

SmallPHAPlanUpdate
AnnualPlanforFiscalYear:10 -1-2003

PHASScore=HighPerformer

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOB ECOMPLETEDINACCORDANCEWITH
INSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

PHA Plan Agency Identification

PHAName: MountainGroveHousingAuthority

PHANumber: MO060

PHAFiscalYearBeginning:(10/1/2003)

PHA Plan Contact Information:

Name: Ms. Sue Murphy

Phone: 417 -926-3142

TDD: 417 -926-3142

Email(if available): mgha@getgo.in.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

Fiscal Year 2003
[24CFRPart903.7]

i. Table of Contents

Provide a table of content 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.

Contents	Page#
Annual Plan	
i. Executive Summary (optional)	1-7
ii. Annual Plan Information	
iii. Table of Contents	
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	
2. Capital Improvement Needs	
3. Demolition and Disposition	
4. Homeownership: Voucher Homeownership Program	
5. Crime and Safety: PHDEP Plan	
6. Other Information:	
A. Resident Advisory Board Consultation Process	
B. Statement of Consistency with Consolidated Plan	
C. Criteria for Substantial Deviations and Significant Amendments	
Attachments	
<input checked="" type="checkbox"/> (mo060a01) A: Supporting Documents Available for Review	8 -11
<input checked="" type="checkbox"/> (mo060b01) B: Capital Fund Program Annual Statement	12 -15
<input checked="" type="checkbox"/> (mo060c01) C: Capital Fund Program 5 Year Action Plan	16 -20
<input type="checkbox"/> Attachment__: Capital Fund Program Replacement Housing Factor Annual Statement	
<input checked="" type="checkbox"/> (mo060d01) D: Public Housing Drug Elimination Program (PHDEP) Plan 21	-26
<input checked="" type="checkbox"/> (mo060e01) E: Resident Membership on PHA Board or Governing Body 27	
<input checked="" type="checkbox"/> (mo060f01) F: Membership of Resident Advisory Board or Boards	28
<input type="checkbox"/> Attachment__: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
<input checked="" type="checkbox"/> (mo060g01) G: Component 3, (6) De-concentration and Income mixing	29
<input checked="" type="checkbox"/> (mo060h01) H: Progress in meeting the 5-year plan Mission & Goals	30
<input checked="" type="checkbox"/> (mo060i01) I: Component 10 (B) Voluntary Conversion Initial Assessments 31	
<input checked="" type="checkbox"/> (mo060j01) J: Implementation of Public Housing/Com. Service Requirement 32	-33
<input checked="" type="checkbox"/> (mo060k01) K: Capital Funds 2000 Performance and Evaluation Report	34-41
<input checked="" type="checkbox"/> (mo060l01) L: Capital Funds 2001 Performance and Evaluation Report	42-46
<input checked="" type="checkbox"/> (mo060m01) M: Capital Funds 2002 Performance and Evaluation Report	47-52
<input checked="" type="checkbox"/> (mo060n01) N: Annual Plan Meeting Notes	53

ii. Executive Summary

[24CFRPart903.79(r)]

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

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

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The PHA has not made nor intend to make any major policy or program changes in 2003. Local preferences were established and will not change, rent policies remain the same, community service policy parameters were included in our lease and ACOP & our Public Housing Pet Policy were implemented. Community Service requirements have been implemented May 1, 2003 per HUD guidelines.

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? \$ 219,993.

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

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: (DD/MM/YY)
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 24CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)

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

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

- Establishing a minimum 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 PHA 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 PHA PHA Plan is attached at Attachment _____

6. Other Information

[24CFR Part 903.79(r)]

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

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

2. If yes, the comments are attached at Attachment (Filename) mo060n01

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 _____.

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 _N_.

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 Missouri

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:

The State of Missouri's plan has established the following priorities to address housing needs, which are also the priorities of the Public Housing Authority:

- Maintain its supply of decent, safe and sanitary rental housing that is affordable for low, very low and moderate income families.
- The Modernization of PHA housing for occupancy by low and very low income families.

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:

The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:

- Change to rent or admissions policies or organization of the waiting list;
- Addition of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and
- Any change with regard to demolition or disposition, designation, home ownership programs or conversion activities.

A. Significant Amendment or Modification to the Annual Plan:

The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification are as follows:

- Change to rent or admissions policies or organization of the waiting list;
- Addition of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and
- Any change with regard to demolition or disposition, designation, home ownership programs or conversion activities.

