

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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SmallPHAPlanUpdate  
AnnualPlanforFiscalYear: 2003

**DAVIDCITYHOUSINGAUTHORITY  
AGENCYPLAN**

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMLETE     DIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

## PHA Plan Agency Identification

**PHAName:** DavidCityHousingAuthority

**PHANumber:** NE025

**PHAFiscalYearBeginning:** 07/2003

### PHA Plan Contact Information:

Name: Beverly Bennett, Executive Director

Phone: 402 -367-3587

TDD: 402 -367-3587

Email (if available): [sc40406@navix.net](mailto:sc40406@navix.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  
David City Housing Authority 11253<sup>rd</sup> Street, David City, NE 68632

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

**AnnualPHAPlan**  
**FiscalYear2002**  
 [24CFRPart903.7]

**i. Table of Contents**

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

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<input checked="" type="checkbox"/> Attachment J: Voluntary Conversion of Developments from Public Housing Stock	
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## ii. Executive Summary

[24CFR Part 903.79(r)]

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

### 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.

**None**

### 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 ? **\$74,032**

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

D. Capital Fund Program Grant Submissions

#### (1) Capital Fund Program 5 - Year Action Plan

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

#### (2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

### 3.D Demolition and Disposition

[24CFR Part 903.79(h)]

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

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

2. Activity Description

<b>Demolition/Disposition Activity Description (Not including Activities Associated with HOPEVI or Conversion Activities)</b>	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (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:	

**Component 3, (6) Deconcentration and Income Mixing** (Insert from PIH2001 -4decon)

- 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

<b>Deconcentration Policy for Covered Developments</b>			
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)]

#### **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 PHAs may skip to the next component PHA eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A.  Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

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

- C.  Yes  No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D.  Yes  No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

#### **6. Other Information**

[24CFR Part 903.79(r)]

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

1.  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 \_\_\_\_\_

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.
- 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 Nebraska Non-Entitlement Areas

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:  
**The 2001 - 2004 Consolidated Plan does not quantify housing needs.**

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 2001 - 2004 State of Nebraska Consolidated Plan does not quantify housing needs. This Plan calls for maintaining existing and creating additional affordable housing. In this sense the effort of David City Housing Authority to maintain the public housing inventory is in accordance with the State Consolidated Plan.

## C. Criteria for Substantial Deviation and Significant Amendments

### 1. Amendment and Deviation Definitions

24CFR Part 903.7(r) PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### a. Substantial Deviation from the 5-year Plan:

A Substantial Deviation from the 5-year Plan is any changes in the mission statement and/or strategies to implement the mission of the authority. This includes but is not limited to the reallocation of funds or the redefinition of clients. Changes that result from HUD mandates are excluded.

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

A Significant Amendment or Modification to the Annual Plan includes: changes in budget items and capital fund projects due to emergencies, adjustment in policies to address issues such as vacancies; and initiated development projects that will affect the use of capital funds. Changes that result from changes in regulations and other HUD mandates are excluded.

## D. Conversion of Public Housing to Tenant-Based Assistance

[24CFR Part 903.79(j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

**Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937**

### A. Assessment of Reasonable Revitalization Pursuant to Section 20 of the HUD FY 1996 HUD Appropriations Act

1.  Yes  No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 20 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

#### 2. Activity Description

- Yes  No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

#### Conversion of Public Housing Activity Description

1a. Development name:

1b. Development (project) number:

2. What is the status of the required assessment?

- Assessment underway (See Attachment H)
- Assessment results submitted to HUD
- Assessment results approved by HUD (if marked, proceed to next question)
- Other (explain below)

3.  Yes  No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)

4. Status of Conversion Plan (select the statement that best describes the current status)

- Conversion Plan in development
- Conversion Plans submitted to HUD on: (DD/MM/YYYY)
- Conversion Plan approved by HUD on: (DD/MM/YYYY)
- Activities pursuant to HUD - approved Conversion Plan underway

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AnnualPlanforFiscalYear: 2003

**DAVIDCITYHOUSING  
AUTHORITY  
ATTACHMENTA**

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

## Attachment A

### Supporting Documents Available for Review

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
4	PHA Plan Certifications 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
✓	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
N/A	Housing Needs Statement of the Consolidated Plan for the jurisdiction/in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
✓	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
✓	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
✓	Public housing rent determination policies, including the method for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
	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
✓	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations

**List of Supporting Documents Available for Review**

<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
4	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
✓	Public housing grievance procedures <input 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
✓	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, PIH99-52 (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 & Voluntary Conversion	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing home ownership 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
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency

