

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year Beginning in: 10/2003

**Sleepy Eyemn060v02**

**NOTE: THIS PHA PLAN TEMPLATE (HUD50075) IS TO BE COMPLETED IN  
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

## PHA Plan Agency Identification

**PHAName:** SleepyEyeHousingAuthority -RossParkApartments

**PHANumber:** MN060

**PHAFiscalYearBeginning:** 10/2003

### PHA Plan Contact Information:

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Email(ifavailable): sehra@sleepyeyetel.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  
City of Sleepy Eye

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

[24CFR 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 filename in parentheses in the space to the right of the title.

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## ii. Executive Summary

[24CFR Part 903.79(r)]

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

The Sleepy Eye Housing Authority has prepared this Agency Plan in compliance with section 511 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.

We have adopted the following Mission Statement to guide the activities of the Sleepy Eye Housing Authority.

The Mission of the Sleepy Eye Housing Authority is to be the area's affordable housing of choice. We provide and maintain safe, quality housing in a cost effective manner. By partnering with other area agencies, the State of Minnesota and Brown County, we can offer affordable rents and a Housing with Service option to our Ross Park Community, the Sleepy Eye Community, and surrounding rural areas.

The Sleepy Eye Housing Authority has also adopted the following goals and objectives for the next five years:

PHAGoal: Expand the supply of assisted housing

Objectives: Reduce Public Housing Vacancies

Assist local agencies in purchasing and renovating existing Housing:

Leverage private or other public funds to create additional housing opportunities if needed, Sponsor Agency to complete a current housing study for the City of Sleepy

Eye:

PHAGoal: Improve the quality of assisted housing

Objectives: Improve public housing management:

Increase customer satisfaction:

Renovate/modernize public housing units or community service spaces, if needed:

PHAGoal: Provide an improved living environment

Objectives: Implement public housing security improvements:

Provide Housing with supportive services for elderly and disabled tenants, addition of Assisted Living Services and additional support staff:

PHAGoal: Promote self sufficiency and asset development for the younger, disabled working age tenants and elderly tenants

Objectives: Provide or attract supportive services to improve employability of working age disabled tenants:

Provide or attract supportive services to increase independence and choice for the elderly and disabled tenant:

PHAGoal: Ensure equal opportunity and affirmatively further fair housing

Objectives: Undertake affirmative measures to ensure access to assisted housing regardless of Race, color, religion, national origin, sex, familial status, and disability.

The Sleepy Eye Housing Authority's 2003 Annual Plan is based on the premise that if we accomplish our goals and objectives we will be working towards the achievement of our mission statement.

The plans, statements, budget summary, policies, etc., set forth in the annual Plan all lead towards the accomplishment of our goals and objectives and are consistent with the Consolidated Plan.

In summary, we are on course to improve the condition of affordable housing in Sleepy Eye.

**Current goals met in the 2002/2003 Year:**

PHAS Score for Fiscal Year End 9/30/2002 -96% HIGH PERFORMER STATUS

The Sleepy Eye HRA has remained at 98% -100% occupancy 10/1/2002 through 5/31/2003

The creation of the Assisted Living Service Program at Ross Park through a grant from the Department of Health and Human Services Aging Initiatives has proved to be a success. The DHS/Bush Grant is a two-year grant that was completed March 31, 2003. After two years the program has met its participant projections and is on track as being a self-sustaining program.

Continue to complete Capital Fund Projects as designated in the HRA Plans.

Partnered with Volunteers of America to assist in the development of services in the Ross Park Apartment Complex, those being:

- Assisted Living
- Senior Dining, delivered meals also
- Adult Day Services
- Faith in Action Program
- Wellness Programs
- Activities and outings

The Sleepy Eye HRA has been a successful recipient of a State of Minnesota Community Development Grant which is a matching grant to construct a 34' x 52' addition to the Ross Park Community Room area to facilitate the growth and needs of the service programs located in the Ross Park Complex. This new addition will accommodate the Adult Day Service Program and the Brown County Faith In Action Program. At the same time it will free up much needed space for the HRA.

