

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

Small PHA Plan Update
Annual Plan for Fiscal Year: **2003**

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: New Randleman Housing Authority

PHA Number: NC063

PHA Fiscal Year Beginning: 07/2003

PHA Plan Contact Information:

Name: Landis Hall

Phone: 336-498-7686

TDD: 336-498-7686

Email (if available): landishall@northstate.net

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

PHA Programs Administered:

- Public Housing and Section 8 Section 8 Only Public Housing Only

**Annual PHA Plan
Fiscal Year 2003**

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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<input type="checkbox"/> Attachment : Public Housing Drug Elimination Program (PHDEP) Plan	
<input checked="" type="checkbox"/> Attachment D : Resident Membership on PHA Board or Governing Body	
<input checked="" type="checkbox"/> Attachment E : Membership of Resident Advisory Board or Boards	
<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)	
Attachment F :Deconcentration and Income Mixing Questions	
Attachment G :Brief Statement of Progress in Meeting 5- Year Plan Mission and Goals	
Attachment H: Voluntary Conversion Questions	

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

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

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

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

There have been no changes in policies or programs for year 2003, other than those required by regulations such as additional attachments.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. X 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? \$ 138,841.00

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

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

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

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

1. Yes X 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

[24 CFR Part 903.7 9 (k)]

A. Yes X No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

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

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

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources

- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

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

- A. Yes 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

[24 CFR Part 903.7 9 (r)]

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

- 1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
- 2. If yes, the comments are Attached at Attachment (File name)
- 3. In what manner did the PHA address those comments? (select all that apply)
 - The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 - Yes No: below or
 - Yes No: at the end of the RAB Comments in Attachment _____.
 - Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.
 - Other: (list below)

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 North Carolina)

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)

To provide safe, sanitary and decent housing to prospective residents. To work with other housing agencies to provide economic opportunities for prospective residents, and to work with other housing agencies within the jurisdiction.

Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

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

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

To provide safe, sanitary and decent housing. To assist the PHA in providing economic opportunities to its residents and to work with other housing agencies to provide housing to prospective, eligible residents.

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:

B. Significant Amendment or Modification to the Annual Plan:

**New Randleman Housing Authority
Definition of “Substantial Deviation” and
“Significant Amendment or Modification”**

The New Randleman Housing Authority, to meet the requirement of Final Rule 903.7(r) and PIH 99-51, pertaining to “Substantial Deviation” and “Significant Amendment or Modification,” offering the following:

- A. A substantial deviation from its Five-Year Plan; and a significant amendment or modification to its Five-Year Plan and Annual Plan.
- B. Changes to rent or admissions policies or organization of the waiting list.
- C. Additions of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund.
- D. Additions of new activities not included in the current PHDEP Plan.
- E. Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities.

Any substantial deviation from the Mission Statement and/or Goals and Objectives presented in the Five-Year Plan that cause changes in the services provided to residents or significant changes to the Agency’s financial situation will be documented in subsequent Agency Plans.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements offered by HUD.

Required Attachment A:

Supporting Documents Available for Review

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

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency

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

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

PHA Name: New Randleman Housing Authority	Grant Type and Number Capital Fund Program: NC19P06350102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement Reserve for Disasters/ Emergencies X Revised Annual Statement (revision no: #1)
 Performance and Evaluation Report for Period Ending:12/31/2002 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	2,000.00	2,000.00	2,000.00	
3	1408 Management Improvements				
4	1410 Administration	5,000.00	5,000.00	5,000.00	
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	18,000.00	15,000.00	15,000.00	
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000.00	0.00		
10	1460 Dwelling Structures	103,357.00	116,841.00		
11	1465.1 Dwelling Equipment—Nonexpendable	4,000.00	0.00		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	1,484.00	0.00		
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)	\$138,841.00	\$138,841.00	\$22,000.00	0.00
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				

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

PHA Name: New Randleman Housing Authority	Grant Type and Number Capital Fund Program: NC19P06350102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement
 Reserve for Disasters/ Emergencies X Revised Annual Statement (revision no: #1)
 Performance and Evaluation Report for Period Ending: 12/31/2002
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

