

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: Negaunee Housing Commission

PHA Number: MI068

PHA Fiscal Year Beginning: 01/2003

PHA Plan Contact Information:

Name: Marcia M. Waters

Phone: (906) 475-9107

TDD: N/A

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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

**i. Annual PHA Plan
Fiscal Year 2002**

[24 CFR Part 903.7]

ii. 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.

Contents	<u>Page #</u>
Annual Plan	
i. Annual Plan Information	1
ii. Table of Contents.....	1
iii. Executive Summary (optional).....	2
1. Description of Policy and Program Changes for the Upcoming Fiscal Year.....	3
2. Capital Improvement Needs.....	3
3. Demolition and Disposition	4
4. Homeownership: Voucher Homeownership Program	5
5. Crime and Safety: PHDEP Plan.....	5
6. Other Information:	5
A. Resident Advisory Board Consultation Process.....	5
B. Statement of Consistency with Consolidated Plan.....	6
C. Criteria for Substantial Deviations and Significant Amendments	7
Attachments	
<u>X</u> Attachment A: Supporting Documents Available for Review.....	7
<u>X</u> Attachment B: Capital Fund Program Annual Statement	11
<u>X</u> Attachment C: Capital Fund Program 5 Year Action Plan (Pg.19-Table Library).....	35
Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement	
Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan	20
<u>X</u> Attachment D: Resident Membership on PHA Board or Governing Body	29
<u>X</u> Attachment E: Membership of Resident Advisory Board or Boards.....	30
<u>X</u> Attachment F: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<u>X</u> Other	
Attachment H: Capital Funds Budgets 2003 – 2007	33

iii. Executive Summary

[24 CFR Part 903.7 9 (r)]

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

Briefly, I will provide an overview of the critical role the Negaunee Housing Commission plays in the community's well being. There is no way I can create a full understanding of the opportunities and support services available at Negaunee Housing Commission.

Each year seems to be a challenge, keeping our apartments occupied and meeting the needs of our residents. As stated last year, the general population of applicants has changed greatly. Many of the applications we receive are from individuals who health and/or mental status changed dramatically. The majority of applications we receive are from individuals who need a variety of services and prefer not to live alone. The Negaunee Housing Commission continues programs and services that help to meet the needs of the current residents and the housing needs of our community. We have seen remarkable recoveries by many residents once they have returned to their apartment and had the necessary services available to them to promote total recovery. These are the tools needed to enter a new era in the delivery of affordable housing. It is our goal to become part of a valuable team, to provide the availability of service either temporary or for long term, to enable the resident to remain in their apartment, and attempt to provide quality of life and peace of mind to our residents.

Negaunee Housing Commission has been affected greatly by the housing available in our local area. Negaunee Housing Commission has two projects. Project I was built in 1968 and consisted of sixty apartments. In 1982, Project II, consisting of twenty apartments, was connected to the original building. At the current time, there are six different size apartments in one building with rent calculated the same for each apartment. One very positive note that needs to be stated is that though Capital Funds we were able to construct a storage addition for the fifty-nine one bedroom apartments in Project I that had no storage at all. We are grateful to have the storage to offer and the residents are very pleased to have storage available.

Negaunee Housing Commission may not be new buildings that are larger and have many extras, but we are blessed with a great location. We are walking distance to the grocery stores, the drug store, dentist office, banks, beauty shop, insurance agency, gas stations, and a pizza shop. Plus we have bus service available each hour at the door. To top it off, we are located across from beautiful Teal Lake.

The Annual Plan is an outline of what we are currently doing plus goals and objectives to continue to improve all aspects of Negaunee Housing Commission's Lakeview Apartments.

The plans, goals, objectives, policies and financial summary are the means by which the mission of the Negaunee Housing Commission will be accomplished and will be consistent with the Consolidated Plan.

The Negaunee Housing Commission's Lakeview Apartments are an asset to the local community and to the Department of Housing and Urban Development.

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.

