactivity:

4. Voucher Homeownership Program

[24CFRPart903.79(k)]

A. YesNo:N/A 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 24CFR 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

[24CFRPart903.7(m)]

Exemptions Section 8 Only PHA may skip to the next component PHA eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirement prior to receipt of PHDEP funds.

. YesNoX: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? We do not have a lot of crime in our area

B. What is the amount of the PHA’s estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____ N/A _____

C. YesNoX 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. YesNo: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24CFR Part 903.79(r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. Yes/No: X 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 (Filename)

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

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 ____.

Other: (list below) We invite comments but most of our residents are happy

We are small enough that they fill free to call. We answer any problem immediately.

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: TARC (Memphis)

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)

- X 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.

- X 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)

.PHA Requests for support from the Consolidated Plan Agency

Yes No: X 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 PHA will continue to provide decent, safe housing for the low income in our community. We will provide the residents with any changes that are being considered in the policies.

B. Significant Amendment or Modification to the Annual Plan:

any significant changes in our policies concerning our mission, our goals and any demolition or disposition will require a public process before amending said changes.

Attachment A
Supporting Documents Available for Review

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

| List of Supporting Documents Available for Review | | |
|--|--|--|
| Applicable & On Display | Supporting Document | Related Plan Component |
| | Section 8 Administrative Plan | Annual Plan: Eligibility, Section, and Admissions Policies |
| X | Public housing rent determination policies, including the method for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A&O Policy | Annual Plan: Rent Determination |
| | Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy | Annual Plan: Rent Determination |
| | Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan | Annual Plan: Rent Determination |
| X | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation) | Annual Plan: Operations and Maintenance |
| X | Results of latest binding Public Housing Assessment System (PHAS) Assessment | Annual Plan: Management and Operations |
| | Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary) | Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency |
| | Results of latest Section 8 Management Assessment System (SEMAP) | Annual Plan: Management and Operations |
| | Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan | Annual Plan: Operations and Maintenance |
| X | Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy | Annual Plan: Grievance Procedures |

List of Supporting Documents Available for Review

| Applicable & On Display | Supporting Document | Related Plan Component |
|------------------------------------|--|---|
| | 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 |
| X | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants | Annual Plan: Capital Needs |
| | Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI revitalization plans, or any other approved proposal for development of public housing | Annual Plan: Capital Needs |
| X | Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 -52 (HA). | Annual Plan: Capital Needs |
| | Approved or submitted applications for demolition and/or disposition of public housing | Annual Plan: Demolition and Disposition |
| | Approved or submitted applications for designation of public housing (Designated Housing Plans) | Annual Plan: Designation of Public Housing |
| | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937 | Annual Plan: Conversion of Public Housing |
| | Approved or submitted public housing home ownership programs/plans | Annual Plan: Homeownership |
| | Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan) | Annual Plan: Homeownership |
| | Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies | Annual Plan: Community Service & Self-Sufficiency |
| | FSS Action Plan/s for public housing and/or Section 8 | Annual Plan: Community Service & Self-Sufficiency |

List of Supporting Documents Available for Review

| Applicable & On Display | Supporting Document | Related Plan Component |
|------------------------------------|--|---|
| | 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 |
| X | 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 |
| | 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 |

| List of Supporting Documents Available for Review | | |
|--|--|-------------------------------|
| Applicable & On Display | Supporting Document | Related Plan Component |
| | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) |

ATTACHMENT B

| Annual Statement/Performance and Evaluation Report | | | | | | |
|--|---|---|-----------|-------------------|------------------------------|--|
| Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary | | | | | | |
| PHAN ame: AR COUNTY HA | | Grant Type and Number Capital Fund Program Grant No: AR37P05850100 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2000 | |
| <input 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 | | | | | |
| 3 | 1408 Management Improvements Soft Costs | | | | | |
| | Management Improvements Hard Costs | | | | | |
| 4 | 1410 Administration | 2,000 | 453.27 | 453.27 | 453.27 | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | | | | | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | | 2,483 | 2483 | 2483 | |
| 10 | 1460 Dwelling Structures | 22,000 | 11,495.55 | 11,495.55 | 11,495.55 | |
| 11 | 1465.1 Dwelling Equipment — Nonexpendable | 5,933 | 10,578.46 | 10,578.46 | 10,578.46 | |
| 12 | 1470 Nondwelling Structures | | | | | |
| 13 | 1475 Nondwelling Equipment | | 4,918.22 | 4,918.22 | 4918.22 | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1490 Replacement Reserve | | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | | |
| 17 | 1495.1 Relocation Costs | | | | | |
| 18 | 1499 Development Activities | | | | | |
| 19 | 1502 Contingency | | | | | |
| | | | | | | |
| | Amount of Annual Grant: (sum of lines 2 -19.....) | 29,933 | 29,933 | 29,928.50 | 29243.46 | |
| | Amount of line XX Related to LBP Activities | | | | | |
| | Amount of line XX Related to Section 504 compliance | | | | | |
| | Amount of line XX Related to Security — Soft Costs | | | | | |