Attachment A

Supporting Documents Available for Review

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

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	A&O Policy	Determination
Yes	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
Yes	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
Yes	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
Yes	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
Yes	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
Yes	Any required policies governing any Section 8 special housing types <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
Yes	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
Yes	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
Yes	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
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
Yes	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing § 504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 - 52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
Yes	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
Yes	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
Yes	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; 	Annual Plan: Safety and Crime Prevention

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	<ul style="list-style-type: none"> · 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. 	
Yes	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
Yes	The result 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 result of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (List individually; use as many lines as necessary)	(Specify as needed)

AttachmentB:

AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary					
PHAName:MountainGroveHousingAuthority		GrantTypeandNumber CapitalFu ndProgram: 2003 CapitalFundProgramMO36P060501 -03 ReplacementHousingFactorGrantNo:		FederalFYofGrant: 2003	
<input checked="" type="checkbox"/> OriginalAnnualStatement (revisionno:) <input type="checkbox"/> ReserveforDisasters/Emergencies <input type="checkbox"/> RevisedAnnualStatement <input type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: <input type="checkbox"/> FinalPerform anceandEvaluationReport					
Lin e No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	32,843			
3	1408ManagementImprovements				
4	1410Administration	600.			
5	1411Audit				
6	1415liquidatedDamages				
7	1430FeesandCosts	8,093			
8	1440SiteAcquisition				
9	1450SiteImprovement	56,357			
10	1460DwellingStructures	67,100			
11	1465.1DwellingEquipment — Nonexpendable	15,000			
12	1470NondwellingStructures	40,000			
13	1475NondwellingEquipment				
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1498ModUsedforDevelopment				
19	1502Cont ingency				

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

PHAName: Mountain Grove Housing Authority	Grant Type and Number Capital Fund Program: 2003 Capital Fund Program MO36P060501 -03 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement (revision no:) Reserve for Disasters/Emergencies Revised Annual Statement
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
20	Amount of Annual Grant: (sum of lines 19)	-	219,993.00		
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
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAN Name: Mountain Grove Housing Authority		Grant Type and Number Capital Fund Program#: 2003 Capital Fund Program MO36P060501 -03 Replacement Housing Factor#:			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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Operations	A. Housing Operations	1406	1	32,843				
HA Wide	Administration Costs	1410	1	600.				
HA Wide	Fees & Costs	1430	1	8,093				
MO60 -2	Replace Refrigerators	1465	25 Units	15,000				
HA Wide Non - Dwelling Structure	C. Construct Maintenance Garage	1470	1 project	40,000				
MO60 -3	27 - Vanities & Marble Tops	1460	27 Units	8,100				
MO60 -3	E. Replace Kitchen Cabinets	1460	27 Units	59,000				
MO60 -1	D. Replace & Repave Parking Lot	1450	1	56,357				
GRAND TOTAL				\$219,993.				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHAName: Mountain Grove Housing Authority	Grant Type and Number Capital Fund Program#: MO36P060501-03 Capital Fund Program Replacement Housing Factor#:	Federal FY of Grant: 2003
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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	
HAWIDE	3/31/05			9/30/05			
60-1	3/31/05			9/30/05			
60-4	3/31/05			9/30/05			

Attachment C: 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.

CFP5 -Year Action Plan FYE2 003		
<input checked="" type="checkbox"/> Original Statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
MO060	Mountain Grove Housing Authority (PHA) WIDE	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
MO60 -1 Replace & Repave Parking Lots (1450)	56,357	FYE2003 StartDate:
MO60 -1 Construct Maintenance Garage (1470)	40,000	
HA Wide Administration Costs (1410)	600	
MO60 -2 Replace Refrigerators 25 -Units (1465)	15,000	
MO60 -3 Replace Kitchen Cabinets 27 -Units (1460)	59,000	
MO60 -4	0	
HA Wide Operations (1406)	32,843	
HA Wide Fees & Costs (1430)	8,093	
MO60 -3 Vanities & Marble Tops 27 Units (1460)	8,100	
Total estimated cost	219,993	

AttachmentC:CapitalFundProgram5 -YearActionPlan

CFP5 -YearActionPlanFYE2004		
<input checked="" type="checkbox"/> Originalstatement <input type="checkbox"/> Revisedstatement		
Development Number	DevelopmentName (orindicatePHA w ide)	
MO060	MountainGroveHousingAuthority(PHA)WIDE	
DescriptionofNeededPhysicalImprovementsorManagement Improvements	EstimatedCost	PlannedStartDate (HAFiscalYear)
MO60 -1ReplaceWindows40 -Units(1470)	115,000	FYE2004
MO60 -2ReplaceCookingStove s25 -Units(1465)	10,000	
MO60 -3ResurfaceparkingLot(1450)	25,000	
MO60 -4	0	
HAWideOperations(1406)	38,843	
HAWideNon -Dwelling/Landscaping(1450)	14,357	
HAWideReplaceMaintenanceVehicle -1(1475)	16,793	
Totalestimatedcost	219,993	