The Negaunee Housing Commission Staff and Board Members, Resident Council and Resident Advisory Board will work together to look for means and opportunities to improve Lakeview Apartments. An extreme amount of thought, research, and time went into developing the Agency Plan and Five Year Plan of the Negaunee Housing Commission. However, there is always room for improvement and/or correction. For 2003, we have made the following changes in policies or item that directly effect our application for an apartment, our lease and our ACOPs. The mission of the Negaunee Housing Commission has not changed. We strive to provide options that promote maximum independence and dignity, yet make available services necessary to insure security and peace of mind.

The policies that were changed, revised or added include: 1) Community Room Policy, 2) Resident Lounge Policy, 3) Flat Rent Policy, 4) Pet Policy, 5) Maintenance Policy (Plan for 2003), and 6) Personnel Policy. The Application, Lease and ACOP had the following changes:

- Change all questions related to the nature or extent of any mental or physical disability to: whether applicant(s) need an apartment specially designed with features intended for persons with disabilities?
- Change how many members will live in the apartment to: how many occupants will live in the apartment?
- We will ask for a "Government Photo ID" instead of asking for a driver's license.
- We will include the words "Equal Housing Opportunity" on all applications.

The Capital Funds budgets have been redone to include years 2003 – 2007. Those are attached as Attachment "H" of this plan.

The Community Service requirement is still on hold. Currently we have one resident that would fall into the Community Service requirement. However, that resident started doing Community Services from the on-set of the requirement and has continued to do Community Service even now that it is not required. That particular resident is a spouse of one of our disabled residents. She is very dedicated to the noon meal program offered at Lakeview on Tuesdays, Thursdays and Fridays. This resident is an asset to Negaunee Housing Commission.

Negaunee Housing Commission has eighty apartments available. We have experienced many apartment changes this past year, but seventy-nine of our apartments are occupied by residents that are either over sixty-two years of age or are disabled. As expressed last year, this particular population does not accept change well. So whenever possible, we try to limit change in policy or programs to the greatest extent possible.

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?
\$98,674.00

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 (N/A)

[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 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 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 X No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

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

N/A

C. ___ Yes X 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?

I. If yes, the comments are Attached at Attachment : F
 Comments of Resident Advisory Board

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 at the end of the RAB Comments in Attachment F.

___ Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

Michigan

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)

I. Improve and preserve the existing affordable housing stock and neighborhoods with the use of Capital Funds; and

- II. Develop linkages between housing and service sectors to provide greater housing opportunities for households with special needs.

___ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

___ Yes X 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)

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.

- I. The Negaunee Housing Commission defines substantial deviation or significant amendments or modifications are discretionary changes in the plans or policies of the housing commission that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners.

A. Substantial Deviation from the 5-year Plan:

- I. Any essential change in order from the established 5-Year Plan as described in the Agency Plan.

A. Significant Amendment or Modification to the Annual Plan:

- II. The Negaunee Housing Commission recognizes HUD’s definition as provided in Notice PIH99-51 III ‘G’ Definition of “Substantial Deviation” and “Significant Amendment or Modification” [903.7®]

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
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
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
N/A	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
N/A	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 <u>X</u> 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 <u>X</u> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies ___ check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types _____ check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures _____ check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
----	Section 8 informal review and hearing procedures _____ 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
X	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
X	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
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
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

