

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

Small PHA Plan Update
Annual Plan for Fiscal Year: **2003**

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

PHA Plan Agency Identification

PHA Name: Housing Authority of Piatt County

PHA Number: IL128

PHA Fiscal Year Beginning: 01/2003

PHA Plan Contact Information:

Name: Patricia Connour

Phone: 217-262-3231

TDD:

Email (if available): hapiatt@atwood-il.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 –Cerro Gordo, Bement, Mansfield & Deland, Illinois
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

PHA Programs Administered:

Public Housing and Section 8 Section 8 Only Public Housing Only

Annual PHA Plan Fiscal Year 2003

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

This annual plan follows through with the goal to maintain and improve the quality of living for our residents within our scattered sites located in Hammond, Cerro Gordo, Bement, Mansfield and Deland. In order to obtain a "0" vacancy it is important to improve the desirability of the units. We believe, with the projects suggested in our Plan, we can obtain that goal.

1. Summary of Policy or Program Changes for the Upcoming Year

In an effort to improve the use of the Capital Fund Program Small PHA Plan Update Page 6 of the annual statement. The Original Plan has proven to

be outdated slightly in its intent. Therefore, financial adjustments of certain line items have been made in an effort to accommodate the current needs of the Authority. Our policies have remained the same in our effort to provide safe, sanitary and affordable housing to those who need it. One policy for acceptance of residents into the Hammond, Illinois Development 002 has been altered. Hammond is a very rural area and it has become increasingly difficult to place the designated elderly and disabled families into those units because of the inconvenience of the village. There are no conveniences of any type in that area. We have exhausted all areas of advertising and means of attracting the designated group. The loss of revenue for that development has been very serious to this Authorities stability. Therefore we are pursuing CFR24 Part 945 Section 303 which allows us to house near elderly and/or other families eligible for units of that size being 1 bedroom units. We have only two units occupied out of 12 units available and we hope to be able to improve our occupancy with this plan.

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? \$105,861.00 (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(il128c01)

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement IL06P12850103 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

<p>Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)</p>

1a. Development name:Housing Authority of Piatt County
1b. Development (project) number: IL128
2. Activity type: Demolition Disposition NA
3. Application status (select one) Approved Submitted, pending approval NA Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one) Part of the development NA Total development
7. Relocation resources (select all that apply) Section 8 for units Public housing for units NA Preference for admission to other public housing or section 8 Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: NA 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):

- NA 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? \$ na
- 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 __NA__

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) NA

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

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 ____NA

Other: (list below) NA

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 Illinois Consolidated Action 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)

1. Affordable Housing Programs

C. Criteria for Substantial Deviation and Significant Amendments

None

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: is defined as discretionary changes in the plans or policies of the Housing Authority of Piatt County that fundamentally change the mission, goals, objectives or plans of the agency and which requires formal approval of the Board of Commissioners.

Attachment A
Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
Yes	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
Na	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
Yes	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
yes	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
yes	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
yes	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
NA	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
NA	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
yes	Public housing rent determination policies, including the method for setting public housing flat rents check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

yes	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
NA	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
yes	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
yes	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
yes	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
NA	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
NA	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
yes	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
NA	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
YES	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
NA	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
YES	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
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	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
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership

NA	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
NA	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
NA	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
NA	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
NA	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
YES	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) check here if included in the public housing A & O Policy	Pet Policy
YES	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
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
Yes	Other supporting documents (optional) (list individually; use as many lines as necessary) Voluntary Conversion Initial Assessment	(Voluntary Conversion)