AttachmentC:CapitalFundProgram5 -YearActionPlan

CFP5 -YearActionPlanFYE2005			
<input checked="" type="checkbox"/> Originalstatement <input type="checkbox"/> Revisedstatement			
Development Number	DevelopmentName (ori ndicatePHA wide)		
MO060	MountainGroveHousingAuthority(PHA)WIDE		
DescriptionofNeededPhysicalImprovementsorManagement Improvements	EstimatedCost	PlannedStartDate (HAFiscalYear)	
MO60 -1PurchaseNewComputerSystem(1475)	31,603	FYE2005	
MO60 -1Replac eExteriorDoors(1460)	17,500		
MO60 -1ReplaceWaterHeaters136Units(1460)	57,800		
MO60 -2	0		
MO60 -3	0		
MO60 -4ReplaceKitchenCabinets24Units(1460)	59,400		
HAWideOperations(1406)	16,897		
HAWideNon -DwellingReplaceMaintenanceVehicle -1(1475)	20,000		
HAWideCapitalFundCoord inator(1410)	16,793		
Totalestimatedcost	219,993		

AttachmentC:CapitalFundProgram5 -YearActionPlan

CFP5 -YearActionPlanFYE2006		
<input checked="" type="checkbox"/> Originalstatement <input type="checkbox"/> Revisedstatement		
Development Number	DevelopmentName (orindicatePHAwide)	
MO060	MountainGroveHousingAuthority(PHA)WIDE	
DescriptionofNeededPhysicalImprovementsorManagement Improvements	EstimatedCost	PlannedStart Date (HAFiscalYear)
MO60 -1ReplaceShowerEnclosures(1460)	20,000	FYE20 06
MO60 -1ConstructUtilityRoomonApts.(1460)	71,500	
MO60 -1InstallExhaustfans(1460)	1,000	
MO60 -2	0	
MO60 -3ReplaceKitchenSinks(1460)	1,300	
MO60 -3Landscaping(1450)	1,000	
MO60 -4InstallA/Cin(24-Units)(1460)	59,728	
HAWideOperations(1406)	20,672	
HAWideAdminExp.(1408)	8,000	
HAWideNon -DwellingReplaceMaintenanceVehicle -1(1475)	20,000	
HAWideCapitalFundCoordinator(1410)	16,793	
Totalestimatedcost	219,993	

AttachmentC:CapitalFundProgram5 -YearActionPlan

CFP5 -YearActionPlanFYE2007		
<input checked="" type="checkbox"/> Originalstatement <input type="checkbox"/> Revisedstatement		
Development Number	DevelopmentName (orindicatePHAwide)	
MO060	MountainGroveHousingAuthority(PHA)WIDE	
DescriptionofNeededPhysicalImprovementsorManagement Improvements	EstimatedCost	PlannedStartDate (HAFiscalYear)
MO60 -1InstallHeating&AirConditionSystem(40Units) (1460)	97,028	FYE2007
MO60 -2	0	
MO60 -3	0	
MO60 -4Re -roofBld.1Project(1460)	65,000	
HAWideOperations(1406)	41,172	
HAWideNon -Dwelling HAWideCapitalFundCoordinator(1410)	16,793	
Totalestimatedcost	219,993	

AttachmentD:

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. This summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEPT Target Area (development or site where activities will be conducted), the total number of units in each PHDEPT 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.

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

F. Duration of Program

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

12 Months _____ **18 Months** _____ **24 Months** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs havenot been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balance should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Dates should include any HUD -approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding 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						
FY 1998						
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.

N/A

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY ____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TAMatch	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise — not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

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

9116 - Gun Buyback TAMatch					Total PHDEP Funding: \$		
Goal(s)							
Objectives							

ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

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

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

9140 – VoluntaryTenantPatrol					TotalPHDEPFundin g:\$		
Goal(s)							
Objectives							

ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9150 - PhysicalImprovements					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9160 -DrugPrevention					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9170 -DrugIntervention					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							

ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9180 -DrugTreatment					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9190 -OtherProgramCosts					TotalPHDEPFunds:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceI ndicators
1.							
2.							
3.							

Required Attachment E: 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: Mr. Floyd Walls

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

Elected

Appointed

C. The term of appointment is (include the date term expires): July 17, 2001 – July 17, 2004

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: Dave Craig, July 2003

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

Mr. Jake Slayton, Mayor of the City of Mountain Grove

Required Attachment F: 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.)