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: NEGAUNEE HOUSING COMMISSION		Grant Type and Number Capital Fund Program: MI33-P068-50101 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
___ Original Annual Statement ___ Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2002 ___ 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					
2	1406 Operations	3,605.00	10,380.00	2,657.65	2,116.73	
3	1408 Management Improvements	4,800.00	5,461.00	3,405.14	3,364.64	
4	1410 Administration	8,278.00	8,778.00	6,302.94	5,901.63	
5	1411 Audit	.00	.00	.00	.00	
6	1415 liquidated Damages	.00	.00	.00	.00	
7	1430 Fees and Costs	4,655.00	5,432.00	1,393.20	776.950	
8	1440 Site Acquisition	.00	.00	.00	.00	
9	1450 Site Improvement	.00	.00	.00	.00	
10	1460 Dwelling Structures	.00	.00	.00	.00	
11	1465.1 Dwelling Equipment—Nonexpendable	800.00	800.00	800.00	800.00	
12	1470 Nondwelling Structures	77,836.00	69,123.00	55,800.58	55,800.58	
13	1475 Nondwelling Equipment	3,900.00	3,900.00	999.27	999.27	
14	1485 Demolition	.00	.00	.00	.00	
15	1490 Replacement Reserve	.00	.00	.00	.00	
16	1492 Moving to Work Demonstration	.00	.00	.00	.00	
17	1495.1 Relocation Costs	.00	.00	.00	.00	
18	1498 Mod Used for Development	.00	.00	.00	.00	
19	1502 Contingency	.00	.00	.00	.00	
20	Amount of Annual Grant: (sum of lines 2-19)	103,874.00	103,874.00	71,358.78	69,759.80	
21	Amount of line 20 Related to LBP Activities					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: NEGAUNEE HOUSING COMMISSION		Grant Type and Number Capital Fund Program: MI33-P068-50101 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2002 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
22	Amount of line 20 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security					
	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 1: Summary					
PHA Name: NEGAUNEE HOUSING COMMISSION		Grant Type and Number Capital Fund Program: MI33-P068-50102 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2002
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: __)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2002		<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	6,080.00		.00	.00
3	1408 Management Improvements	4,500.00		.00	.00
4	1410 Administration	10,778.00		355.80	355.80
5	1411 Audit	.00		.00	.00
6	1415 liquidated Damages	.00		.00	.00
7	1430 Fees and Costs	4,680.00		.00	.00
8	1440 Site Acquisition	.00		.00	.00
9	1450 Site Improvement	20,334.00		7,646.83	4,737.98
10	1460 Dwelling Structures	46,252.00		.00	.00
11	1465.1 Dwelling Equipment—Nonexpendable	1,050.00		.00	.00
12	1470 Nondwelling Structures	.00		.00	.00
13	1475 Nondwelling Equipment	5,000.00		.00	.00
14	1485 Demolition	.00		.00	.00
15	1490 Replacement Reserve	.00		.00	.00
16	1492 Moving to Work Demonstration	.00		.00	.00
17	1495.1 Relocation Costs	.00		.00	.00
18	1498 Mod Used for Development	.00		.00	.00
19	1502 Contingency	.00		.00	.00
20	Amount of Annual Grant: (sum of lines 2-19)	98,674.00		8,002.63	5,093.78
21	Amount of line 20 Related to LBP Activities				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: NEGAUNEE HOUSING COMMISSION		Grant Type and Number Capital Fund Program: MI33-P068-50102 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2002	
___ Original Annual Statement		___ Reserve for Disasters/ Emergencies		___ Revised Annual Statement (revision no: __)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2002		<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
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: NEGAUNEE HOUSING COMMISSION		Grant Type and Number Capital Fund Program #: MI33-P068-50102 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MI-068-HA-WIDE	Operations	1406		6,080.00				
MI-068-HA-WIDE	Management Improvements	1408		4,500.00				
MI-068-HA-WIDE	Office Secretary C.F. Hours, Main't. Emergency O.T.	1410		10,778.00				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: NEGAUNEE HOUSING COMMISSION		Grant Type and Number Capital Fund Program #: MI33-P068-50102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MI-068-HA-WIDE	Architect Fee	1430		4,680.00				
MI-068-HA-WIDE	Emergency Sewer Lateral Repair/Replacement	1450	1	7,650.00				
MI-068-HA-WIDE	Sidewalk Replacement	1450		1,000.00				
MI-068-HA-WIDE	Additional Parking with Lighting	1450		11,534.00				
MI-068-002	Floor Replacement (268, 131)	1460	2	1,200.00				
MI-068-001	Door Replacements (3)	1460	3	1,500.00				
MI-068-HA-WIDE	Elevator Valve Replacement	1460	1	7,000.00				
MI-068-HA-WIDE	Domestic Water Treatment/Filtration	1460	1	7,500.00				
MI-068-001	Carpet & Tile Replacement Second Floor Hallways	1460		26,202.00				
MI-068-001	Air System, Renovate Main't. Storage, Window Ventilation Part 1	1460		1,000.00				
MI-068-001	Salon	1460		2,000.00				
MI-068-001	Appliance Replacements – Ranges	1465	3	1,050.00				
MI-068-HA-WIDE	Main't. & Computer Equipment, Furniture Replacement	1475		5,000.00				
	Total			98,674.00				