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

PHA Name: New Randleman Housing Authority		Grant Type and Number Capital Fund Program #: NC19P06350102 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
NC 63-1	Operations:	1406		2,000.00	2,000.00	2,000.00		Obligated
NC 63-1	Administration:							
	Salary/Benefits	1410		5,000.00	5,000.00	5,000.00		Obligated
NC 63-1	Fees & Costs:							
	A/E Services	1430		15,000.00	15,000.00	15,000.00		Obligated
	Asbestos Testing for Floor Tile	1430		3,000.00	0.00			Move to 1460 A/C
				18,000.00	15,000.00	15,000.00		
NC 63-1	Site Improvements	1450						
	Sidewalk repair & parking pads			5,000.00	0.00			Move to 1460 A/C
				5,000.00				
NC 63-1	Dwelling Structures:	1460						

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

PHA Name: New Randleman Housing Authority		Grant Type and Number Capital Fund Program #: NC19P06350102 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	Renovations to 2 nd floor baths, shower surrounds, new sheet vinyl floor over waterproofing sealant at walls, commodes, etc., new exhaust fans, vanities, etc. – repair floor as needed, will be rotten joist in some cases. New tubs, sinks (full bath mod) check water lines and sewer lines – repair as needed, check for rotten wood.		14 units	34,000.00	0.00			Move to A/C
	Install smoke/carbon monoxide detectors and arc faults		14 units	7,000.00	0.00			Move to A/C
	Begin bath renovations to first floor (3 handicaps may not need upgrades) first floor study 6X6 ceramic vs. sheet vinyl		24 units	51,857.00	0.00			Move to A/C
	Install smoke/carbon monoxide detector		24 units	10,500.00	0.00			Move to A/C
	Begin installation of A/C in Elderly units first, 2 story units next priority & family third				116,841.00			Moved forward from 5 yr. Plan in design
	Total 1460			103,357.00	116,841.00			
NC 63-1	Dwelling Equipment	1465						
	Ranges & Refrigerators			4,000.00	0.00			Moved to A/C
NC 63-1	Non-Dwelling Equipment	1475						
	Security Cameras/monitor			1484.00	0.00			Moved to A/C

PHA Name: New Randleman Housing Authority	Grant Type and Number Capital Fund Program: NC19P06350103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement **Reserve for Disasters/ Emergencies** **Revised Annual Statement (revision no:)**
 Performance and Evaluation Report for Period Ending: **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	2,000.00			
3	1408 Management Improvements				
4	1410 Administration	5,000.00			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	15,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	116,841.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$138,841.00	0.00	0.00	0.00
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**

PHA Name: New Randleman Housing Authority		Grant Type and Number Capital Fund Program #: NC19P06350103 Capital Fund Program 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	
NC 63-1	Operations:	1406		2,000.00				
NC 63-1	Administration: Salary/Benefits	1410		5,000.00				
NC 63-1	Fees & Cost: A/E Services	1430		15,000.00				
NC 63-1	Dwelling Structures: Complete A/C in Family Units \$2,000.00 each	1460	52 Units	116,841.00				

Required Attachment C:

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

PHA Name The New Randleman Housing Authority		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1 2003	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 2005	Work Statement for Year 4 FFY Grant: 2006 PHA FY: 2006	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 2007
NC 63-1	Annual Statement	\$138,841.00	\$138,841.00	\$138,841.00	\$138,841.00
Physical Improvements		\$112,357.00	\$100,841.00	\$116,841.00	\$116,841.00
Management Improvements			\$7,000.00		
HA-Wide Non-Dwelling Structures & Equip		\$1,484.00	\$9,000.00		
Administration		\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00
Other		\$18,000.00	\$15,000.00	\$15,000.00	\$15,000.00
Operations		\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00
Total CFP Funds (Est.)		\$138,841.00	\$138,841.00	\$138,841.00	\$138,841.00
Total Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year 2 FFY Grant: 2004 PHA FY: 2004			Activities for Year 2 FFY Grant: 2004 PHA FY: 2004		
2003	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
	HA-WIDE	Operations:		HA-WIDE	Dwelling Structures	
See		Total 1406	2,000.00		Renovations to 2 nd floor baths 14 units shower	34,000.00
Annual					Surround, new sheet vinyl floor over waterproofing	
Statement		Administration:			Sealant at walls, commodes etc., new exhaust	
		Salary & Sundry			Fans vanities, etc. – repair floor as needed	
		Total 1410	5,000.00		Rotten joist in some cases. New tubs, sinks	
					(full bath mod) check water lines and sewer lines	
					Repair as needed, check for rotten wood	
					Install smoke/carbon monoxide detector and	
					Arc fault 14 units	7,000.00
		Fees & Costs:				
		A/E	15,000.00		Begin bath renovations to first floor (3 handicaps	51,857.00
		Consultant – Asbestos Testing – Floor Tile	3,000.00		May not need upgrades) First floor study 6X6	
		Total 1430	18,000.00		Ceramic vs. sheet vinyl. 24 units	
		Site Improvements:			Install smoke/carbon monoxide detector & arc	10,500.00
		Sidewalk repair & parking pads			fault	
		Total 1450	5,000.00		Total 1460	103,357.00
					Dwelling Equipment	
					Ranges & refrigerators	
					Total 1465	4,000.00
					Non-Dwelling Equipment	
					Security Cameras/Monitor	
					Total 1475	1,484.00
					TOTAL ESTIMATED CFP COST – 2004	\$138,841.00

