

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 Small PHA) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan
Agency Identification**

PHA Name: RUSSELLVILLE HOUSING AUTHORITY

PHA Number: AR066

PHA Fiscal Year Beginning: (mm/yyyy) 07/2003

PHA Plan Contact Information:

Name: **GARRY L. LEE, EXECUTIVE DIRECTOR**

Phone: **(479) 968-5440**

TDD: **(479) 968-5441**

Email (if available): **housing@ipa.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)

- 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:

X Public Housing and Section 8 Section 8 Only Public Housing Only

**Annual PHA Plan
Fiscal Year 20 03**

[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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Annual Plan

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- ii. Annual Plan Information
- iii. Table of Contents
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 - 2. Capital Improvement Needs
 - 3. Demolition and Disposition
 - 4. Homeownership: Voucher Homeownership Program
 - 5. Crime and Safety: PHDEP Plan
 - 6. Other Information:
 - A. Resident Advisory Board Consultation Process
 - B. Statement of Consistency with Consolidated Plan
 - C. Criteria for Substantial Deviations and Significant Amendments

Attachments

- Attachment **A** : Supporting Documents Available for Review
- Attachment **B** : Capital Fund Program Annual Statement
- Attachment **C**: Capital Fund Program 5 Year Action Plan
- Attachment **__**: Capital Fund Program Replacement Housing Factor Annual Statement
- Attachment **__**: Public Housing Drug Elimination Program (PHDEP) Plan
- Attachment **D**: Resident Membership on PHA Board or Governing Body
- Attachment **E**: Membership of Resident Advisory Board or Boards
- Attachment **F**: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)
- 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

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.

NO CHANGES

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. **X** 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? \$ **300,086.00**

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 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 **YES**

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment **YES**

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 **X** 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? \$
_____ N/A _____
- 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

- Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
- If yes, the comments are Attached at Attachment (File name)
- 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 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: (provide name here) **STATE OF ARKANSAS CONSOLIDATE 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)

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)

The Consolidated Plan is committed to placing a high priority on serving extremely low-income renters and renters with more than 50% housing burden.

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:

SEE ATTACHMENT "G"

B. Significant Amendment or Modification to the Annual Plan:

SEE ATTACHMENT "G"

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 X 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 X 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 X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
X	Section 8 rent determination (payment standard) policies X 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
X	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 X check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures X check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures X 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
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
N/A	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

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
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
N/A	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) X 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
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: RUSSELLVILLE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: AR37P06650100 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Performance and Evaluation Report for Period Ending: Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
XX 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				
4	1410 Administration	19,940	16,379	16,379	16,379
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	16,732	16,732	16,732	16,732
8	1440 Site Acquisition				
9	1450 Site Improvement	46,233	46,233	46,233	46,233
10	1460 Dwelling Structures	181,146	184,922	184,922	184,922
11	1465.1 Dwelling Equipment—Nonexpendable	45,169	44,954	44,954	44,954
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)	309,220	309,220	309,220	309,220
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				