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number MI068	Development Name: NEGAUNEE HOUSING COMMISSION	
MI068001 & 002	LAKEVIEW APARTMENTS	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
• Operations	49,335.00	2003, 2004, 2005, 2006,2007
• Management Improvements, Environmental Review	24,000.00	2003, 2004, 2005, 2006,2007
• Part Time Secretary , Maintenance Emergency Over Time, CF Hours, Advertisement	63,404.00	2003, 2004, 2005, 2006,2007
- Architect Fee	19,220.00	2003, 2004, 2005, 2006,2007
- Sidewalks, Landscaping, Additional Parking with Lighting, Repaving	33,443.00	2003, 2004, 2006,2007
- Lavatory Renovation (Project I), Door Replacements, Elevator Repairs, Insulation, Bedroom Lights, Boiler Room Update, Paint & Repairs in Public Areas, Kitchen Additions/Repairs, Handrails, Door Assist Opener		
- Appliances (Ranges, Microwaves, etc.)	227,415.00	2003, 2004, 2005, 2006,2007
- Patio Renovation with Shelter, Sitting Area (N/E)	16,100.00	2003, 2004, 2005
- Computer Equipment, Maintenance Equipment, Furniture – (Office, Community Room and Lawn), Washer	29,810.00	2004, 2005
	30,643.00	2003, 2004, 2005, 2006
Total estimated cost over next 5 years	\$493,370.00	

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

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

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	PHDEP 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	PHEDEP 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	PHEDEP 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	PHDEP 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	PHDEP 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:

- (A) Mrs. Betty Hockin
- (B) 98 Croix Street, Apt. 267
- (C) Negaunee, Michigan 49866

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

- Elected
- Appointed

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

January 2002 though January 2006

(N/A) 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):

A. Date of next term expiration of a governing board member:

January 2003 – Mr. Donald P. Ellis – currently our President
Mr. Ellis has been a very involved member of our Board since February 1995 when he filled an unexpired term though June 1998. In June 1998, Mr. Ellis was appointed from June 1998 though January 2003.

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

Mr. Thomas Manninen, Negaunee City Manager

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.)

RESIDENT ADVISORY BOARD MEMBERS INCLUDE:

Mrs. Betty Hockin, 98 Croix Street Apt. 267, Negaunee, Michigan 49866
(4 years member - 1999, 2000, 2001 and 2002)

Mrs. Inona Certo, 98 Croix Street Apt. 135, Negaunee, Michigan 49866
(4 years member – 1999, 2000, 2001 and 2002)

Mrs. Mary Van Sickle, 98 Croix Street Apt. 258, Negaunee, Michigan 49866
(3 years member – 1999, 2001 and 2002)

Mr. Raymond Sarasin, 98 Croix Street Apt. 257, Negaunee, Michigan 49866
(1 year member – 2002)

Mr. Wally Posio, 98 Croix Street Apt. 110, Negaunee, Michigan 49866
(1 year member – 2002)

Mr. Robert Gunderson, 98 Croix Street Apt. 268, Negaunee, Michigan 49866
(1 year member – 2002)