Mr. Lee Cooley
Ms. Maggie Cooley

Required Attachment G: Component 3, (6) De-concentration 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

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:

Development Name	Number of Units	Explanation (if any) [See step 4 at 903.2©(1)(iv)]	Deconcentration policy (if no Explanation) [see step 5 at 903.2©(1)(v)]

Attachment H: Progress in Meeting the 5 -Year Plan Mission and Goals

The PHA has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination through the utilization of previous Capital funds and the proper application of four public housing policies.

We are continuing to address public housing vacancies very aggressively and our PHAS scores indicate that the operational issues are being addressed.

Capital funds have been utilized to provide modernization of our property and our FYE 2003 application will continue that effort.

The implementation of a family pet policy has provided the opportunity for residents to enjoy pets within a regulated environment. In addition, PHA has implemented a Community Service Program that began MAY 1, 2003 supplying notification and discussion with the residents and each adult member of every household that the policy will cover.

We are confident that the PHA will be able to continue to meet and accommodate all our goals and objectives for the FYE 2003.

Attachment I: Component 10(B) Voluntary Conversion Initial Assessments:

1. How many of the PHA's developments are subject to the Required Initial Assessments? **Three**
2. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (E.g. elderly and/or disabled developments not general occupancy projects)? **One**
3. How many Assessments were conducted for the PHA's covered developments? **Three**
4. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: **None**

Development	Number of Units

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

Not Applicable

Attachment J: Implementation of Public Housing Resident Community Service Requirement

PHA Responsibilities

1. Eligibility Determination

The PHA will review every existing resident file to determine each Adult member's status regarding community service per the following guidelines:

- As family status is determined a letter will be sent to each adult member of that family to notify them of their status (exempt or non-exempt) and explaining the steps they should immediately proceed with through their housing representative.
- The PHA will include a copy of the general information section of its Community Service Policy and a listing of PHA and/or third party work activities that are eligible for certification of the community service requirement.
- At the scheduled meeting with each non-exempt adult family member, not only will the parameters of the community service requirement be reviewed but also the PHA and/or third party work activities will be identified and selected for compliance with the annual obligation for certification at their annual lease renewal date.

1. Work Activity Opportunities

The Housing Authority has elected to provide to those adult family members that must perform community service the opportunity to select either PHA sanctioned work activities or Third Party certifiable work items. The administration of the certification process would be:

- **PHA Provided Activities:**

When qualifying activities are provided by the Authority directly, designated Authority employees(s) shall provide signed certification that the family member has performed the proper number of hours for these selected service activities.

- **Third Party Certification**

When qualifying activities are administered by any organization other than PHA, the family member must provide signed certification (see III A(c)) to the Authority by such third party organization that said family member has performed appropriate service activities for the required hours.

- **Verification of Compliance**

The Authority is required to review family compliance with service requirement, and must verify such compliance annually at least thirty (30) days before the end of the twelve (12) month lease term (annual re-certification time). Evidence of service performance and or exemption must be maintained in the participant files.

- **Notice of Noncompliance**

If the Authority determines that a family member who is subject to fulfilling a service requirement, but who has violated the family's obligation (a noncompliant resident) the Authority must notify the specific family member of this determination.

The Notice of Noncompliance must:

1. Briefly, describe the noncompliance (in adequate number of hours).
2. State that the Authority will not renew the lease at the end of the twelve (12) month lease term unless:
 - The resident or any other noncompliant adult family member enters into a written agreement with the Authority to cure the noncompliance and in fact perform to the letter of agreement.
 - Or
 - The Family provides written assurance satisfactory, to the PHA that the resident or other noncompliant adult member no longer resides in the unit.

This Notice of Noncompliance must also state that the resident may request a grievance hearing and that the resident may exercise any available judicial remedy to seek timely redress for the Authority's non-renewal of the lease because of a noncompliance determination.

- **Resident agreement to comply with service requirement.**

The written agreement entered into with the Authority to cure the service requirement noncompliance by the resident and any other adult family member must:

- Agree to complete additional service hours needed to make up the total number of hours required over the twelve (12) month term of the new lease.
- State that all other members of the family subject to the service requirement are in current compliance with the service requirement or are no longer residing in the unit.

The Housing Authority has developed a list of Agency certifiable and or third party work activities of which each non-exempt adult family member can select to perform their individual service requirement.