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year 3 FFY Grant: 2005 PHA FY: 2005			Activities for Year 3 FFY Grant: 2005 PHA FY: 2005		
2003	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
	HA-WIDE	Operations:			Dwelling Structures:	
See		Total 1406	2,000.00		Install new vinyl tile and new base throughout	
Annual		Management Improvements:			Approx. 26 units – floor tile does contain asbestos	73,341.00
Statement		Computer Software			(Family Site)	
		Total 1408	7,000.00		Provide Dryer Connections at Elderly Site	14,000.00
					Approx. 28 units	
		Administration:			Total 1460	8,7341.00
		Salary & Sundry				
		Total 1410	5,000.00		Dwelling Equipment:::	
					Refrigerators & Ranges	4,000.00
		Fees & Costs:			Total 1465	4,000.00
		A/E				
		Total 1430	15,000.00			
		Site Improvements:			Non Dwelling Equipment:	
		Sidewalk repair	2,000.00		Computer Equipment	3,000.00
		Remove brick wall & provide new landscaping	2,500.00		Mower	5,000.00
		Top Soil and Grassing	5,000.00		Maintenance Equipment	1,000.00
						9,000.00
		Total 1450	9,500.00			
					TOTAL ESTIMATED CFP COST – 2005	\$138,841.00

Capital Funds Program Five Year Actions Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year 4 FFY Grant: 2006 PHA FY: 2006			Activities for Year 4 FFY Grant: 2007 PHA FY: 2007		
2003	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	HA-Wide	Operations:		HA-WIDE	Operations:	
Annual Statement		Total 1406	2,000.00		Total 1406	2,000.00
		Administration:			Administration:	
		Salary/Sundry			Salary/Sundry	
		Total 1410	5,000.00		Total 1410	5,000.00
		Fees & Costs:			Fees & Costs:	
		A/E			A/E	
		Total 1430	15,000.00		Total 1430	15,000.00
		Site Improvements:			Site Improvements:	
		Sidewalk Repair	2,000.00		Sidewalk Repair	2,000.00
		Total 1450	2,000.00		Survey Sanitary Sewer System to replace Terra-cotta sewer pipes with PVC sewer lines Provide additional clean outs and manholes	50,000.00
		Dwelling Structures:			Dwelling Structures:	
		Complete vinyl tile and base replacement started In 2005 – Family Site – Floor tile does contain Asbestos – 26 units	78,000.00		As needed	
		Total 1460	110,841.00		Total 1450	52,000.00
		Begin vinyl tile and base in Elderly units – 12 units	32,841.00		Finish vinyl tile and base – Elderly – 16 units	41,729.00
		Total 1465	4,000.00		Provide dryer hook-ups at Family Site	19,112.00
		Dwelling Equipment:			Dwelling Equipment:	
		Ranges & Refrigerators			Ranges & Refrigerators	
		Total 1465	4,000.00		Total 1465	4,000.00
		TOTAL ESTIMATED CFP COST – 2006	\$138,841.00		TOTAL ESTIMATED CFP COST – 2007	\$138,841.00

PHA Public Housing Drug Elimination Program Plan

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

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

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

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

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

E. Target Areas

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

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

F. Duration of Program

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

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

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “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.