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

| | | |
|----------------------|---|------------------------------|
| PHANa me: ARCOUNTYHA | Grant Type and Number Capital Fund Program Grant No: AR37P05850100 Replacement Housing Factor Grant No: | Federal FY of Grant: 2000 |
|----------------------|---|------------------------------|

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|--|-------------------|--|
| | Amount of Line XX related to Security --Hard Costs | | | | |
| | Amount of line XX Related to Energy Conservation Measures | | | | |
| | Collateralization Expenses or Debt Service | | | | |
| | | | | | |

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

| PHAName: ARCOUNTYHA | | Grant Type and Number Capital Fund Program Grant No: AR037P05850100 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2000 | | |
|--|---|--|----------|----------------------|---------|---------------------------|----------------|-------------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| AR058 | Supplies, training L.R. | 1410 | | | | | | |
| | salary | | | | | 453.27 | 453.27 | complete |
| | Landscaping | 1450 | | | | 2,483.00 | 2,483.00 | complete |
| | (Flooring, Painting, etc, refinish cabinets) | 1460 | | | | 11,495.55 | 11,495.55 | complete |
| | Heating, refrigerator Ranges, water heaters | 1465.1 | | | | 10,578.46 | 10,578.46 | complete |
| | Tools, roller, chainsaw riding mower | 1475 | | | | 4,918.22 | 4,918.22 | complete |
| | Heating units | | | | 5933 | | | |
| | Facia Boards | | | | 4000 | | | |
| | Remodel units as they become empty | | | | 14000 | | | |
| | Administration | | | | 2000 | | | |
| | Reserves for utilities | | | | 4000 | | | |
| | | | | | | | | |
| | | | | | | | | |

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

| | | |
|---------------------|--|------------------------------|
| PHAName: ARCOUNTYHA | Grant Type and Number Capital Fund Program Grant No: AR037P05850101 Replacement Housing Factor Grant No: | Federal FY of Grant: 2001 |
|---------------------|--|------------------------------|

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|--|----------------------|---------|-------------------|-----------|
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 4,000 | | 4,000 | 4,000 |
| 3 | 1408 Management Improvements Soft Costs | | | | |
| | Management Improvements Hard Costs | | | | |
| 4 | 1410 Administration | | | 1,013.49 | 1,013.49 |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 20,000 | | 9,817.48 | 9,817.48 |
| 11 | 1465.1 Dwelling Equipment — Nonexpendable | 2,000 | | 7,869.39 | 7,869.39 |
| 12 | 1470 Nondwelling Structures | 500 | | 7,571.73 | 7,571.73 |
| 13 | 1475 Nondwelling Equipment | 3,539 | | 0 | 0 |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1499 Development Activities | | | | |
| 19 | 1502 Contingency | 500 | | 0 | 0 |
| | Amount of Annual Grant: (sum of lines 2 - 19.....) | 30,539 | | 30,272.09 | 30,272.09 |

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

| | | |
|---------------------|--|------------------------------|
| PHAName: ARCOUNTYHA | Grant Type and Number Capital Fund Program Grant No: AR037P05850101 Replacement Housing Factor Grant No: | Federal FY of Grant: 2001 |
|---------------------|--|------------------------------|

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|--|-------------------|--|
| | Amount of line XX related to LBP Activities | | | | |
| | Amount of line XX related to Section 504 compliance | | | | |
| | Amount of line XX related to Security --Soft Costs | | | | |
| | Amount of line XX related to Security --Hard Costs | | | | |
| | Amount of line XX related to Energy Conservation Measures | | | | |
| | Collateralization Expenses or Debt Service | | | | |
| | | | | | |

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

| PHAName: ARCOUNTYHA | | Grant Type and Number Capital Fund Program Grant No: AR037P05850101 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2001 | | | |
|--|---|--|----------|----------------------|----------|---------------------------|----------------|----------------|--|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work | |
| | | | | Original | Revised | Funds Obligated | Funds Expended | | |
| PHAWIDE | Operating reserves for higher utilities | 1406 | | 4000 | | | 4,000 | Complete | |
| | Administration | 1408 | | 0 | 1013.49 | 1,013.49 | 1,013.49 | Complete | |
| | Replace Storm Doors | 1460 | | 3000 | 1,000.00 | 1000 | 1000 | Complete | |
| | Replace Stoves | 1465.1 | | 2000 | | 2000 | 2000 | Complete | |
| | Remodeled vacant units | 1460 | | | 8,817.00 | 8,817.48 | 8,817.48 | Complete | |
| | Wall heaters, refrigerators, vent hoods | 1465.1 | | 0 | 5,869.39 | 5,869.39 | 5,86.39 | Complete | |
| | Contingency | 1502 | | | | | | | |
| | Basketball courts | 1470 | | | 7,571.73 | 7,571.73 | 7,571.73 | Complete | |
| | Paint outside of units | | | 3000 | | | | | |
| | Storage shed | 1460 | | 14000 | | | | | |
| | Install window air conditioners | | | 500 | | | | | |
| | Contingency | | | 500 | | | | | |
| | Purchaser riding lawn mower, weedeater | | | 3539 | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