ATTACHMENTK:CAPITALFUND2000

AnnualStatement/PerformanceandEvaluationReport
ComprehensiveGrantProgram(CGP)

PartI:Summary

**U.S.DepartmentofHousing
andUrbanDevelopment**
OfficeofPublicandIndian
Housing

OMBApprovalNo.2577 -0157
(Exp.3/31/2002)

HAName	ComprehensiveGrantNumber	FFYofGrantApproval
MOUNTAINGROVEHOUSING AUTHORITY	MO36P06050100	2000
	3	

LineNo.	SummarybyDevelopment Account	TotalEstimatedCost		TotalActualCost2	
		Original	Revised1	Obligated	Expended
1	TotalNon -CGPFunds				
2	1406Operations(Maynotexceed10%offline19)	44,100.00	44,100.00	44,100.00	44,100.00
3	1408ManagementImprovements	-	-	-	-
4	1410Administration	14,713.00	2,271.33	2,271.33	2,271.33
5	1411Audit	-	-	-	-
6	1415LiquidatedDamages	-	-	-	-
7	1430FeesandCosts	-	-	-	-
8	1440SiteAcquisition	-	-	-	-
9	1450SiteImprovement	8,000.00	5,404.93	5,404.93	5,404.93
10	1460DwellingStructures	82,328.00	113,596.68	113,596.68	113,871.68
11	1465.1DwellingEquipment -Nonexpend able	-	-	-	-
12	1470NondwellingStructures	-	-	-	-
13	1475NondwellingEquipment	71,700.00	55,468.06	55,468.06	55,193.06
14	1485Demolition	-	-	-	-
15	1490Replacemen tReserve	-	-	-	-
16	1492MovingtoWorkDemonstration	-	-	-	-
17	1495.1RelocationCosts	-	-	-	-
18	1498ModUsedforDevelopment	-	-	-	-

19	1502Contingency(maynotexceed8%ofline20)	-	-	-	-
20	AmountofAnnualGrant(Sumoflines2 -19)	\$220,841.00	\$220,841.00	\$220,841.00	\$220,841.00
21	Amountofline19RelatedtoLBPActivities	-	-	-	-
22	Amountofline19RelatedtoSection504Compliance	-	-	-	-
23	Amountofline19RelatedtoSecurity	-	-	-	-

Part II: Supporting Pages

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
HA-Wide	Housing Operations	1406.00	1	44,100.00	44,100.00			
HA-Wide	MRG Consultant Expense	1406.00	1			425.00	425.00	Completed
HA-Wide	Public Housing Add Openings	1406.00	2			279.13	279.13	Completed
HA-Wide	Computer Training Lindsey	1406.00	1			2,406.73	2,406.73	Completed
HA-Wide	Computer Training Lindsey	1406.00	1			3,253.96	3,253.96	Completed
HA-Wide	Operations	1406.00	1			37,735.18	37,735.18	Completed
HA-Wide	Audit Bid Advertisement	1410.00	1			14.70	14.70	Completed
MO-60-3	Rekey 27 Mailbox locks	1410.00	27			304.00	304.00	Completed
HA-Wide	MGMTRes.Submit agency plan	1410.00	1			725.00	725.00	Completed
HA-Wide	Salary & Benefits of Staff Involved with Capital Grants	1410.00	1	14,713.00	2,271.33			
HA-Wide	Add for Shingles Bid	1410.00	1			36.76	36.76	Completed
MO-60-3	Advertisement Window Bid	1410.00	1			28.18	28.18	Completed
HA-Wide	Five yr. Annual Plan Notice	1410.00	1			20.83	20.83	Completed
HA-Wide	Sailor Khan FYE Shipping Exp.	1410.00	1			44.65	44.65	Completed
HA-Wide	MGMTR Resource Group	1410.00	1			700.00	700.00	Completed
HA-Wide	Roof Bids Notice	1410.00	1			34.30	34.30	Completed
HA-Wide	Energy Audit costs	1410.00	1			362.91	362.91	Completed

Part II: Supporting Pages

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
MO-60-1	Replace Sewer Lines	1450.00	50LF	1,000.00	-			Removed
MO-60-1	Install Development Sign	1450.00		15,000.00	-			Completed
MO-60-1	Sign Purchase Cost	1450.00	1		1,060.00	1,060.00	1,060.00	Completed
MO-60-1	and installation/Tree costs	1450.00			194.30	194.30	194.30	Completed
MO-60-1	Sign Labor Maintenance	1450.00			394.30	394.30	394.30	Completed
MO-60-1	Install Parking Blocks	1450.00	LS	2,000.00	-			Removed
MO-60-1	Remove Trees, Trim Trees	1450.00	6		700.00	700.00	700.00	Completed
MO-60-1	Backhoe Work & Plumbing	1450.00			506.73	506.73	506.73	Completed
HA-WIDE	Repair Roof & Install Fascia	1450.00			800.00	800.00	800.00	Completed
HA-WIDE	Tree Stumps removed/cleanup	1450.00	31		900.00	900.00	900.00	Completed
HA-WIDE	Purchase Bradford Pear Tree	1450.00	2		70.00	70.00	70.00	Completed
HA-WIDE	Bricks for Base under sign	1450.00	72		255.60	255.60	255.60	Completed
	72 @ 3.550 - 2 pallets 12.00 ea.	1450.00	2		24.00	24.00	24.00	Completed
MO-60-1	Authority Sign Light Repaired	1450.00	1		25.00	25.00	25.00	Completed
MO-60-1,2	Buddy's Tree Removal	1450.00	6		475.00	475.00	475.00	Completed