HNEGAUNEE HOUSING COMMISSION RESIDENT COUNCIL MEMBERS

INCLUDE: *(Meet once a month – fourth Monday of the month)*

Mr. Robert Gunderson, 98 Croix Street, Apt. 268, Negaunee, Michigan 49866
(President of Resident Council)

Mrs. Mary Van Sickle, 98 Croix Street Apt. 258, Negaunee, Michigan 49866
(Vice-president of Resident Council)

Mrs. Margaret Laszlo, 98 Croix Street, Apt 114, Negaunee, Michigan 49866

Ms. Cathalene Brown, 98 Croix Street, Apt. 260. Negaunee, Michigan 49866

Mr. Raymond Sarasin, 98 Croix Street Apt. 257, Negaunee, Michigan 49866

Mrs. Betty Hockin, 98 Croix Street, Apt. 267, Negaunee, Michigan 49866

Mrs. Inona Certo, 98 Croix Street, Apt. 135, Negaunee, Michigan 49866

Mr. Wally Posio, 98 Croix Street, Apt. 110, Negaunee, Michigan 49866

ATTACHMENT F: COMMENTS OF RESIDENT ADVISORY BOARD & EXPLANATION OF PHA RESPONSE

The Resident Advisory Board members met with the Executive Director to discuss Negaunee Housing Commission's Agency Plan and Annual Plan for 2003.

The meeting was very positive and informative. The proposed changes for 2003 include the following policy changes.

1. The Community Room Policy
2. The Resident Lounge policy
3. The Flat Rent Policy
4. The Pet Policy
5. The Maintenance Policy (Plan for 2003)
6. The Personnel Policy

The Community Service subject was revisited. The Community Service is still on hold. Currently there is one resident that would fall into the Community Service requirement, however, that resident started doing Community Services from the very beginning and has continued to do Community Services even now that it is not required. She completes the paperwork and submits it to me regularly. That resident is an asset to the Negaunee Housing Commission.

Also discussed were the changes that would affect the application, the lease and the ACOPs. The changes include the following:

1. Change all questions related to the nature or extent of any mental or physical disability to: whether applicant(s) need an apartment specially designed with features intended for persons with disabilities.
2. If a disable person prefers an apartment without any special features, they must be allowed that apartment. This is necessary even if at a later date they may want to make a reasonable modification to the apartment.
3. Change how many members will live in the apartment to how many occupants will live in the apartment.
4. We will not require a driver's license. Instead we will ask for a "Government Photo ID". By not restricting acceptable forms of photo ID to driver's licenses, we won't be discriminating against disabled persons. Should an applicant and or resident offer a drivers license we will certainly accept it.
5. We will include the words "Equal Housing Opportunity" on all applications.

We then discussed what our goals are with the Capital Funds 2003 through 2007. We work hard as a team to make all our Capital Funds go as far as possible. We are grateful for all the funds we are given and we plan carefully and use the money wisely.

As stated, this meeting was positive, no specific problem areas, other than the issue with pets. We have had a problem with visiting pets being taken just outside our doors rather than being taken to an appropriate area for them to eliminate and for the resident to clean up after the pet. That is also enforceable by City Charter.

Aside from the above mentioned issue, the meeting was pleasant and informative for all. I express sincere thanks to all the residents that met with me to be involved and to be informed so they are able to attempt to assist other residents if issues or concerns arise.