**List of Supporting Documents Available for Review**

<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	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"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· 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);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· 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.</li> </ul>	Annual Plan: Safety and Crime Prevention
4	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
4	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
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

SmallPHAPlanUpdate

AnnualPlanforFiscalYear: 2003

**DAVIDCITYHOUSING  
AUTHORITY  
ATTACHMENTB  
Performance andEvaluationReport**

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

PHAName: David City Housing Authority	Grant Type and Number Capital Fund Replacement Housing Factor Grant No: Capital Fund Program Grant No: NE26P025	Federal FY of Grant: 2000
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Original Annual Statement  
 Reserve for Disasters/Emergencies  
 Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: Dec. 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	11829	7,170	7,170	7,170
3	1408 Management Improvements				
4	1410 Administration	4420	2,230	2,230	2,230
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	500	500	500	500
8	1440 Site Acquisition				
9	1450 Site Improvement	14000	3,100	3,100	3,100
10	1460 Dwelling Structures	32200	32,200	32,200	32,200
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures	11445	29,204	29,204	29,204
13	1475 Nondwelling Equipment	2000	2,000	2,000	2,000
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 1 -19)	76404	76,404	76,404	76,404
21	Amount of line XX Related to LBP Activities				
22	Amount of line XX Related to Section 504 compliance				
23	Amount of line XX Related to Security — Soft Costs				
24	Amount of Line XX related to Security -- Hard Costs				

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

PHAName: David City Housing Authority	Grant Type and Number Capital Fund Replacement Housing Factor Grant No:	Capital Fund Program Grant No: NE26P025	Federal FY of Grant: 2000
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: Dec. 31, 2002  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
25	Amount of line XX Related to Energy Conservation Measures				
26	Collateralization Expenses or Debt Service				

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

PHA Name: David City Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: NE26P025 Replacement Housing Factor Grant No:				<b>Federal FY of Grant:</b> 2000		
Dev. Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Obligated	Expended	
NE26P025	Operations	1406		11829	7,170	7,170	7,170	COMPLETE
	Management Improvements	1408						
	Administration	1410		4430	2,230	2,230	2,230	
	Fees & Costs Cost to design office furnishing remodeling	1430		500	500	500	500	
	Site Improvement: Concrete work on circled drive	1450		14000	3,100	3,100	3,100	
	Dwelling Structure: Bedroom ceiling fans Bathroom vanities & Handicap stools	1460		32200	32,200	32,200	32,200	
	Non-Dwelling Structures: Addition to office and boardroom	1470		11445	29,204	29,204	29,204	
	Non-Dwelling Equipment: New refrigerators	1475		2000	2,000	2,000	2,000	
	TOTAL			76404	76,404	76,404	76,404	

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

PHAName: David City Housing Authority			Grant Type and Number Capital Fund Program No: NE26P025 Replacement Housing Factor No:			Federal FY of Grant: 2000	
Dev. Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date) 9/30/01			All Funds Expended (Quarter Ending Date) 9/30/01			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NE26P025	3.31.02		3/31/02	6/30/2003			

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

PHA Name: David City Housing Authority	Grant Type and Number: Capital Fund Program NE26P025 Replacement Housing Factor Grant No:	Federal FY of Grant: <b>2001</b>
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Original Annual Statement  
 Reserve for Disasters/Emergencies  
 Revised Annual Statement (revision no: 2)  
 Performance and Evaluation Report for Period Ending: Dec. 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	7790	7,790	7,508.89	7,508.89
3	1408 Management Improvements Soft Costs	151	1,000		
	Management Improvements Hard Costs				
4	1410 Administration	2000	7,794		
5	1411 Audit	0	357		
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5500	9,000	5,800.00	5,800.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	62500	52,000	52,000.00	52,000.00
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	1499 Development Activities				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 1 -19)	77,941	77,941	65,308.89	65,308.89
21	Amount of line XX Related to LBP Activities				