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

| | | |
|----------------------------|--|-------------------------------------|
| PHAName: ARCOUNTYHA | Grant Type and Number Capital Fund Program Grant No: AR037P058501102 Replacement Housing Factor Grant No: | Federal FY of Grant: 2002 |
|----------------------------|--|-------------------------------------|

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|---------|-------------------|----------|
| | | Original | Revised | Obligated | Expended |
| 1 | Total Non -CFP Funds | | | | |
| 2 | 1406 Operations | | | | |
| 3 | 1408 Management Improvements | 2,000 | 2,000 | | |
| 4 | 1410 Administration | 2,000 | 2,000 | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 4,000 | 0 | | |
| 10 | 1460 Dwelling Structures | 9,000 | 18,000 | | |
| 11 | 1465.1 Dwelling Equipment — Nonexpendable | 5,000 | 0 | | |
| 12 | 1470 Nondwelling Structures | 3,000 | 6,000 | | |
| 13 | 1475 Nondwelling Equipment | 3,000 | 0 | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1499 Development Activities | | | | |
| 19 | 1502 Contingency | 1,015 | 1,015 | | |
| | | | | | |
| | Amount of Annual Grant: (sum of lines...2 -19..) | 29,015 | 29,015 | | |
| | Amount of line XX Related to LBP Activities | | | | |
| | Amount of line XX 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

| | | |
|---------------------|---|------------------------------|
| PHAName: ARCOUNTYHA | Grant Type and Number Capital Fund Program Grant No: AR037P058501102 Replacement Housing Factor Grant No: | Federal FY of Grant: 2002 |
|---------------------|---|------------------------------|

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|--|-------------------|--|
| | Amount of line XX related to Security --Soft Costs | | | | |
| | Amount of Line XX related to Security --Hard Costs | | | | |
| | Amount of line XX related to Energy Conservation Measures | | | | |
| | Collateralization Expenses or Debt Service | | | | |
| | | | | | |

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

| | | |
|----------------------------|---|-------------------------------------|
| PHAName: ARCOUNTYHA | Grant Type and Number Capital Fund Program Grant No: AR037P05850103 Replacement Housing Factor Grant No: | Federal FY of Grant: 2003 |
|----------------------------|---|-------------------------------------|

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|---------|-------------------|----------|
| | | Original | Revised | Obligated | Expended |
| 1 | Total Non -CFP Funds | | | | |
| 2 | 1406 Operations | 4,500 | | | |
| 3 | 1408 Management Improvements Soft Costs | 2,250 | | | |
| | Management Improvements Hard Costs | 2,250 | | | |
| 4 | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 8,276 | | | |
| 11 | 1465.1 Dwelling Equipment — Nonexpendable | | | | |
| 12 | 1470 Non Dwelling Structures | | | | |
| 13 | 1475 Non Dwelling Equipment (computer, fax, copier) | 3,000 | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1499 Development Activities | | | | |
| 19 | 1502 Contingency | | | | |
| | Amount of Annual Grant: (sum of lines.....) | 22,526 | | | |
| | Amount of line XX 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

| | | |
|---------------------|--|------------------------------|
| PHAName: ARCOUNTYHA | Grant Type and Number Capital Fund Program Grant No: AR037P05850103 Replacement Housing Factor Grant No: | Federal FY of Grant: 2003 |
|---------------------|--|------------------------------|

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|--|-------------------|--|
| | Amount of line XX Related to Section 504 compliance | | | | |
| | Amount of line XX Related to Security --Soft Costs | | | | |
| | Amount of Line XX Related to Security --Hard Costs | | | | |
| | Amount of line XX Related to Energy Conservation Measures | | | | |
| | Collateralization Expenses or Debt Service | | | | |
| | | | | | |

Capital Fund Program 5 - Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA development 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.

| CFP5 - Year Action Plan | | |
|--|---|-------------------------------------|
| <input type="checkbox"/> Original statement <input type="checkbox"/> Revised statement | | |
| Development Number | Development Name (or indicate PHA wide) | |
| AR058 | ARKANSAS COUNTY | |
| Description of Needed Physical Improvement or Management Improvements | Estimated Cost | Planned Start Date (HA Fiscal Year) |
| Facia Boards Replaced with Vinyl Siding | 2000 | 2003 |
| Repaint & Repair each unit as they become vacant | 60000 | 2003 |
| Reserve added to New Water Heaters | 3000 | 2004 |
| Ranges & Refrigerators | 3000 | 2004 |
| Storage Shed Repairs | 3000 | 2005 |
| Site Improvements | 5000 | 2005 |
| Management Improvements | 2000 | 2003 |
| Roofs, Heat & Air Units | 40000 | 2006 |
| Operations | 10000 | |

Required Attachment __D__: Resident Member on the PHA Governing Board

1. Yes X 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: Tammy Ackeles

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

C. The term of appointment is (include the date term expires): 3/31/04

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: 3/31/04

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position: Johnny Holzhauer - Chairman
W.W. Lowe - Co - Chairman, Gene Fletcher - Commissioner,
D.A. Richter - Commissioner, W.T. Wallace - Commissioner

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.)

Charles Silsbee