Part II: Supporting Pages

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
MO-60-1	Replace Roof	1460.00	1 bld	27,800.00	11,466.00	11,466.00	11,466.00	Completed
MO-60-3	Replace Floors at Heritage	1460.00	1 bld.		55,427.64	55,427.64	4,900.00	Completed
MO-60-3	Heights Bld.	1460.00	1 bld.				39,758.40	Completed
		1460.00	1 bld				10,500.00	Completed
MO-60-3		1460.00	1 bld				259.00	Completed
		1460.00	1 bld				1,499.62	Completed
MO-60-1	Cover Siding Under Window	1460.00	1 Bld	17,500.00	5,375.00	5,375.00	3,885.62	Completed
MO-60-1,3	Replace Laundry Room Equipment/Refrid.	1460.00		2,000.00	-			removed
MO-60-1	Install Garage Door & Lift	1460.00	1 Bld.		325.00	325.00	325.00	Completed
MO-60-1,3	Install Exterior Doors			2,000.00				Completed
	<u>40 Exterior Doors @ 150.00 each</u>	1460.00	40					
	54 Ext./storage Drs. @ 142.50	1460.00	54					
	Supplies, calk or other Hrdw.	1460.00	1 Bld.					
MO-60-1	Locksets for doors 91 @ 22.65	1460.00	91		2,061.59	2,061.59	2,061.59	Completed
MO-60-1,3	Install Cable TV	1460.00	1 Sys	10,000.00	1,016.45	1,016.45	1,016.45	Completed
MO-60-1	Replace Community Room Floor	1460.00	LS	2,528.00	-			
MO-60-3	Replace Windows	1460.00	27 Units	22,500.00	35,000.00	35,000.00	35,000.00	Completed
MO-60-4	Remove windows & Make opening for garage doors Make driveway/concrete	1460.00	1		3,200.00	3,200.00	3,200.00	Completed

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
HA-Wide	Replace Maintenance Vehicle	1475.00	1	147,000.00	9,862.70	9,862.70	9,862.70	Completed
HA-Wide	New Truck Box 2001 Truck	1475.00	1		229.98	229.98	229.98	Completed
HA-Wide	Upgrade FM Radio	1475.00	1 Sys	5,000.00	-			
HA-Wide	Replace Maintenance Equip.	1475.00	1	66,700.00				
HA_Wide	New Yazzo Lawn Tractor	1475.00	1	19,000.00	5,800.00	5,800.00	5,800.00	Completed
MO-60-3	Replace Laundry Room Equip.	1475.00	1-set	2,000.00	-			
HA-Wide	Repair Lawn Tractor Motor	1475.00	1		1,214.79	1,214.79	1,214.79	Completed
HA-Wide	Purchase New Co. Car	1475.00	1		11,259.00	11,259.00	11,259.00	Completed
HA-Wide	Install Crewse Control /Car	1475.00	1		229.00	229.00	229.00	Completed
HA-Wide	Install Tommy Gates Maint.	1475.00	2		2,990.00	2,990.00	2,990.00	Completed
HA-Wide	Purchase Tags for Autos	1475.00	2		42.00	42.00	42.00	Completed
HA-Wide	Re-imburement of Salaries	1475.00			336.24	336.24	336.24	Completed
HA-Wide	Maint. Work Washer/Dryer	1475.00			8.64	8.64	8.64	Completed
MO60-1	Purchase New Chairs & Racks for the Community Room 80@22.50-2@207.50	1475.00			2,265.00	2,265.00	2,265.00	Completed
MO-60-1	Welding Materials	1475.00	3		73.72	73.72	73.72	Completed