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

<b>PHAName:</b> David City Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program NE26P025 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2001</b>
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: 2)  
  Performance and Evaluation Report for Period Ending: Dec. 31, 2002  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHAName: DavidCityHousingAuthority		<b>GrantTypeandNumber:</b> CapitalFundProgram NE26P025 ReplacementHousingFactorGrantNo:				<b>FederalFYofGrant:</b> 2001		
Development Number	GeneralDescriptionofMajorWork Categories	Dev.Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
NE26P025	Operations	1406		7,790	7,790	7,508.89	7,508.89	
	<u>ManagementImprovements</u> Training&conferenceforDirectorand maintenance,LBPtrainingexpense	1408		151	1,000			
	<u>Administration</u> Administrationofgrant&directorsfee	1410		2000	7,794			
	<u>AuditofCFPfunds</u>	1411		0	357			
	<u>Fees&amp;Costs</u> AgencyPlanPrep Architectforrenovationof6plex residentialunitsinto3 -2BR	1430		5,500	9,000	5,800.00	5,800.00	
	<u>SiteImprovement</u> Eightbackdoorsteps&landingtobe built&sidewalksreplaced	1450						
	<u>DwellingStructure</u> Renovationof6plexinto3 -2BR units	1460		62500	52,000	52,000.00	52,000.00	
	<u>DwellingEquipment</u>	1465.1						
	<u>NonDwellingStructure</u>	1470						
	<u>NonDwellingEquipment</u>	1475						
	<b>Total</b>			<b>77941</b>	<b>77941</b>	<b>65,308.89</b>	<b>65,308.89</b>	

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

PHAName: David City Housing Authority			Grant Type and Number: Capital Fund Program#: NE26P025 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NE26P025	12/31/02			6/30/04			

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

<b>PHA Name:</b> David City Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program NE26P025 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2002</b>
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: 0 3)  
 Performance and Evaluation Report for Period Ending: 12-31-02  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations **	7,790	5,403		
3	1408 Management Improvements Soft Costs	1,000	1,000		
	Management Improvements Hard Costs				
4	1410 Administration	7,794	3,403		
5	1411 Audit	250	250		
6	1415 Liquidated Damages				
7	1430 Fees and Costs	550	550		
8	1440 Site Acquisition				
9	1450 Site Improvement		6,000		
10	1460 Dwelling Structures	60,557	57,426	16,800.09	16,800.09
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	1499 Development Activities				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	77,941	74,032	16,800.09	16,800.09
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				

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

<b>PHA Name:</b> David City Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program NE26P025 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2002</b>
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: 0 3)  
 Performance and Evaluation Report for Period Ending: 12-31-02  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

**\*\*The David City Housing Authority feel that it is important to keep less than 10% allocations in operation to support the capital fund projects.**

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

PHAName: DavidCityHousingAuthority		GrantTypeandNu mber CapitalFundProgramGrantNo: NE26P025 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2002		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Obligated	Expended	
NE26P025	Operation	1406		7,790	5,403			
	ManagementImprovements Hard&SoftCosts	1408		1,000	1,000			
	Administration	1410		7,794	3,403			
	Audit	1411		250	250			
	Fees&Costs	1430		550	550			
	<u>SiteImprovement</u> Stepsandlandingw/dirtwork&newsidewalk	1450		0	6,000			
	<u>DwellingStructures</u> : Install2handicapdoors Begintoreplaceallwindowsw/energy efficientwindows	1460		60,557	57,426	16,800.09	16,800.09	29%
	DwellingEquipment	1465.1						
	Non-DwellingStructure	1470						
	Non-DwellingEquipment	1475						
	<b>Total</b>			77,941	74,032	16,800.09	16,800.09	

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

PHAName: David City Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: NE26P025 Replacement Housing Factor No:					Federal FY of Grant: 2002
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NE26P025	12/31/03			6/30/05			

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

<b>PHAName:</b> David City Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program NE26P025 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2003</b>
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Original Annual Statement   
 Reserve for Disasters/Emergencies   
 Revised Annual Statement (revision no: 0)  
 Performance and Evaluation Report for Period Ending: 12-31-02   
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations **	7,790	0		
3	1408 Management Improvements Soft Costs	250	250		
	Management Improvements Hard Costs				
4	1410 Administration	7,794	2,500		
5	1411 Audit	250	250		
6	1415 Liquidated Damages				
7	1430 Fees and Costs	550	550		
8	1440 Site Acquisition				
9	1450 Site Improvement	8,000	0		
10	1460 Dwelling Structures	15,000	70,482		
11	1465.1 Dwelling Equipment —Nonexpendable	30,707	0		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	7,600	0		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	77,941	74,032		
	Amount of line XX Related to LB P Activities				
	Amount of line XX Related to Section 504 compliance				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement      Housing Factor (CFP/CFPRHF)</b> <b>Part 1: Summary</b>					
<b>PHA Name:</b> David City Housing Authority		<b>Grant Type and Number:</b> Capital Fund Program NE26P025 Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> <b>2003</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 0) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

\*\*The David City Housing Authority feels that it is important to keep the projects. less than 10% allocations in operation to support the capital fund

