

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 Morehead

PHA Number: KY 032

PHA Fiscal Year Beginning: (mm/yyyy) 01/2003

PHA Plan Contact Information:

Name: Bill Patrick

Phone: 606-784-4314

TDD: 1-800-648-6056

Email (if available): heritage@mis.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:

- 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)]

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

The Housing Authority of Morehead (HAM) is planning no major policy or procedural changes during the upcoming Agency Plan/Fiscal Year. It will continue on with its five-year Capital Funds Program by making several needed physical renovations in KY 32-01, Rawcel Heights and by modifying (funds permitting) its Administrative Offices (to accommodate meetings/interviews with applicants and residents.)

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.

During the current Agency Plans/Fiscal Year (i.e., FYB January 1, 2002), the HAM raised its minimum rent from zero (-0-) to \$50 per month to help meet the otherwise ever increasing costs in insurance, utilities and employee fringe benefits (health insurance) costs. It also began interior renovations at Heritage Place, KY 32-02, by contracting for bath and kitchen upgrades in the forty unit one-bedroom portion of this housing complex.

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? \$ 354,109. (Same as FFY 2002 Actual.)

C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C.

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B.

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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? *PHDEP cancelled by Congress in FFY2002.*
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ __Not Applicable.
- C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. Yes No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

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

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? *Only "Atta Boys", continue the good work.*
2. If yes, the comments are Attached at Attachment (File name)
3. In what manner did the PHA address those comments? (select all that apply) *Not Applicable.*
- 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 _____.
- Other: (list below) *Not Applicable, no comments.*

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) Commonwealth of KY-State Plan (KHC).

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)
The Housing Authority of Morehead will continue to offer decent, safe and affordable housing to eligible low-income families/individuals, while making additional physical improvements to its housing projects through both capital and operational funded items. Thereby, offering improved living environments to current and future residents will meet the HAM's and State Plans objectives/goals..
- 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 State Consolidated Plan sets forth the following, with which the HAM's activities are consistent: "Expand the supply of safe, decent, sanitary and affordable housing for very-low and low-income families through ...rehabilitation...."

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:

a.) Redirection of more than 20% of its operating budget funds from any budgeted/scheduled activity to another activity or:

b.) A major change in program direction (e.g., new or different housing selection preference criterion, new or changes to deductions from income-based rents, additional efforts to enhance deconcentration opportunities, changes in the basis of determining Ceiling/Flat rent amounts, etc.) that requires action on the part of the Board of Commissioners; or

c.) Increasing or decreasing the total number of HAM employees by more than 20% from that authorized on the January 1st of each fiscal year.

However, NONE of these changes will be considered a Substantial Deviation IF those changes result from Government (i.e., Federal, State, or Local) actions over which the HAM exercises no control.

B. Significant Amendment or Modification to the Annual Plan:

The HAM has chosen to use the HUD definition of Significant Amendment or Modification. Specifically, it will consider the following to be such modifications/amendments:

a.) Changes to rent or admission policies or organization of its waiting list.

b.) Additions of non-emergency work items (not included in the current Annual Statement or 5-Year Action Plan) or change in use of the replacement reserve funds under the Capital Grant Funds Program.

c) Any change with regard to demolition or disposition, designation of projects/buildings (for the elderly/disabled or families with disabilities), homeownership programs or conversion activities.

However, NONE of these changes will be considered a Substantial Deviation IF those changes result from Government (i.e., Federal, State, or Local) actions over which the HAM exercises no control.

Attachment A

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved 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
	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X	Other supporting documents: Analyses of both the Deconcentration Requirements and Voluntary Assessment of Voluntary Conversion	Annual Plan

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: 2-09-2004

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

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.)

Members are: Samuel Richmond, Pearl Netherly, Lana Puckett, and Sandra Mayfield (all the same as last year.)

Attachment F. Component 3, (6) Deconcentration and Income Mixing

- a. Yes No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b. Yes No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]
Divide Hill, KY 32-04	40	None	The PHA will use “skip overs” to select higher income tenants.

Attachment G. Component 10(B) Voluntary Conversion Initial Assessments

- a. How many of the PHA’s developments are subject to the Required Initial Assessments? 3
- b. How many of the PHA’s developments are not subject to the Required Initial Assessments based on the exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? 1 (Heritage Place, KY 32-02)
- c. How many Assessments were conducted for the PHA’s covered developments? 3
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

Development Name	Number of Units
None	

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

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

PHA Name: Housing Authority of Morehead		Grant Type and Number Capital Fund Program Grant No: KY36P03250103 Replacement Housing Factor Grant No:		Federal FY of Grant: 2003	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	\$ 5,509.			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 39,000.			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$280,000.			
11	1465.1 Dwelling Equipment—Nonexpendable	\$ 17,600.			
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	\$ 12,000.			
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$354,109.			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	\$ 23,000.			