Part II: Supporting Pages

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
MO-60-1,2,3	Replace Laundry Room Equip 5 Washer @ 529 Each 5 Dryers @ 359 Each 5 Refrig. @ 370 Each	1475.00	5 Sets		6,290.00	6,290.00	6,290.00	Completed
MO-60-1,3	Coin Boxes, Laundry Equip. Electric Cords & shipping	1475.00	10		316.06	316.06	316.06	Completed
HA-Wide	Replace Maint. Vehicle F-150 Ford 2x4 2002 Series	1475.00	1		11,335.00	11,335.00	11,335.00	Completed
HA-Wide	8'2x10 galv.	1475.00	1		415.20	415.20	415.20	Completed
MO-60-4	8x7 DC 138PW Garage Door	1475.00	1		340.00	340.00	340.00	Completed
	10x7 DC 138PW Garage Door	1475.00	1		418.00	418.00	418.00	Completed
HA-Wide	John Deere Tractor Repaired mod. 332 Alternator/ & parts	1475.00	1		672.73	672.73	672.73	Completed
HA-Wide	10" Shredder Industrial streng.	1475.00	1		1,095.00	1,095.00	1,095.00	Completed
Signature of Executive Director			Date	Signature of Public Housing Director			Date	
X			04/09/03	X				

Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)	
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)		
HA-Wide	3/31/2002		3/31/2002	9/30/2003				
Signature of Executive Director X				Date 04/15/03		Signature of Public Housing Director X		Date

1 To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

2 To be completed for the Performance and Evaluation Report.

ATTACHMENT L: CAPITAL FUND PROGRAM 2001

Annual Statement/Performance and Evaluation Report

U.S. Dept. Of

OMB Approval No. 2577 -

Comprehensive Grant Program (CGP)

Part I: Summary

HUD

0157

(Exp. 3/31/2002)

Office of Public and Indian Housing

HAName		Comprehensive Grant Number	FFY of Grant Approval
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Final Performance and Evaluation Report <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number 3 <input type="checkbox"/> Performance and Evaluation Report for Program Year Ending		MO36P06050101	2001
Mountain Grove Housing Authority			

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost 2	
		Original	Revised 1	Obligated	Expended
1	Total Non -CGP Funds				
2	1406 Operations (May not exceed 10% of line 19)	42,750.00	50,750.00	50,750.00	50,750.00
3	1408 Management Improvements	-	-	-	-
4	1410 Administration		-	-	-
5	1411 Audit	-	-	-	-
6	1415 Liquidated Damages	-	-	-	-
7	1430 Fees and Costs	-	17,650.00	17,650.00	8,650.00
8	1440 Site Acquisition	-	-	-	-
9	1450 Site Improvement	-		-	-
10	1460 Dwelling Structures	182,500.00	123,198.98	123,198.98	123,198.98
11	1465.1 Dwelling Equipment -Nonexpendable	-	-	-	-
12	1470 Nondwelling Structures	-	33,651.02	33,651.02	-
13	1475 Nondwelling Equipment	-	-	-	-
14	1485 Demolition	-	-	-	-

Small PHA Plan Update
Table Library

15	1490ReplacementReserve	-	-	-	-
16	1492MovingtoWorkDemonstration	-	-	-	-
17	1495.1RelocationCosts	-	-	-	-
18	1498ModUsedforDevelopment	-	-	-	-
19	1502Contingency(maynotexceed8%ofline20)	-	-	-	-
20	AmountofAnnualGrant(Sumoflines2-19)	\$225,250.00	\$225,250.00	\$225,250.00	\$182,598.98
21	Amountofline19RelatedtoLBPActivities	-	-	-	-
22	Amountofline19RelatedtoSection504Compliance	-	-	-	-
23	Amountofline19RelatedtoSecurity	-	-	-	-
24	Amount ofline19RelatedtoEnergyConversation Measures	-	-	-	-
SignatureofExecutive Director		Date	SignatureofPublicHousingDirector		Date
X		04/15/03X			

SmallPHAPlanUpdate
TableLibrary

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
HA-Wide MO60 -1	Housing Operations	1406.00	1	42,750.00	50,750.00	50,750.00	50,750.00	Complete
	Architect Fees & Costs	1430.00	1		9,000.00	9,000.00		In Process
HA-Wide	Architect Fees & Costs	1430.00	1		8,650.00	6,488.00	6,488.00	Complete
		1430.00	1			962.00	962.00	Complete
		1430.00	1			336.00	336.00	Complete
		1430.00	1			744.00	744.00	Complete
		1430.00	1			120.00	120.00	Complete
MO60 -2	Replace Apt. Floors	1460.00	27	182,500.00	123,198.98			
		1460.00	1 pmt			7,489.38	7,489.38	Complete
		1460.00	1 pmt			100,196.10	100,196.10	Complete
		1460.00	1 Final Pmt			15,513.50	15,513.50	Complete
Signature of Executive Director			Date	Signature of Public Housing Director			Date	
X			04/15/03	X				

Small PHA Plan Update
 Table Library

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
MO60 -1	Renovation Work For Office	1470.00	1		33,651.02	33,651.02		In Process
Signature of Executive Director			Date	Signature of Public Housing Director			Date	
			04/11/03					