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: RUSSELLVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program: AR37P06650100 Capital Fund Program 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 checked="" type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
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:		Grant Type and Number				Federal FY of Grant:		
RUSSELLVILLE HOUSING AUTHORITY		Capital Fund Program #: AR37P06650100 Capital Fund Program Replacement Housing Factor #:				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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
AR66 1,2,3,4	ADMINISTRATION & EMP. BENE.	1410		19,940	16,379	16,379	16,379	100%
AR66 1,2,3,4	FEES & INSPECTION COSTS	1430		16,732	16,732	16,732	16,732	100%
AR66 1,2,4	REPLACE SEWER LINES	1450		7,612				
AR66 1,2,3,4	REPLACED DAMAGED CONCRETE	1450		24,983	42,303	42,303	42,303	100%
AR66 1,2,3,4	REMOVED TREES & STUMPS	1450		4,588	3,930	3,930	3,930	100%
AR66 1,2,4	INSTALL CONCRETE PADS	1450		9,050				
AR66 4	PAINTED EXT. OF STRUCTURES	1460		4,680	19,496	19,495	19,495	100%
AR66 1,2,4	REPAIR FASCIA & SOFFITS	1460		18,328				
AR66 1,2,4	REPLACED HVAC SYSTEMS	1460		37,776	88,850	88,850	88,850	100%
AR66 1,2,4	REPLACE ROOFS	1460		29,600				
AR66 2,3,4	REPLACE WINDOWS	1460		7,325				
AR66 3	REPLACED METAL DOORS	1460			21,254	21,254	21,254	100%
AR66 4	REPLACE/REPAIR LANDINGS/STEPS	1460		10,700				
AR66 2,4	REPLACED STEPS & DAMAGED HANDRAILS	1460		16,720	35,212	35,212	35,212	100%
AR66 2,4	REPLACE FLOOR TILE	1460		39,950				
AR66 1,2,4	REPLACE CERAMIC TILE (BATH)	1460		16,067				
AR66 3	REPLACED FIRE ALARM SYSTEM	1460			20,111	20,111	20,111	100%
AR66 1,2,3,4	REPLACED REFRIGERATORS	1465.1		13,540	24,450	24,450	24,450	100%

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

PHA Name: RUSSELLVILLE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: AR37P06650101 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement
 Performance and Evaluation Report for Period Ending: Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
XX 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				
4	1410 Administration	21,934	15,315	15,315	15,315
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	18,405	8,130	8,130	8,130
8	1440 Site Acquisition				
9	1450 Site Improvement	40,892	40,892	40,892	40,892
10	1460 Dwelling Structures	199,260	251,207	251,207	251,207
11	1465.1 Dwelling Equipment—Nonexpendable	35,053			
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)	315,544	315,544	315,544	315,544
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				

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: RUSSELLVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program: AR37P06650101 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2001
<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 checked="" type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
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:		Grant Type and Number				Federal FY of Grant:		
RUSSELLVILLE HOUSING AUTHORITY		Capital Fund Program #: AR37P06650101 Capital Fund Program Replacement Housing Factor #:				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	
AR66 1,2,3,4	ADMINISTRATIVE & EMP. BENE.	1410		21,934	15,315	15,315	15,315	100%
AR66 1,2,3,4	FEES & INSPECTION COSTS	1430		18,405	8,130	8,130	8,130	100%
AR66 2,3,4	REPLACED DAMAGE CONCRETE	1450		40,892	40,892	40,892	40,892	100%
AR66 2,3,4	PAINTED STRUCTURES	1460		10,760	24,246	24,246	24,246	100%
AR66 3	REPLACED ROOF (HIGH-RISE)	1460		49,800	73,006	73,006	73,006	100%
AR66 1	INSTALLED NEW FLOOR TILE	1460			48,435	48,435	48,435	100%
AR66 1	REPLACED HVAC SYSTEMS	1460			43,500	43,500	43,500	100%
AR66 1,4	REPLACE WINDOWS	1450		9,375				
AR66 1,2,4	REPLACE KITCHEN CBINETS	1460		119,325				
AR66 1,2,4	REPLACE BATHTUBS	1460		10,000				
AR66 2,4	REPLACED STEPS, STAIRWAYS & LANDINGS	1460			42,810	42,810	42,810	100%
AR66 3	REPLACED ENTRANCE DOORS (HIGH-RISE)	1460			19,210	19,210	19,210	100%
AR66 1,2,3,4	REPLACE REFRIGERATORS	1465.1		13,300				
AR66 1,2,3,4	REPLACE RANGES	1465.1		12,200				
AR66 1,2,3,4	REPLACE WATER HEATERS	1465.1		9,553				

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

PHA Name: RUSSELLVILLE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: AR37P06650102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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- Original Annual Statement
 Performance and Evaluation Report for Period Ending:
 Reserve for Disasters/ Emergencies XX Revised Annual Statement (revision no: 1)
 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				
4	1410 Administration	19,950	11,492		
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	28,500	27,500		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	71,208	69,208		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	180,886	177,886		
13	1475 Nondwelling Equipment	15,000	14,000		
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)	315,544	300,086		
21	Amount of line 20 Related to LBP Activities	20,000	20,000		
22	Amount of line 20 Related to Section 504 Compliance	13,000	13,000		