B. PHDEP Budget Summary

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

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

C. PHDEP Plan Goals and Activities

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

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP 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 TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							

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

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

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

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

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment D :

Resident Membership on the PHA Board or Governing Body

1. X 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:

Sybil Brady
Myrtle Gaster

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

Elected
X Appointed

C. The term of appointment is (include the date term expires): 03/12/2000 – 03/12/2005

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: 03/12/2004

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Bruce Moore, Mayor City of Randleman

Required Attachment E :

Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Resident Advisory Board

Lisa Young

Grace Moore

Ed Vestal

Teresa Bailey

Sybil Brady

Board of Commissioners

Jerry Highfill, Chairman

James Coble

George Craven

Sybil Brady

Myrtle Gaster

Ronald Goss

Donald Yow

Nora Holland

Required Attachment F :

Deconcentration and Income Mixing Questions

- a. Yes No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

- b. Yes No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments

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

Required Attachment G :

Brief Statement of Progress in Meeting 5-Year Plan Mission and Goals

The PHA is working hard to keep all apartments available and rented in order to reduce vacancies. We are making improvements through modernization depending on funding from HUD. The last several projects were new kitchen cabinets, sinks, etc., upgrade of electrical system (installing new lights front & back of apartments for safety/security purposes) and re-roofing all buildings. We are looking to make improvements in all areas as our goal but we must take modernization projects as we are financially able.

The PHA is working for a mix in income levels for our one and only site. We have offered various programs to promote self-sufficiency for the residents but they did not participate in much. All of the programs and benefits have been offered to everyone living in our site.

Hopefully, the PHA will be able to make more progress with the goals and missions as we receive more funding, more cooperation from residents and get more involvement.

Required Attachment H :

**VOLUNTARY CONVERSION CERTIFICATIONS AND QUESTIONS
24CFR PART 972**

On June 22, 2001, the Department of Housing and Urban Development (HUD) issued a Final Rule amending chapter IX of title 24 of the Code of Federal Regulations by adding part 972. This new part 972 implements section 533 of the Quality Housing and Work Responsibility Act of 1998 which requires every public housing authority to conduct and submit to HUD an initial assessment to determine if statutory objectives would be satisfied by converting certain developments or parts of developments to tenant-based assistance.

Acting on behalf of the New Randleman Housing Authority (PHA) as its Authorized Official, I make the following certifications and assurances to HUD regarding:

Project No.: NC063
Project Name: The New Randleman Housing Authority
Project Address: 606 South Main Street, Randleman, NC 27317

I hereby certify that the development named above:

- ?? Is not subject to required conversion under 24 CFR part 971;
- ?? Is not the subject of an application for demotion or disposition that has been approved by HUD, or submitted to HUD and awaiting determination;
- ?? Is not a HOPE VI revitalization site; and
- ?? Is not applied for and received HUD designation for occupancy only by the elderly and/or person with disabilities under 24 CFR part 945.

I further certify that I have:

- ?? Reviewed the development's operation as public housing;
- ?? Considered the implications of converting the development to tenant-based assistance; and
- ?? Concluded that the conversion of the development may be:

Appropriate because of removal of the development would meet the necessary conditions for voluntary conversion described below.

Or

- XX Inappropriate because removal of the development would not meet the necessary conditions for voluntary conversion described below.

Necessary conditions for voluntary conversion:

- ?? Conversion to tenant-based assistance would not be more expensive than continuing to operate the development (or portion of it) as public housing;

- ?? Conversion to tenant-based assistance would principally benefit the residents of the public housing development to be converted and the community; and
- ?? Conversion to tenant-based assistance would not adversely affect the availability of affordable housing in the community.

Signed by: Landis Hall

Signature: Signature on file
Executive Director

Date: 10/19/01

QUESTIONS & ANSWERS

- a. How many of the PHA's developments are subject of the Required Initial Assessments? **1**
- b. 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)? **0**
- c. How many Assessments were conducted for the PHA's covered developments? **1**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: **NONE**

Development Name

Number of Units

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: **COMPLETE**