ATTACHMENT H: CAPITAL FUND BUDGETS 2003 – 2007

CAPITAL FUNDS
FISCAL YEAR 2003 (\$98,674.00) – WORK IN 2004

1.	1406	HW	OPERATIONS	9,867.00
2.	1408	HW	MANAGEMENT IMPROVEMENTS	4,500.00
3.	1410	HW	OFFICE SECRETARY, MAINTENANCE EMERGENCY OVERTIME, TIME SPENT ON CAPITAL FUNDS, ADVERTISEMENT	11,900.00
4.	1430	HW	ARCHITECTURAL FEES	4,131.00
5.	1450	HW	SIDEWALK REPLACEMENT, LANDSCAPE IMPROVEMENTS	3,200.00
6.	1450	HW	ADDITIONAL PARKING @ N/E CORNER WITH LIGHTING	8,000.00
7.	1460	I	ATTIC INSULATION & BAFFLES (R-19 .55 PER SQ. FT. (18,000 SQ. FT.))	12,900.00
8.	1460	I	AIR SYSTEM COMPLETION (PART II)	20,233.00
9.	1460	HW	BOILER CONTROLS UPDATE	5,000.00
10.	1460	HW	PAINT PUBLIC AREAS	5,500.00
11.	1460	HW	CARPET REPLACEMENT - 2 APARTMENTS	1,700.00
12.	1465	I	APPLIANCE REPLACEMENT – 5 RANGES	1,900.00
13.	1475	HW	MAINTENANCE & COMPUTER EQUIPMENT, FURNITURE REPLACEMENT – OFFICE, HALLWAYS, COMMUNITY ROOM SOUND SYSTEM, ETC.	9,843.00
			TOTAL	\$98,674.00

CAPITAL FUNDS
FISCAL YEAR 2004 (\$98,674.00) – WORK IN 2005

1.	1406	HW	OPERATIONS	9,867.00
2.	1408	HW	MANAGEMENT IMPROVEMENTS	4,500.00
3.	1410	HW	OFFICE SECRETARY, TIME ALLOTTED FOR CAPITAL FUNDS, MAINTENANCE EMERGENCY OVERTIME, ADVERTISEMENT	12,248.00
4.	1430	HW	ARCHITECTURAL FEE	4,486.00
5.	1450	HW	SIDEWALK REPLACEMENT	1,200.00
6.	1460	I	LAVATORY MEDICINE CABINET WITH LIGHT REPLACEMENT – 57 APARTMENTS	20,346.00
7.	1460	I	LAVATORY FLOOR REPLACEMENT – CERAMIC TILE – 5 APARTMENTS	3000.00
8.	1460	HW	BEDROOM CEILING LIGHT/FAN INSTALLATION – 11 APARTMENTS	3,850.00
9.	1460	HW	CARPET REPLACEMENT – 2 APARTMENTS	1,700.00
10.	1465	HW	INSTALL MICROWAVES IN ALL APTS.	10,400.00
11.	1465	I	APPLIANCE REPLACEMENT – 5 RANGES	1,900.00
12.	1470	HW	PATIO SHELTER S/W AREA	17,377.00
13.	1475	HW	MAINTENANCE & LAWN EQUIPMENT, COMPUTER/OFFICE EQUIPMENT & FURNITURE REPLACEMENT	7,800.00
			TOTAL	\$98,674.00

CAPITAL FUNDS
FISCAL YEAR 2005 (\$98,674.00) – WORK IN 2006

1.	1406	HW	OPERATIONS	9,867.00
2.	1408	HW	MANAGEMENT IMPROVEMENTS	4,500.00
3.	1410	HW	OFFICE SECRETARY, TIME ALLOTTED FOR CAPITAL FUNDS, ADVERTISING, MAINTENANCE EMERGENCY OVERTIME, ETC.	12,818.00
4.	1430	HW	ARCHITECTURAL FEES (9%)	5,500.00
5.	1460	I	DINING ROOM: DRYWALL EAST paneled wall	5,000.00
6.	1460	I	INSTALL HAND RAILS ON OTHER SIDE HALLWAY	9,120.00
7.	1460	I	REPLACE LAVATORY DOORS (57)	18,186.00
8.	1460	I	REPLACE LAVATORY FLOOR IN 5 APARTMENTS	3,000.00
9.	1460	HW	INSTALL BEDROOM CEILING FAN/LIGHT (11 APARTMENTS)	3,850.00
10.	1460	I	DOOR ASSIST TO HANDICAP LAVATORY (STANLEY OR COMP.)	1,800.00
11.	1460	I	REPLACE PUBLIC RESTROOM DOORS	1,700.00
12.	1460	HW	CARPET REPLACEMENT (2 APARTMENTS)	1,700.00
13.	1465	I	APPLIANCE REPLACEMENT (5 RANGES)	1,900.00
14.	1470	HA	CONSTRUCT SITTING STRUCTURE AT N/E AREA	12,433.00
15.	1475	HA	COMPUTER/COPIER UPGRADE, MAINTENANCE EQUIPMENT, FURNITURE EQUIPMENT, SOUND	7,300.00

