

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

SmallPHAPlanUpdate
AnnualPlanforFiscalYear:2003

**NOTE:THISPHAPLANSTEMPLATE(HUD-50075SmallPHA)ISTOBECOMPLETEDIN
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

**PHAPlan
AgencyIdentification**

PHAName: FordCountyHousingAuthority

PHANumber: KS165

PHAFiscalYearBeginning:(mm/yyyy) 10/2003

PHA Plan Contact Information:

Name: Renee Scott, Housing Director
Phone: 620-225-8230
TDD: N/A
Email (if available): rdscott@starrtech.net

Public Access to Information

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

- X Main administrative office of the PHA
PHA development management offices

Display Locations For PHA Plans and Supporting Documents

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

- X Main administrative office of the PHA
PHA development management offices
Main administrative office of the local, county or State government
Public library
PHA website
Other (list below)

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

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

PHA Programs Administered :

Public Housing and Section 8 X 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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included in PHA Plan text)
Other (List below, providing each attachment name)

ii. Executive Summary -

[24CFR Part 903.79(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.

There have been no changes in policies or programs in the last year.

2. Capital Improvement Needs

[24CFR Part 903.79(g)]

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

A. Yes/No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ _____

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

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment

3. Demolition and Disposition -

[24CFR Part 903.79(h)]

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

1. Yes/No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition Disposition	
3. Application status (select one) Approved Submitted, pending approval Planned application	
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) Part of the development Total development	
7. Relocation resources (select all that apply) Section 8 for units Public housing for units 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: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

4. Voucher Homeownership Program

[24CFR Part 903.79(k)]

A. Yes/X 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 24CFR part 982? (If "No", skip to next

component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

Establishing a minimum home owner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment 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

[24CFR Part 903.7(m)]

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

A. Yes/No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

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

C. Yes/No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. Yes/No: The PHDEP Plan is attached as Attachment _____

6. Other Information

[24CFR Part 903.79(r)]

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

1. Yes/X/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 (Filename)

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

The PHA changed portions of the PHA Plan in response to comments

A list of these changes is included

Yes No: below or

Yes No: at the end of the RAB Comments in Attachment ____.

Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment ____.

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) The Kansas Department of Commerce and Housing, Kansas Consolidated Plan revised state fiscal years 1999 thru 2003.

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

X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.

X The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

X 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

X 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:

The Ford County Housing Authority provides rental assistance with the Tenant Based Rent Assistance HOME Program, which are two year grant programs. All

fundsthroughthesegrantsaretobecommittedwithinatwoyeartimeframeand expendedbytheendofthreeyears.Theseprogramsarefundedthroughthestate andareadministeredsimilartothetenantbasedSection8program.Atthistime weareadministeringtwoGrants,the2000Grantisfor\$125,000andweareinthe thirdandfinalyearwiththisGrant.Wearealsoadministeringa\$20,000TBRA GrantforRushCountyandthesefundsarecommitted.

4.TheConsolidatedPlanofthejurisdictionssupportsthePHAPlanwiththefollowing actionsandcommitments:(describebelow)None

C.CriteriaforSubstantialDeviationandSignificantAmendments

1. AmendmentandDeviationDefinitions

24CFRPart903.7(r)

PHAsarerequiredtodefineandadopttheirownstandards ofsubstantialdeviationfromthe5-yearPlanand SignificantAmendmenttotheAnnualPlan.The definitionofsignificantamendmentisimportantbecauseit defineswhenthePHAwillsubjectachangetothepoliciesoractivitiesdescribedintheAnnualPlantof full publichearingandHUDreviewbeforeimplementation.

A.SubstantialDeviationfromthe5-yearPlan: Discretionarychangesintheplansof theFordCountyHousingAuthoritythatfundamentallychangethemission,goals,or objectivesoftheagency

B.SignificantAmendmentorModificationtotheAnnualPlan:

DiscretionarychangesintheplansorpoliciesoftheFordCountyHousing Authoritythatrequireformalapprovaloftheboardofcommissioners.

Attachment A

SupportingDocumentsAvailableforReview

PHAsaretointicatewhichdocumentsareavailableforpublicreviewbyplacingamarkinthe “Applicable&OnDisplay” columnintheappropriaterows.Alllisteddocumentsmustbeon displayifapplicabletotheprogramactivitiesconductedbythePHA.

ListofSupportingDocumentsAvailableforReview		
Applicable & OnDisplay	SupportingDocument	RelatedPlan Component
X	PHAPlanCertificationsofCompliancewiththePHAPlansand RelatedRegulations	5YearandAnnual Plans
X	State/LocalGovernmentCertificationofConsistencywiththe	5YearandAnnual

	Consolidated Plan (not required for this update)	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 jurisdiction 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
	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing 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
	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
	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
X	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
	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
	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System	Annual Plan:

	(SEMAP)	Management and Operations
	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Public housing grievance procedures 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
	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH99-52(HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation:	Annual Plan: Safety

	<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. 	and Crime Prevention
	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
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

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

PHA Name:	Grant Type and Number Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:
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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	
		Original	Revised
1	Total Non-CFP Funds		
2	1406 Operations		
3	1408 Management Improvements		
4	1410 Administration		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		

9	1450SiteImprovement			
10	1460DwellingStructures			
11	1465.1DwellingEquipment—Nonexpendable			
12	1470NondwellingStructures			
13	1475NondwellingEquipment			
14	1485Demolition			
15	1490ReplacementReserve			
16	1492MovingtoWorkDemonstration			
17	1495.1RelocationCosts			
18	1498ModUsedforDevelopment			
19	1502Contingency			
20	AmountofAnnualGrant:(sumoflines2-19)			
21	Amountofline20RelatedtoLBPAactivities			
22	Amountofline20RelatedtoSection504Compliance			
23	Amountofline20RelatedtoSecurity			
24	Amountofline20RelatedtoEnergyConservation Measures			

Totalestimatedcostovernext5years		

PHA Public Housing Drug Elimination Program Plan

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

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

B. Eligibility type (Indicate with an "x") N1 _____ N2 _____

R _____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

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

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

12 Months _____ 18 Months _____ 24 Months _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balance should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Dates 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	Grant #	Fund Balance as of Date of	Grant Extensions	Grant Start Date	Grant Term End

	Received		thisSubmission	orWaivers		Date
FY1995						
FY1996						
FY1997						
FY1998						
FY1999						

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/TAMatch	
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	HEDE Funding	Other Funding (Amount/Source)	
1.							
2.							
3.							

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

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

9120-SecurityPersonnel					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of erson Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	
1.							
2.							
3.							

9130–EmploymentofInvestigators					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of erson Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	
1.							
2.							
3.							

9140– VoluntaryTenantPatrol					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of erson Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	
1.							
2.							
3.							

9150- PhysicalImprovements					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of erson Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	

1.							
2.							
3.							

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

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

9180-Drug Treatment						Total PHDEP Funding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of Person Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/Source)	
1.							
2.							
3.							

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

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

Required Attachment ____: Resident Member on the PHA Governing Board

1. Yes X No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

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

Elected

Appointed

C. The term of appointment is (include the date term expires): January 1, 2006

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.

X Other (explain): The PHA has only section 8 tenant-based rent assistance vouchers

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

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

Required Attachment _____: 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.)

David Luedecke
2615 N. Main #4C
Garden City, KS 67846

Judy Lincoln
720 S. Hamilton
Pratt, KS 67124

Delores Harris
820 W. 11th
Larned, KS 67550