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

PHA Name: Housing Authority of Morehead		Grant Type and Number Capital Fund Program Grant No: KY36P03250103 Replacement Housing Factor Grant No:			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 Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA – Wide	Administration: Advertising, copying & 5 th Year Agency Plans Preparation	1410	Various	\$ 5,509.				
PHA – Wide	Fees & Costs- hire A&E and Mod Mgr.	1430	2	\$ 39,000.				
KY-32-02	Dwelling Structures-	1460						
	Upgrade Kitchens and Baths with new plumbing and lighting fixtures and replace interior ABS Soil Lines.		32 Units	\$280,000.				
KY 32-02	Dwelling Equipment	1465						
	1. Replace Ranges with new ones		32	\$ 9,600.				
PHA – Wide	2. Replace Refrigerators as needed		Approx. 20	\$ 8,000.				
KY 32-02	Relocation Costs- support kitchen & bath upgrades as necessary	1495. 1	As necessary	\$ 12,000.				

Capital Fund Program Five-Year Action Plan *Attachment C.*
 Part I: Summary

PHA Name Housing Authority of Morehead		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHA FYB: 1-01-04	Work Statement for Year 3 FFY Grant: 2005 PHA FYB: 1-01-05	Work Statement for Year 4 FFY Grant: 2006 PHA FYB: 1-01-06	Work Statement for Year 5 FFY Grant: 2007 PHA FYB: 1-01-07
	Annual Statement				
KY 32-01, Rawcel Heights			\$ 86,000.	\$144,000.	\$ 30,000.
KY 32-02, Heritage Place		\$291,700.	\$146,800.		\$ 38,000.
KY 32-03, Triplett View			\$ 22,000.		\$ 65,500.
KY 32-04, Divide Hill			\$ 64,000.	\$190,000.	\$ 37,000.
PHA -Wide		\$ 62,409.	\$ 45,000.	\$ 45,000.	\$211,000.
CFP Funds Listed for 5-year planning		\$354,109.	\$363,800.	\$379,000.	\$381,500.
Replacement Housing Factor Funds					

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

Activities for Year :_4____ FFY Grant: 2006 PHA FYB: 1-01-06			Activities for Year: _5__ FFY Grant: 2007 PHA FY: 1-01-07		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Rawcel Heights, KY 32-01	Upgrade Kitchen & Baths	\$144,000.	KY 32-01	Replace Sanitary Sewer Line	\$ 19,000.
			KY 32-01	Install 60 new Porch Lights	\$ 6,000.
Divide Hill, KY 32-04	Ditto Rawcel Heights	\$190,000.	KY-32-02	Install 100 new Porch Lights	\$ 10,000.
			KY 32-03	Install 104 new Porch Lights	\$ 10,000.
PHA-Wide	Admin-Support & A/P costs	\$ 5,000.	KY 32-03	Replace Interior doors/locks	\$ 33,000.
			KY 32-04	Replace Interior doors/locks	\$ 27,000.
PHA-Wide	Fees & Costs	\$ 40,000.	KY 32-03	Cover Breeze Way Ceiling	\$ 10,000.
			KY 32-02	Construct 200LF conc. swale	\$ 8,000.
			KY 32-02	Improve Parking Areas	\$ 10,000.
			KY 32-02	Replace/add Security Lights	\$ 10,000.
			KY 32-03	Replace/add Security Lights	\$ 7,500.
			KY 32-04	Replace/add Security Lights	\$ 5,000.
			KY 32-01	Improve Tot lots/Playground	\$ 5,000.
			KY 32-03	Improve Tot lots/Playground	\$ 5,000.
			KY 32-04	Improve Tot lots/Playground	\$ 5,000.
			PHA_wide	100 each stoves/refrigerators	\$ 70,000.
			PHA-Wide	Tractor w/backhoe & bucket	\$ 30,000.
			PHA-Wide	2 Pickup Trucks, ¾ ton 4 wd	\$ 60,000.
			PHA-Wide	Admin-Support & A/P costs	\$ 6,000.
			PHA-Wide	New Copy Machine & PC	\$ 5,000.
			PHA-Wide	Fees & Costs	\$ 40,000.
Total CFP Estimated Cost		\$379,000.			\$381,500.

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

PHA Name: Housing Authority of Morehead	Grant Type and Number KY36P03250101 Capital Fund Program Grant No: 501-01 Replacement Housing Factor Grant No:	Federal FY of Grant: FFY 2001
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 6-30-02 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost as of 6-30-02	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	\$ 4,698.		\$ 4,698.	\$ 403.
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 39,000.		\$ 39,000.	\$ 21,782.
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$309,981.		\$309,981.	\$125,286.
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	\$ 18,849.		\$ 18,849.	\$ 4,611.
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$372,528.		\$372,528.	\$152,082.
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	\$ 80,000.			