Partnered with the City of Sleepy Eye and Economic Development Authority to develop a master development plan to redesign Sleepy Eye's vacating downtown businesses, and points of interest in Sleepy Eye. Also, are working with the City of Sleepy Eye and the EDA to hire a firm to complete a current Housing Study for the City of Sleepy Eye. HRA to pay 1/3 of cost of Housing Study.

### **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 Sleepy Eye Housing Authority has made minimal policy changes, those being:

- \* **Changes made to the Dwelling Lease Title – Public Housing ~ Housing With Services Lease ~ Ross Park Apartments**
- \* **Paragraph #25 – Attachments to the Lease – #5 Housing with Services Options offered and available for interested tenants/families. Lead Based Paint Notice**
- \* **HIPPA medical privacy regulations which may apply to Housing with Services.**
- \* **Updates and Additional descriptions to the Personnel Policy \**
- \* **Updates and Improvements made to the Disaster Plan and Emergency Policies**
- \* **Amendment to the By - Laws of the Housing and Redevelopment Authority which address the changes in meeting times and days, and redirect the title Executive Director to have no gender specifications attached to it.**

### **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? \$62,000 est .

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.D 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

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

[24CFR Part 903.79(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 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 at Attachment \_\_\_\_\_

**6. Other Information**

[24CFR Part 903.79(r)]

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

1. X Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are attached at Attachment F

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
  - Yes  No: at the end of the RAB Comments in Attachment \_\_\_\_\_.
- X 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: (State of Minnesota)

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

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

Yes  No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments.

## C. Criteria for Substantial Deviation and Significant Amendments

### 1. Amendment and Deviation Definitions

24CFR 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:

Any substantial deviation or significant amendment or modification to the plans will be subject to the review of the Resident Advisory Board and full public hearing process requirements.

#### B. Significant Amendment or Modification to the Annual Plan:

Shall mean any action taken by the public housing authority that changes or modifies:

1. Rent or admission policies or organization of the waiting list;
2. The Capital Fund Program plan either through the addition or deletion of items or projects from the list of planned activities or change in use of replacement reserve funds under the Capital Fund; and
3. Planned demolition or disposition, designation, homeownership programs or conversion activities.

#### A. Exceptions

1. Exception to this definition will be made for any of the above actions that are made to reflect a change in HUD regulatory requirements.

## 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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
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 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
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 <input type="checkbox"/> 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 <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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
N/A	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
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 <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
N/A	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
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for redesignation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
N/A	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
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
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Income Analysis of Public Housing Covered Developments	Required by PIH Notice 2001-26 (specify as needed)
	Voluntary Conversion Required Initial Assessment	Required by PIH Notice 2001-26 (specify as needed)
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

<b>Annual Statement/Performance and Evaluation Report – Attachment B</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHAName:</b> SLEEPY EYEHRA		<b>Grant Type and Number</b> Capital Fund Program: MN46P06050103 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2003
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>		<input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>	<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>		
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>		<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>			
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	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	20,000.00			
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures	35,000.00			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$62,000.00 est.			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				









### Capital Fund Program 5 - Year Action Plan – Attachment C

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.

CFP5 - Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
MN060-001	Sleepy Eye Housing Authority - ROSSPARK	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

Included in attachment C	62,000	2003
Continuation of 2003 - finish 6 garages and paved area -35,000.00		
Rewire emergency pull cord to central location, rewire cable TV in midcor tap in to each apt -7,000.00	62,000	2004
replace lobby, first floor hallway and elevator floor coverings and wall coverings in lobby and first floor hallway -20,000.00		
Replacement of existing wood shakes and flat roof to new maintenance free mansard or pitch roof, air conditioning of hallways, replace roof fans/motors A/E Fees	62,000	2005
Replace carpet on 2 <sup>nd</sup> & 3 <sup>rd</sup> floor hallways, paint/wall coverings -25,000.00		
Repair/replace hallway handrails -20,000.00	62,000	2006
Replace 40 storm doors -12,000.00		
Resurface/seal caot North & South tenant parking and visitor parking, drop off lane, parking signs if needed 15,000.00		
Replacement of dining room tables and chairs -20,000.	62,000.	2007
Replacement of tile floor in dining room -10,000.00		
Wall and countertop upgrades, new commercial dishwasher in community room kitchen -8,000.00		
Replacement of copy machine/office equipment, computer equipment -9,000.		
<u>Tentative items for the next five years</u>		
Replacement of 5 refrigerators,		
Replacement of unit air conditioners (51)		
Replacement of unit ranges (49)		
Replacement of shrubbery/landscaping		
Replacement of living room furniture, floor coverings and draperies		
<b>Totalestimatedcostovertnext5years</b>	<b>\$310,000.00</b>	