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: RUSSELLVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program: AR37P06650102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2002
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies XX Revised Annual Statement (revision no: 1)		
<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
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: RUSSELLVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: AR37P06650102 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
AR066 1,2,3,4	ADMINISTRATIVE & EMP. BENE.	1410		19,950	11,492			
AR066 1,2,3,4	FEES & INSPECTIN COSTS	1430		28,500	27,500			
AR066 3	REPLACE ROOF	1460		33,838	31,838			
AR066 3	PAINT STRUCTURE	1460		37,370	37,370			
AR37P066909								
OFFICE/RES/	PAINT STRUCTURE	1470		33,000	30,000			
COM. CENTER	REPLACE WINDOWS	1470		26,986	26,986			
	REPLACE ROOF	1470		19,200	19,200			
	CLEAN EXTERIOR (BRICK)	1470		6,000	6,000			
	REPLACE DOORS	1470		3,400	3,400			
	ADA BATHROOM	1470		12,000	12,000			
	ADA RAMP	1470		9,000	9,000			
	ADA DOOR	1470		8,000	8,000			
	INSULATION	1470		10,600	10,600			
	REPLACE FLOOR TILE	1470		11,000	11,000			
	REPLACE ESECTRICAL SYSTEM	1470		16,000	16,000			
	PAINT EXTERIOR	1470		25,700	25,700			
	REPLACE HVAC SYSTEM	1475		15,000	14,000			

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

PHA Name: RUSSELLVILLE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: AR37P06650103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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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	
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: RUSSELLVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: AR37P06650103 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 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	
AR66 1,2,3,4	ADMINISTRATIVE & EEMP BEBE.	1410		17,500				
AR66 1,2,3,4	FEES & INSPECTION COSTS	1430		10,500				
AR66 1,2,3,4	REPLACE DAMAGED CONCRETE	1450		5,025				
AR66 2	CONCRETE SWALES FOR DRAINAGE	1450		10,475				
AR66 1,2,3,4	REPLACE KITCHEN CABINETS	1460		59,636				
AR66 1,2,3,4	PAINT EXTERIOR WOOD	1460		19,500				
AR66 2,4	REPLACE BATHTUBS	1460		12,500				
AR66 1,2,3,4	REPLACE EXTERIOR FRONT DOORS	1460		27,450				
AR66 2,4	REPLACE FLOOR TILE	1460		62,500				
AR66 1,2,4	REPLACE ROOFS	1460		30,000				
AR66 1,2,3,4	REPLACE REFRIGERATORS	1465.1		21,100				
AR66 1,2,3,4	REPLACE RANGES	1465.1		15,400				
AR66 3	REPLACE A/C UNITS	1465.1		8,500				

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-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		
X Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
	PHA WIDE	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

AR37PO66001		
1. Repair cracked & broken concrete.	12,310	07/01/2001
2. Replace sewer line clean outs.	3,143	07/01/2001
3. Install concrete pads for trash dumpsters.	4,508	07/01/2002
4. Repair soffits & fascia boards.	21,141	07/01/2001
5. Replace HVAC systems.	19,475	07/01/2002
6. Replace Roofs.	15,456	07/01/2002
7. Replace Windows.	3,058	07/01/2001
8. Replace floor tile.	21,252	07/01/2003
9. Ceramic tile bathrooms.	7,878	07/01/2003
10. Replace ranges & Refrigerators.	10,046	07/01/2001
11. Install new air conditioning units.	12,728	07/01/2002
12. Scrape & paint all exterior wood.	3,091	07/01/2004
13. Repair metal & vinyl siding.	8,091	07/01/2004
14. Administration.	10,046	07/01/2001
15. Fees & Inspection costs.	8,810	07/01/2001
Total estimated cost over next 5 years (AR066001)	161,033	

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-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)	
	PHA WIDE	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