Annual Statement/Performance and Evaluation Report <i>Attachment H.</i> Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of Morehead		Grant Type and Number CFP KY36P03250101 Capital Fund Program Grant No: 501-01 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost As of 6-30-02		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA – Wide	Admin-Prepare FFY2002 Agency Plans, ACOPP update & Advertise 4 bids	1410		\$ 4,698.		\$ 4,698.	\$ 403.	In Progress
PHA –Wide	Fees & Costs-hire A&E and Mod Consultant to plan, manage & oversee work	1430	2	\$ 39,000.		\$ 39,000.	\$ 21,782.	On-going
KY 32-02	Dwelling Structures-complete Kitchen and Bath upgrades, including cabinets, sinks, countertops, soffits, grease shields, randgehods and electrical fixtures plus replace ABS Soil Lines with Schedule 40 PVC Lines.	1460	40	\$309,981.		\$309,981.	\$125,286.	In Process
KY 32-02	Relocation Costs-relocations during kitchen, bath and soil line upgrades	1495. 1	40	\$ 18,849.		\$ 18,849.	\$ 4,611.	In Process

Annual Statement/Performance and Evaluation Report <i>Attachment H.</i> Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of Morehead		Grant Type and Number CFO KY36P03250101 Capital Fund Program No: 501-01 Replacement Housing Factor No:				Federal FY of Grant: 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	
PHA - Wide	12-31-02			6-30-04			

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

PHA Name: Housing Authority of Morehead	Grant Type and Number KY36P03250102 Capital Fund Program Grant No: 501-02 Replacement Housing Factor Grant No:	Federal FY of Grant: FFY 2002
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 6-30-02 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				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	\$ 3,000.			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 39,000.		\$ 39,000.	None
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 18,400.			
10	1460 Dwelling Structures	\$209,709.			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	\$ 84,000.			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$354,109.		\$ 39,000.	None
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	\$108,700.			

Annual Statement/Performance and Evaluation Report Attachment H. Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of Morehead			Grant Type and Number CFO KY36P03250102 Capital Fund Program No:501-02 Replacement Housing Factor No:				Federal FY of Grant: 2002
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	
PHA – Wide	06-30-04			06-30-06			

Attachment I.

Report on the Progress in Meeting the Five-Year Mission & Goals/Objectives

The Housing Authority of Morehead (HAM) met its Mission by providing decent, safe and sanitary housing to its income eligible clientele during the past year (and two prior) Agency Plans year(s). Further, it has achieved the following in regard to its Goals/Objectives:

1. During the twelve month period ended June 30, 2002, HAM admitted 57 new residents. Of those, 42 or 74% were of the extremely low (i.e., 30% and below) income range of applicants. Thus, the HAM met its goal and Federal mandate of housing at least 40% of all new residents from this income (i.e., zero to 30% of the Median Family Income for Rowan County) range for Housing Authority of Morehead projects.
2. HAM did improve living condition for its residents by completing the HVAC work (including first time installation of Central Air Conditioning) at Heritage Place (KY 32-02) and also undertaking the renovations of both the bathrooms and kitchens (new plumbing and light fixtures) and replacement of the interior soil lines at the forty unit (one bedroom) section of this same housing complex during the past year.
3. In regard to "Safety", it should be noted that a City Policeman lives in one unit at Divide Hill (KY 32-04) on a special rent. The HUD REAC, as of July 10, 2002, had not surveyed the Housing Authority of Morehead residents during FFY2002. However, HAM received both good marks from its Resident Council and the FFY2001 REAC Resident Services and Satisfaction Survey in the "Safety" area. The three members of the Resident Council present at the joint meeting with the Agency Plans Consultant and HAM Executive Director on July 10, 2002, all indicated that they felt safe and secure living in their respective housing complex and unit. Further, the Chief of Police indicated, on July 10, 2002, that the Police Department had no major problems within the HAM's properties, that call outs were no heavier there than any other part of the City and had his department and HAM worked together very cooperatively. Most of the Police call-outs in HAM properties were for "domestic situations". Thus, the HAM believes that it has met its goal/objective of providing "safe and secure" housing to its residents.
4. HAM had only two turnovers (move-outs) in Rawcel Heights, KY 32-01, during the twelve month period ended June 30, 2002; filling one of those vacancies with an Extremely Low-Income applicant family and the other with an Low(er) Income (i.e., 51-80% of the MFI) family applicant. Moreover, in reviewing Rawcel Heights average family income makeup, as of June 30, 2002, with the income composition of HAM family complexes, adjusting each project for unit sizes, we found that Rawcel Heights average family income was within an allowance variance of the overall average. Thus, HAM has met this goal/objective.