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

PHAName: DavidCityHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NE26P025 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2003		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Obligated	Expended	
NE26P025	Operation	1406		7,790	0			
	ManagementImprovements Hard&SoftCosts	1408		250	250			
	Administration	1410		7,794	2,500			
	Audit	1411		250	250			
	Fees&Costs	1430		550	550			
	SiteImprovement	1450		8,000	0			
	<u>DwellingStructures</u> Cont.windowsefficient	1460		15,000	70,482			
	DwellingEquipment	1465.1		30,707	0			
	Non-DwellingEquipment	1475		7,600	0			
	<b>Total</b>			77,941	74,032			

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

PHAName: David City Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: NE26P025 Replacement Housing Factor No:				Federal FY of Grant: 2003	
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	
NE26P025	12/31/04			6/30/06			

Small PHA Plan Update  
Annual Plan for Fiscal Year: 2003

**DAVID CITY HOUSING  
AUTHORITY  
ATTACHMENT C  
Five Year Action Plan**

## Capital Fund Program Five - Year Action Plan

### Part I: Summary

PHAName: DavidCity HousingAuthority						<input type="checkbox"/> Original 5 - Year Plan <input checked="" type="checkbox"/> Revision No: 0 3			
Development Number/ Name/HA- Wide	Year1 2003	WorkStatementforYear2 FFYGrant:200 4 PHAFY:7/2004		WorkStatementforYear3 FFYGrant:200 5 PHAF Y:7/200 5		WorkStatementforYear4 FFYGrant:200 6 PHAFY:7/200 6		WorkStatementforYear5 FFYGrant:2007 PHAFY:7/2007	
		Annual tatemer							
NE26P025		OPERATIONS	7403	OPERATIONS	7403	OPERATIONS	7403	OPERATIONS	7403
		MANAGEMENT IMPROVEMENTS	250	MANAGEMENT IMPROVEMENTS	250	MANAGEMENT IMPROVEMENTS	250	MANAGEMENT IMPROVEMENTS	250
		ADMINISTRATION	7403	ADMINISTRATION	7403	ADMINISTRATION	7403	ADMINISTRATION	7403
		AUDIT	250	AUDIT	250	AUDIT	250	AUDIT	250
		FEES&COSTS	550	FEES&COSTS	550	FEES&COS TS	550	FEES&COSTS	550
		SITE IMPROVEMENT	5000	SITE IMPROVEMENT	0	SITE IMPROVEMENT	0	SITE IMPROVEMENT	0
		DWELLING STRUCTURE	33176	DWELLING STRUCTURE	32200	DWELLING STRUCTURE	27000	DWELLING STRUCTURE	38284
		DWELLING EQUIPMENT	0	DWELLING EQUIPMENT	25976	DWELLING EQUIPMENT	0	DWELLING EQUIPMENT	0
		NON-DWELLING STRUCTURE:	20000	NON-DWELLING STRUCTURE	0	NON-DWELLING STRUCTURE	29176	NON-DWELLING STRUCTURE	19892
		NON-DWELLING EQUIPMENT	0	NON-DWELLING EQUIPMENT	0	NON-DWELLING EQUIPMENT	0	NON-DWELLING EQUIPMENT	0
<b>TotalCFPFunds (Est.)</b>			<b>74032</b>		<b>74032</b>		<b>72032</b>		<b>74032</b>
TotalReplacementHousingFactorFunds				296,128					

\*\*The David City Housing Authority feels that it is important to keep the 10% allocations in operation to support the capital fund projects.

**CapitalFundProgramFive -YearActionPlan**  
**PartII:SupportingPages —WorkActivities**

Activities for 2001& 2002	ActivitiesforYear:200 4 FFYGrant:2004 PHAFY:7/2004			Activitiesfo rYear:2005 FFYGrant:2005 PHAFY:7/2005		
NE26P025	Operations	#1406	7,403	Operations	1406	7,403
	<u>ManagementImprovements</u> ComputerHelp,NAHROTraining& Meetings	1408	250	<u>ManagementImprovements</u> ComputerHelp,NAHROTraining& Meetings	1408	250
	Administration	1410	7,403	Administration	1410	7,403
	Audit	1411	250	Audit	1411	250
	Fees&Costs	1430	550	Fees&Costs	1430	550
	<u>SiteImprovement</u> Landscaping&Sidewalks	1450	5,000	SiteImprovement	1450	0
	<u>DwellingStructures</u> Replacekitchencupboard s&sink tiles	1460	33,176	<u>DwellingStructures</u> Replacekitchencupboards	1450	32,200
	DwellingEquipment	1465	0	<u>DwellingEquipment</u> Replacestoves&refrigerators	1465	25,976
	<u>Non-DwellingStructure</u> RemodelCommunityRoom	1470	20,000	Non-DwellingStruct ure	1470	0
	Non-DwellingEquip	1475	0	Non-DwellingEquip:	1475	0
	<b>TotalAmountofGrant</b>		<b>74,032</b>			<b>74,032</b>