Small PHA Plan Update
 Table Library

Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target
	Original	Revised(1)	Actual(2)	Original	Revised(1)	Actual(2)	
HA-Wide	9/30/2003			9/30/2004			
Signature of Executive Director				Date		Signature of Public Housing Director	
X				04/11/03			
						X	

ATTACHMENTM:CAPITALFUNDPROGRAM2002

AnnualStatement/PerformanceandEvaluationReport
ComprehensiveGrantProgram(CGP)

PartI:Summary

**U.S.DepartmentofHousing
andUrbanDevelopment**
OfficeofPublicandIndian
Housing

OMBApprovalNo.2577 -0157
(Exp.3/31/2002)

HAName	ComprehensiveGrantNumber	FFYofGrantApproval
MountainGroveHousingAuthority	MO36P06050102	2002

[Redacted]

LineNo.	SummarybyDevelopment Account	TotalEstimatedCost		TotalActualCost2	
		Original	Revised1	Obligated	Expended
1	TotalNon -CGPFunds				
2	1406Operations(Maynotexceed10%offline19)	57,965.00	-	30,000.00	30,000.00
3	1408ManagementImprovements	-	-	-	-
4	1410Administration	-	-	-	-
5	1411Audit	-	-	-	-
6	1415LiquidatedDamages	-	-	-	-
7	1430FeesandCosts	-	-	-	-
8	1440Site Acquisition	-	-	-	-
9	1450SiteImprovement	20,628.00	-	-	-
10	1460DwellingStructures	55,400.00	-	-	-
11	1465.1DwellingEquipment -Nonexpendable	-	-	-	-
12	1470NondwellingStructures	86,000.00	-	-	-
13	1475NondwellingEquipment	-	-	-	-
14	1485Demolition	-	-	-	-
15	1490ReplacementReserve	-	-	-	-
16	1492MovingtoWorkDemonstration	-	-	-	-
17	1495.1RelocationCosts	-	-	-	-
18	1498ModUsedforDevelopment	-	-	-	-
19	1502Contingency(maynotexceed8%offline20)	-	-	-	-
20	AmountofAnnualGrant(Sumoflines2 -19)	\$219,993.00	\$ -	\$ 30,000.00	\$30,000.00

SmallPHAPlanUpdate
TableLibrary

21	Amountofline19RelatedtoLBPActivities	-	-	-	-
22	Amountofline19RelatedtoSection504Compliance	-	-	-	-
23	Amountofline 19RelatedtoSecurity	-	-	-	-
24	Amountofline19RelatedtoEnergyConversation Measures	-	-	-	-
SignatureofExecutiveDirector		Date	SignatureofPublicHousingDirector		Date
X		04/10/03	X		

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work(2)	
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)		
HA-Wide	Housing Operations	1406.00		57,965.00		30,000.00	30,000.00		
MO60 -1	Replace Sidewalks	1450.00	LS	20,628.00					
MO60 -1	Replace Light fixtures	1460.00	60EA	6,620.00					
MO60 -2	Replace Light Fixtures	1460.00	25EA	2,750.00					
MO60 -2	Replace Windows	1460.00	25Units	5,400.00					
MO60 -2	Replace Front Door Siding	1460.00	25Units	10,000.00					
Signature of Executive Director				Signature of Public Housing Director				Date	
X				X				04/10/03	

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
MO60 -3	Upgrade Elevator	1460.00	1 Car	25,000.00				
MO60 -3	Replace Light Fixtures	1460.00	27 EA	2,980.00				
MO60 -4	Replace Light Fixtures	1460.00	24 EA	2,650.00				
Signature of Executive Director			Date	Signature of Public Housing Director			Date	
X			04/10/03	X				

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
MO60 -1	Renovate Administration Offices	1470.00	LS	60,000.00				
MO60 -3	Upgrade Community Room	1470.00	LS	26,000.00				
Signature of Executive Director				Signature of Public Housing Director				Date
X				X				04/10/03

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
HAWIDE	6/12/2004			9/30/2005			
Signature of Executive Director			Date		Signature of Public Housing Director		Date
X			04/15/03		X		

1 To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

2 To be completed for the Performance and Evaluation Report.

**Housing Authority Of The City Of Mountain Grove
301 West First Street
Mountain Grove, Missouri 65711
Phone: 417 -926-3142
Fax: 417 -926-3143**

Attachment N: Annual Plan Meeting Notes

The Annual Plan meeting was held February 21, 2003 with twenty (20) Tenants and two (2) Employees in attendance. Many of the items the tenants suggested to improve are in the Capital Fund plans in the next five-years, therefore we are meeting the needs and improvements for the tenants. No changes to the annual plan are needed at this time.