AR37P066002		
1. Repair cracked & broken concrete.	18,466	07/01/2001
2. Repair sewer line clean outs.	4,714	07/01/2001
3. Install concrete pads for trash dumpsters.	12,075	07/01/2001
4. Replace soffits & fascia boards.	25,992	07/01/2001
5. Replace HVAC systems.	52,164	07/01/2002
6. Replace roofs.	23,184	07/01/2002
7. Replace windows.	4,587	07/01/2001
8. Replace steps, stairways & landings.	12,880	07/01/2001
9. Replace floor tile.	31,878	07/01/2003
10. Ceramic tile bathrooms.	11,816	07/01/2003
11. Replace ranges & refrigerators.	15,070	07/01/2004
12. Install new air conditioning units.	19,093	07/01/2002
13. Scrape & paint all exterior wood.	4,563	07/01/2004
14. Repair metal l& vinyl siding.	11,945	07/01/2001
15. Administration	15,070	07/01/2002
16. Fees & Inspection costs.	13,215	07/01/2001
Total estimated cost over next 5 years (AR066002)	276,712	

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-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)	
	PHA WIDE	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

AR37P066003		
1. Repair cracked & broken concrete.	29,018	07/01/2001
2. Replace sewer line clean outs.	7,418	07/01/2001
3. Replace roof.	36,432	07/01/2004
4. Replace floor tile.	50,094	07/01/2004
5. Replace ranges & refrigerators.	23,681	07/01/2004
6. Replace old air conditioning units.	29,355	07/01/2004
7. Install new drapes.	34,700	07/01/2002
8. Replace fire alarm system.	20,000	07/01/2002
9. Administration.	23,681	07/01/2004
10. Fees & Inspection costs.	20,766	07/01/2001
Total estimated cost over next 5 years (AR066003)	275,145	

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-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)	
	PHA WIDE	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

AR37P066004		
1. Repair cracked & broken concrete.	28,138	07/01/2001
2. Replace sewer line clean outs.	7,183	07/01/2001
3. Install concrete pads for trash dumpster	15,617	07/01/2002
4. Repair soffits & fascia boards.	22,180	07/01/2002
5. Replace HVAC systems.	67,465	07/01/2003
6. Replac roofs.	35,328	07/01/2004
7. Replace windows.	6,990	07/01/2003
8. Replace steps, stairways & landings.	11,776	07/01/2001
9. Replace floor tile.	48,576	07/01/2004
10. Ceramic tile bathrooms.	36,574	07/01/2003
11. Replace ranges & refrigerators.	22,963	07/01/2004
12. Install air conditioning.	29,093	07/01/2002
13. Scrape & paint all exterior wood.	7,066	07/01/2003
14. Repair metal l& vinyl siding.	18,495	07/01/2003
15. Administration.	22,963	07/01/2001
16. Fees & Inspection Costs.	20,137	
Total estimated cost over next 5 years (AR066004)	400,544	
PHA WIDE	1,113,434	

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

N/A

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)
N/A		

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).

N/A 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 # N/A	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.

N/A

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: N/A	
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: \$ N/A		
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: \$ N/A		
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: \$ N/A		
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: \$ N/A		
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: \$ N/A		
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.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$ N/A		
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: \$ N/A		
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: \$ N/A		
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.							

9170 - Drug Intervention					Total PHDEP Funding: \$ N/A		
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.							

9180 - Drug Treatment					Total PHDEP Funding: \$ N/A		
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.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
					N/A		
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 __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:

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

Elected

Appointed

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

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

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

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

Other (explain):

B. Date of next term expiration of a governing board member: **03/20/2004**

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

Mr. John L. Mosley, Chairman

Mr. Billy A. Yarbrough, Vice-Chairman

Mr. William F. Smith, Chairman

Mr. Cleo Simmons, Commissioner

Mr. Keith B. Cogswell, III, 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.)

Ms. Bernice Freeman

Ms. Halina Smith

Ms. Barbara Heflin

Ms. Thelma Cross

Ms. Clara Strickland

Members were appointed by Residents. Membership replacement is made by the Resident Advisory Board.