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

Activities 200 1 & 2002	Activities for Year: 2006 FFY Grant: 200 6 PHAFY: 7/2006		Activities for Year: 2007 FFY Grant: 2007 PHAFY: 7/2007			
NE26P025	Operations	1406	7,403	Operations	1406	7,403
	<u>Management Improvements</u> Computer Help, NAHRO Training & Meetings	1408	250	<u>Management Improvements</u> Computer Help, NAHRO Training & Meetings	1408	250
	Administration	1410	7,403	Administration	1410	7,403
	Audit	1411	250	Audit	1411	250
	Fees & Costs	1430	550	Fees & Costs	1430	550
	Site Improvement	1450	0	Site Improvement	1450	0
	<u>Dwelling Structures</u> Replace Bath Tile, kitchen floors, & laundry room	1460	27,000	<u>Dwelling Structures</u> Conti. Entranced doorsto all units	1460	38,284
	Dwelling Equipment	1465	0	Dwelling Equipment	1465	0
	<u>Non Dwelling Structure</u> Replace outside doors & lockson doors	1470	29,176	<u>Non Dwelling Structure</u> Garage or carportson south property	1470	19,892
	<u>Non Dwelling Equipment</u> Replacetiles in laundry room	1475	2,000	Non Dwelling Equipment	1475	0
	<b>Total Annual Grant</b>		<b>74,032</b>	<b>Total Annual Grant</b>		<b>74,032</b>
	<b>Total estimated cost over next 5 years</b>					

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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SmallPHAPlanUpdate  
AnnualPlanforFiscalYear: 2003

**DAVIDCITYHOUSING  
AUTHORITY  
ATTACHMENTS D, E,F,G**

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDI N  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

**Required Attachment D:  
Resident Member on the PHA Governing Board**

1.  Yes  No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

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

Elected

Appointed

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

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full-time basis

the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain): Supporting documents sent with hard copy to Omaha HUD office as proof of posting notice to resident for resident commissioner .

B. Date of next term expiration of a governing board member : 05-02-2003.

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

**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.)

**PUBLIC HOUSING GRAB MEMBERS:**

Carol Karel  
Rosemary Stites  
Frances Sneed

These members were elected at the annual Resident Advisory Board meeting.

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

**RAB BOARD RECOMMENDATIONS AND DAVID CITY HOUSING AUTHORITY RESPONSE:**

The Resident Advisory Board met on March 3, 2003.

Comments on Plan:

The residents made no comments or additions to the 2003 Agency Plan.

PHA Response:

N/A

**Required Attachment G:**

**Component 10, PHA Plans : Conversion of Public Housing into Tenant - Based Assistance**

[24CFR Part 903.79(j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

**A. Assessment of Reasonable Revitalization Pursuant to Section 202 of the HUD FY1996 HUD Appropriations Act**

1.  Yes  No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under Section 202 of the HUD FY1996 HUD Appropriations Act? (If "No", skip to Component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to Component 11.)

**2. Activity Description**

Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to Component 11. If "No", complete the Activity Description table below.

<b>Conversion of Public Housing Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. What is the status of the required assessment? <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD - approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date

submitted or approved:

Units addressed in a pending or approved HOPE VI demolition application  
(date submitted or approved: \_\_\_\_\_ )

Units addressed in a pending or approved HOPE VI Revitalization Plan  
(date submitted or approved: \_\_\_\_\_ )

Requirements no longer applicable: vacancy rates are less than 10 percent

Requirements no longer applicable: site now has less than 300 units

Other: (describe below)

**B. Assessments of Conversion Pursuant to section 22 of the U.S. Housing Act of 1937 Act**

1. How many of the PHA's developments are subject to the Required Initial Assessment? 1
2. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly, disabled developments not general occupancy projects?) 0
3. How many Assessments were conducted for the PHA's covered developments? 1
4. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments.

Development Name	Number of Units
None	

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

2003 Update: Initial assessment performed in 2002 is still valid. No significant changes in the housing authority and in the market have taken place.

## **AttachmentH:ResponsetoDeficiencies**

Recommendation:insertphysi caladdressonthePHAidentificationpage.

Response: Physicaladdresswasmarkedoninitialsubmission.Webelievethatthisis goodpracticeforpersonsinterestedinvisitingtheproject.