

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

SmallPHAPlanUpdate
AnnualPlanforFiscalYear: 2003

**CLARKSONHOUSINGAUTHORITY
AGENCYPLAN**

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

PHA Plan Agency Identification

PHAName: ClarksonHousingAuthority

PHANumber: NE027

PHAFiscalYearBeginning: 04/2003

PHA Plan Contact Information:

Name: Barbara Vavrina, Executive Director

Phone: 402 -892-3416

TDD: 402 -892-3263

Email (if available): czech@megavision.com

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
Clarkson Housing Authority
Box 359 ; 218 Czech Drive
Clarkson, NE 68629

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 2002
 [24CFR Part 903.7]

ii. Table of Contents

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

Contents	<u>Page#</u>
Annual Plan	
i. Annual Plan Information	
ii. Table of Contents	
iii. Executive Summary (optional)	1
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	1
2. Capital Improvement Needs	1
3. Demolition and Disposition	1
4. Homeownership: Voucher Homeownership Program	3
5. Crime and Safety: PHDEP Plan	3
6. Other Information:	
A. Resident Advisory Board Consultation Process	3
B. Statement of Consistency with Consolidated Plan	4
C. Criteria for Substantial Deviations and Significant Amendments	5
D. Voluntary Conversion of Developments from Public Housing Stock	5
Attachments	
<input checked="" type="checkbox"/> Attachment A: Supporting Documents Available for Review	
<input checked="" type="checkbox"/> Attachment B: Performance and Evaluation Report (CFP 2000-2002)	
<input type="checkbox"/> Attachment : Capital Fund Program Annual Statement	
<input checked="" type="checkbox"/> Attachment C: Capital Fund Program 5 Year Action Plan	
<input type="checkbox"/> Attachment__: Capital Fund Program Replacement Housing Factor Annual Statement	
<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 checked="" type="checkbox"/> Attachment F: Comments of Resident Advisory Board or Boards & Explanation of PHA Response	
<input checked="" type="checkbox"/> Attachment G: Voluntary Conversion of Developments from Public Housing Stock	

ii.ExecutiveSummary

[24CFRPart903.79(r)]

AtPHAoption,provideabriefoverviewoftheinformationintheAnnualPlan

N/A

1.SummaryofPolicyorProgramChangesfortheUpcomingYear

Inthissection,brieflydescribechangesinpoliciesorprogramsdiscussedinlastyear'sPHAPlanthataren'tcovered inothersectionsofthisUpdate.

Nochanges

2.CapitalImprovementNeeds

[24CFRPart903.79 (g)]

Exemptions:Section8onlyPHAsaren'trequiredto completethiscomponent.

A. Yes No: IsthePHAeligibletoparticipateintheCFPinthefiscalyear coveredbythisPHAPlan?

B. Whatistheamountofthe PHA'sestimatedoractual(ifknown)CapitalFund Programgrantfortheupcomingyear? \$37,569

C. Yes No DoesthePHAplantoparticipateintheCapitalFundProgramin theupcomingyear?Ifyes,completethe restofComponent7.Ifno,skiptonext component.

D. CapitalFundProgramGrantSubmissions

(1)CapitalFundProgram5 -YearActionPlan

TheCapitalFundProgram5 -YearActionPlanisprovidedasAttachment C

(2)CapitalFundProgram AnnualStatement

TheCapitalFundProgramAnnualStatementisprovidedasAttachment B

3.D emolitionandDisposition

[24CFRPart903.79(h)]

Applicability:Section8onlyPHAsaren'trequiredto completethissection.

1. Yes No: DoesthePHAplantoparticipateinanydemolitionordisposition activities(pursuanttosection18oftheU.S.HousingActof1937 (42U.S.C.1437p))intheplanFiscalYear?(If"no",skiptonext component;if"yes", completeoneactivitydescriptionforeach 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:	

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

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)]

4. Your 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 home owner 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: PHD EP 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) – There were no comments .

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 jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the need 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 Clarkson 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 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 that 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.