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program: IL06-P128-501-03 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: FFY 2003
Original Annual Statement		Reserve for Disasters/ Emergencies		Revised Annual Statement	
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	20,000			
3	1408 Management Improvements	4500			
4	1410 Administration	1,200			
5	1411 Audit	1,400			
6	1415 liquidated Damages				
7	1430 Fees and Costs	18,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	46,600			
10	1460 Dwelling Structures	14,000			
11	1465.1 Dwelling Equipment—Nonexpendable	561			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	1000			
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	1,000			
20	Amount of Annual Grant: (sum of lines 2-19)	105,861.			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: IL06-P128-501-03 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FFY 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		21,000				
PHA Wide	Management Improvements	1408		12,000				
	Training							
PHA Wide	Administration	1410		10,500				
	Computer software & hardware, office equipment, personnel labor							
PHA Wide	Audit- services to review costs	1411		1,400				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Fees & Costs- Site Improvements Architect services	1430		600 600 600 600 600				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Site Improvements Concrete replacements, landscape replacements, drive maintenance (Cerro Gordo), ADA improvments	1450		1,000 1,000 1,000 1,000 1,000				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Dwelling Structures- Repair unit noise problem, paint exterior trim Paint exterior trim Paint exterior trim Paint exterior trim Paint exterior trim	1460		9092 9092 9092 9092 9093				

128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Dwelling Equipment- appliances	1465.1		300 300 300 300 300				
PHA Wide	Nondwelling Equipment- vehicle and equipment repair; maint. equipment, computer hardware, office equipment and furniture	1475		5,000				
PHA Wide	Contingency	1502		1,000				
GRAND TOTAL				105,861				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: IL06-P128-501-03 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FFY 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	
IL-128	12-31-04			12-31-06			

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		
Original statement	Revised statement #	
Development Number	Development Name (or indicate PHA wide)	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years		

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 \$ na _____**
- 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	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

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

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

9130 - Employment of Investigators						Total PHDEP Funding: \$	
Goal(s)							
Objectives							

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

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

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

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment 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: NA

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

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

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: May 23, 2003

Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Piatt County Board of Directors

Piatt County Board of Directors.....Robert H. Scheffer, Chairman, , Vice Chairman, Pat Rhoades, Clerk, Gloria Marschik, Secretary, Sharon Lee Martin, Member, K. Max Olson, member, Jean Stoddard, member, Gaila Barcus.

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.)

1. Eugene Johnson
2. Donna Lents
3. Patty Cook
4. Mike Lowenstein

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Piatt County Housing Authority IL 128		Original 5-Year Plan Revision No: 2 August 25, 2002			
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 2005	Work Statement for Year 4 FFY Grant: 2006 PHA FY: 2006	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 2007
	Annual Statement				
128-02 Hammond		46,600	0	18,000	0
128-03 Cerro Gordo		3,000	25,600	5,500	0
128-04 Bement		4,000	35,000	5,500	45,500
128-05 Mansfield		3,000	0	5,500	15,500
128-06 Deland		4,000	0	5,500	0
PHA Wide		45,261	45,261	65,861	45,261
CFP Funds Listed for 5-year planning		\$105,861	\$105,861	\$105,861	\$105,861
Replacement Housing Factor Funds		0	0	0	0

**Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities**

Piatt County Housing Authority IL128

Activities for Year 1	Activities for Year: <u> 2 </u> FFY Grant: 2004 PHA FY: 2004			Activities for Year: <u> 3 </u> FFY Grant: 2005 PHA FY: 2005		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	128-02 Hammond	Site Improvements	18,600	128-03 Cerro Gordo	Replace roofs	25,600
		Repair unit noise problem	25,000			
		Paint exterior trim	3,000	128-04 Bement	Replace roofs	35,000
	Subtotal		46,600			
	128-03 Cerro Gordo	Paint exterior trim	3,000			
	128-04 Bement	Paint exterior trim	4,000			
	128-05 Mansfield	Paint exterior trim	3,000			
	128-06 Deland	Paint exterior trim	4,000			
	PHA-Wide	Operations	20,000	PHA-Wide	Operations	20,000
		Training	2,000		Training	2,000
		Computer Software	500		Computer Software	500
		Administration	1,200		Administration	1,200
		Fees & Costs	18,000		Fees & Costs	18,000
		Computer Hardware	1,500		Computer Hardware	1,500
		Office Equipment	500		Office Equipment	500
		Maintenance Equipment	1,000		Maintenance Equipment	1,000
		Appliances	561		Appliances	561
	Subtotal		45,261	Subtotal		45,261
	Total CFP Estimated Cost		\$105,861			\$105,861

**Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities**

Piatt County Housing Authority IL128

Activities for Year: <u> 4 </u> FFY Grant: 2006 PHA FY: 2006			Activities for Year: <u> 5 </u> FFY Grant: 2007 PHA FY: 2007		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
128-02 Hammond	Replace roofs	18,000	128-04 Bement	Siding Repair/Replacement	45,500

128-03 Cerro Gordo	Site Improvements	5,500	128-05 Mansfield	Siding Repair/Replacement	15,100
128-04 Bement	Site Improvements	5,500			
128-05 Mansfield	Site Improvements	5,500			
128-06 Deland	Site Improvements	5,500			
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PHA-Wide	Operations	20,000	PHA-Wide	Operations	20,000
	Training	2,000		Training	2,000
	Computer Software	500		Computer Software	500
	Administration	1,200		Administration	1,200
	Fees & Costs	18,000		Fees & Costs	18,000
	Computer Hardware	1,500		Computer Hardware	1,500
	Office Equipment	500		Office Equipment	500
	Maintenance Equipment	1,000		Maintenance Equipment	1,000
	Appliances	561		Appliances	561
	Maintenance Vehicle	20,600			
Subtotal		65,861	Subtotal		45,261
Total CFP Estimated Cost		\$105,861			\$105,861

Voluntary Conversion Initial Assessments

- a. **How many of the PHA's developments are subject to the Required Initial Assessments? 4**
- b. **How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? 1**
- c. **How many assessments were conducted for the PHA's covered developments? 4**
- d. **Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:**

Development name _____ none

Number of Units _____ none

- e. **If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: completed**

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06P12850100 Replacement Housing Factor Grant No:			Federal FY of Grant: FFY 2000
Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no)					
X Performance and Evaluation Report for Period Ending: 06/30/2002			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	0			
2	1406 Operations	10,960.00		10,960.00	10,960.00
3	1408 Management Improvements	0			
4	1410 Administration	0			
5	1411 Audit	1100.00		1100.00	1100.00
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	10,000.00		10,000.00	10,000.00
10	1460 Dwelling Structures	70,000.00		34,200.00	34,200.00
11	1465.1 Dwelling Equipment—Nonexpendable	7,000.00		350.00	350.00
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	8,000			8,000.00
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1499 Development Activities	0			
19	1501 Collaterization or Debt Service	0			
20	1502 Contingency	2,632.00		1,934.00	1,934.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	109,692.00			
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 Compliance	0			
24	Amount of line 21 Related to Security – Soft Costs	0			
25	Amount of line 21 Related to Security – Hard Costs	0			

Annual Statement/Performance and Evaluation Report Capital Fund Program (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: IL06-P128-501-00			Federal FY of Grant: FFY 2000			
Development Number	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Work Status
				Original 1-1-2000	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		10,960.		10,960	10,960	
	Management Improvements	1408		0				
	Administration	1410		0				
PHA Wide	Audit - services to review costs	1411		1,100.		1,100.	1,100.	
	Fees & Costs –	1430		0				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement	Site Improvements Mudjacking & Concrete repair	1450		1,500 3,500 5,000		1,500 3,500 5,000	1,500 3,500 5,000	
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Dwelling Structures – HVAC upgrades and replacements, Locks, CO Detectors, Carpet & Tile Installation, Door Replacement	1460		14,000 14,000 14,000 14,000 14,000		7,418 8,509 10,029 4,785 3,459	7,418 8,509 10,029 4,785 3,459	
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Dwelling Equipment – appliances	1465.1		1,400 1,400 1,400 1,400 1,400		350.	350.	
			Pg. 2 of 4					
PHA Wide	Nondwelling Equipment – vehicle & equipment repair; maint. equipment, computer hardware, office equipment & furniture	1475		8,000		8,000.	8,000.	
PHA Wide	Contingency	1502		2,632.		1,934.	1,934.	
	GRAND TOTAL			109,962.		66,544.	66,544.	

PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: IL06-P128-501-00 Replacement Housing Factor #:			Federal FY of Grant: FFY 2000		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IL-128	09-30-02			09-30-04			

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06P12850101 Replacement Housing Factor Grant No:			Federal FY of Grant: FFY 2001
Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no)					
X Performance and Evaluation Report for Period Ending: 06/30/02			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	0			
2	1406 Operations	11,053.00		10,741.00	10,741.00
3	1408 Management Improvements	10,000.00			
4	1410 Administration	10,000.00			
5	1411 Audit	2,500			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	6,000			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	15,000			
10	1460 Dwelling Structures	44,000			
11	1465.1 Dwelling Equipment—Nonexpendable	5,000			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	5,000			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1499 Development Activities	0			
19	1501 Collaterization or Debt Service	0			
20	1502 Contingency	3,300			
21	Amount of Annual Grant: (sum of lines 2 – 20)	111,853.00			
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 Compliance	0			
24	Amount of line 21 Related to Security – Soft Costs	0			
25	Amount of line 21 Related to Security – Hard Costs	0			

Annual Statement/Performance and Evaluation Report Capital Fund Program (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: IL06-P128-501-01			Federal FY of Grant: FFY 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Work Status
				Original 1-1-2001	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		11,053		10,741	10741	
PHA Wide	Management Improvements	1408		10,000				
	Consultant to improve functions of capital fund program							
PHA Wide	Administration	1410		10,000				
PHA Wide	Audit - services to review costs	1411		2,500				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Fees & Costs – Architect services	1430		1,200 1,200 1,200 1,200 1,200				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Site Improvements	1450		5,000 5,000 5,000 5,000 5,000				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Dwelling Structures – HVAC upgrades and replacements	1460		8,800 8,800 8,800 8,800 8,800				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Dwelling Equipment – appliances	1465.1		1,000 1,000 1,000 1,000 1,000				

PHA Wide	Nondwelling Equipment – vehicle & equipment repair; maint. equipment, computer hardware, office equipment & furniture	1475		5,000			
PHA Wide	Contingency	1502		3,300			
	GRAND TOTAL			11,853.00		10,741.00	10741.00

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)							
Part III: Implementation Schedule							
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: IL06-P128-501-01 Replacement Housing Factor #:				Federal FY of Grant: FFY 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IL-128	09-30-03			09-30-05			

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: IL06-P128-501-02 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FFY 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		21,000				
PHA Wide	Management Improvements	1408		12,000				
	Consultant to improve functions of capital fund program							
PHA Wide	Administration	1410		10,500				
PHA Wide	Audit- services to review costs	1411		1,400				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Fees & Costs- Site Improvements Architect services	1430		600 600 600 600 600				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Site Improvements	1450		1,000 1,000 1,000 1,000 1,000				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Dwelling Structures- HVAC upgrades and replacements	1460		9,092 9,092 9,092 9,092 9,093				
128-02 Hammond 128-03 Cerro Gordo 128-04 Bement 128-05 Mansfield 128-06 Deland	Dwelling Equipment- appliances	1465.1		300 300 300 300 300				
PHA Wide	Nondwelling Equipment- vehicle and equipment repair; maint. equipment, computer hardware, office equipment and furniture	1475		5,000				
PHA Wide	Contingency	1502		1000				

	GRAND TOTAL			105,861				
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Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)							
Part III: Implementation Schedule							
PHA Name: PIATT COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: IL06-P128-501-02 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FFY 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	
IL-128	09-30-04			09-30-06			