			SYSTEM/INTERCOM	
			TOTAL	\$98,674.00

CAPITAL FUNDS
FISCAL YEAR 2006 (\$98,674.00) – WORK IN 2007

1.	1406	HW	OPERATIONS	9,867.00
2.	1408	HW	MANAGEMENT IMPROVEMENTS	4,500.00
3.	1410	HW	OFFICE SECRETARY, TIME ALLOTTED FOR CAPITAL FUNDS, MAINTENANCE EMERGENCY OVERTIME, ADVERTISING, ETC.	13,024.00
4.	1430	HW	ARCHITECT FEE (9%)	5,103.00
5.	1450	HW	SIDEWALK REPLACEMENT	1,500.00
6.	1450	HW	REPAVE PARKING LOT	16,543.00
7.	1460	I	VALVE REPLACEMENT: INCLUDE NEW ACCESS PANELS IN HALLWAYS	29,287.00
8.	1460	I	LAVATORY FLOOR REPLACEMENT (5 APARTMENTS)	3,000.00
9.	1460	HW	BEDROOM LIGHT/FAN INSTALLATION (5 APARTMENTS)	1,750.00
10.	1460	HW	CARPET REPLACEMENT (2 APARTMENTS)	1,700.00
11.	1460	II	COUNTER TOP REPLACEMENT (20 APARTMENTS)	4,700.00
12.	1460	I	PUBLIC LAVATORY TOILET & URINAL REPLACEMENT	2,000.00
13.	1475	HW	COMPUTER, COPIER, SOFTWARE UPDATE, MAINTENANCE EQUIPMENT – SNOW BLOWER, VACUUM, ETC.	5,700.00
			TOTAL	\$98,674.00

CAPITAL FUNDS
FISCAL YEAR 2007 (\$98,674.00) – WORK IN 2008

1.	1406	HW	OPERATIONS	9,867.00
2.	1408	HW	MANAGEMENT IMPROVEMENTS	6,000.00
3.	1410	HW	OFFICE SECRETARY, TIME ALLOTTED FOR CAPITAL FUNDS, MAINTENANCE EMERGENCY OVERTIME, ADVERTISEMENT	13,414.00
4.	1450	HW	SIDEWALK REPLACEMENT	3,000.00
5.	1460	I	LAVATORY DOOR REPLACEMENT (10 APARTMENTS)	6,000.00
6.	1460	HW	BEDROOM FAN/LIGHT INSTALLATION (10 APARTMENTS)	3,500.00
7.	1460	HW	CARPET REPLACEMENT (10 APARTMENTS PLUS BY GARAGE)	17,000.00
8.	1460	II	COUNTERTOP REPLACEMENT (10 APARTMENTS)	2,500.00
9.	1475	HW	COMPUTER EQUIPMENT, MAINTENANCE EQUIPMENT	8,000.00
10.	1460	I	REPLACE FLOOR TILE IN COMMUNITY ROOM, NEW FURNITURE	12,000.00
11.	1460	HW	KITCHEN ADDITIONS – TOWEL BARS & SPRAY HEADS	6,000.00
12.	1460	HW	ELEVATOR UPDATE – ELECTRIC EYE, CONTROLS	5,000.00
13.	1460	HW	REPLACE DOMESTIC HOT WATER TANK	6,393.00
			TOTAL	\$98,674.00