**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 governing board member: 12/31/2003

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

City of Sleepy Eye Mayor  
Mr. James Broich

**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.)

All Tenants of the Sleepy Eye HRA – Ross Park apartments are part of the Resident Advisory Board

Attendance at monthly meetings varies from 15 – 20 participants monthly.

**Attachment F: Comments of Resident Advisory Board or Boards**

A request was made by some of the men in the Apartment C complex to purchase a pool table.

**Explanation of PHA Response:**

The HRA Executive Director explained that the current space in the community room area is not large enough at this time to accommodate a pool table. Ross Park had a pool table but had sold it seven years ago due to lack of space and lack of tenant interest. The Ross Park Board of Directors had discussed this request and has unanimously decided not to act on this request at this time.

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

<b>PHAName:</b> SLEEPY EYEHRA	<b>Grant Type and Number</b> Capital Fund Program: MN46P06050101 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2001
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Original Annual Statement       Reserve for Disasters/Emergencies X Revised Annual Statement (revision no: 2)  
 Performance and Evaluation Report for Period Ending: 3/31/03       Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Approved with submission of 02 Plan	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	12,800	12,800.	12,800.	12,800.
3	1408 Management Improvements				
4	1410 Administration	1,300	975.00	975.00	975.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,700	8,025.00	8,025.00	7,700.00
8	1440 Site Acquisition				
9	1450 Site Improvement	10,243	10,243.00	10,243.00	2,725.
10	1460 Dwelling Structures	30,000	30,000.00	6,000.00	0
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures	2,000	2,000.00	2,000.	0
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	\$64,043	\$64,043.	40,043.00	24,200.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

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

PHAName: SLEEPY EYE HRA		Grant Type and Number Capital Fund Program#: MN46P06050101 Capital Fund Program Replacement Housing Factor#:			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		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MN060 -001	Operations	1406		12,800	12,800.00	12,800.00	12,800.	complete
MN060 -001	Administration of Programs	1410		1,300	975.00	975.00	975.00	complete
MN060 -001	Fees & Costs	1430		7,700	8,025.00	8,025.00	7,700.	incomplete
MN060 -001	Upgrading lighting in Adult Day Activity Center	1460		1,000	1,000.00	0	0	incomplete
MN060 -001	Replacement of lighting in 2 <sup>nd</sup> and 3 <sup>rd</sup> floor hallways, repair ceiling	1460		10,000	6,518.00	0	0	incomplete
MN060 -001	Replace existing light fixtures in dining room	1460		3,000	0	0	0	Moved to 2003 CFP
MN060 -001	Replace kitchen, bathroom and bedroom light fixtures in the apt. units	1460		10,000	0	0	0	Moved to 2003 CFP
MN060 -001	Replaced door, shingle, stain, gazebo	1470		2,000	2,000.00	2,000.	0	incomplete
MN060 -001	Replaces sidewalk by garage and garbage room	1450		2,725	2,725.00	2,725.	2,725.	complete
MN060 -001	Adult Day Services 1500 sq. ft. construction project/DHS grant	1460		6,000	22,482.00	6,000.00	0	incomplete
MN060 -001	Adult Day Services 1500 sq. ft. construction project/DHS grant -site work	1450		7,518	7,518.00	7,518.00	0	incomplete
				\$64,043.	\$64,043.	\$40,043.	\$24,200.00	incomplete



Annual Statement/Performance and Evaluation Report - Attachment H					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHAName: SLEEPY EYEHRA		Grant Type and Number Capital Fund Program: MN46P06050102 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: 3/31/03		<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	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	62,809		62,809.00	0
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non Dwelling Structures				
13	1475 Non Dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	\$62,809		62,809.00	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				