A. Assessments 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.

Conversion of Public Housing Activity Description	
1a. Development name: Clarkson Housing Authority	
1b. Development (project) number: NE027	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input checked="" type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next)	

<p>question) <input type="checkbox"/> Other(explainbelow)</p>
<p>3. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No:IsaConversionPlanrequired?(Ifyes,gotoblock4;ifno,gotoblock5.)</p>
<p>4.StatusofConversionPlan(selectthestatementthatbestdescribesthecurrent status) <input type="checkbox"/> ConversionPlanindevelopment <input type="checkbox"/> ConversionPlansubmittedtoHUDon:(DD/MM/YYYY) <input type="checkbox"/> ConversionPlanapprovedbyHUDon:(DD/MM/YYYY) <input type="checkbox"/> ActivitiespursuanttoHUD -approvedConversionPlanunderway</p>

PleaserefertoAttachment G.

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

SmallPHAPlanUpdate
AnnualPlanforFiscalYear: 2003

**CLARKSONHOUSINGAUTHORITY
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.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
4	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
✓	Fair Housing Document ation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
	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
✓	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

Applicable & On Display	Supporting Document	Related Plan Component
	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 HOPEVI applications or, if more recent, approved or submitted HOPEVI 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 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 1 _____ 35, Subpart E	Annual Plan: Community Service & Self-Sufficiency

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
	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
	<p>PHDEP-related documentation:</p> <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
4	<p>Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G)</p> <p><input type="checkbox"/> check here if included in the public housing A&O Policy</p>	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)

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

CLARKSON HOUSING AUTHORITY
ATTACHMENT B
Performance and Evaluation Report

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part 1: Summary

PHAName: Clarkson Housing Authority	Grant Type and Number Capital Fund Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
--	--	--

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 01)
 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	3,847	3,847	3,847	3,847
3	1408 Management Improvements Soft Costs	7,765	7,765	7,765	7,765
	Management Improvements Hard Costs				
4	1410 Administration	1,539	1,539	1,539	1,539
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	8,000	11,444	11,444	11,444
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures	21,448	10,150	10,150	10,150
13	1475 Nondwelling Equipment	3,089	4,089	4,089	4,089
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				

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

PHAName: C larkson Housing Authority	Grant Type and Number Capital Fund Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 01)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines 1 -19)	38,834		38834.00	38834.00
	Amount of line XX Related to LBP Activities				
	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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Clarkson Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Obligated	Expended	
NE027	Operations		1406	3847	3847	3847	3847	
	Management Improvements New computer, computer training, conference fees, travel		1408	4000	7765	7765	7765	
	Administration		1410	1539	1539	1539	1539.00	
	Fees & Costs		1430					
	Site Improvement		1450					
	Dwelling Structure Carpet in units		1460	8000	11444	11444	11444	
	Dwelling Equipment		1465.1					
	Non-Dwelling Structures Underground fuel tank restoration		1470	21448	10150	10150	10150	
	Non-Dwelling Equipment Lighting in office and units		1475	0	4089	4089	4089	
	TOTAL			38834	38834	38834	38834	

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

PHAName: Clarkson Housing Authority		Grant Type and Number Capital Fund Program No: NE027 Replacement Housing Factor No:				Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date) 06/30/01			All Funds Expended (Quarter Ending Date) 06/30/01			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NE027	9/30/2001			3/31/03			

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

PHAName: C larkson Housing Authority	Grant Type and Number Capital Fund Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 01)
 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	3,883	3,883	3,883	3,883
3	1408 Management Improvements Soft Costs	4,000	4,000	4,000	4,000
	Management Improvements Hard Costs				
4	1410 Administration	1,500	1,500	1,500	1,500
5	1411 Audit	1,631	385	385	385
6	1415 Liquidated Damages				
7	1430 Fees and Costs		1,246	1,246	1,246
8	1440 Site Acquisition				
9	1450 Site Improvement		7,650	7,650	7,650
10	1460 Dwelling Structures	14,801	9,301	9,301	9,301
11	1465.1 Dwelling Equipment — Nonexpendable		5,500	5,500	5,500
12	1470 Nondwelling Structures	13,650	6,000	6,000	6,000
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				
	Amount of Annual Grant: (sum of lines 1 - 19)	39,465	39,465	39,465	39,465

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

PHAName: C larkson Housing Authority		Grant Type and Number Capital Fund Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:		Federal FY of Grant: 2001	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 01 <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" 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 LBP Activities				
	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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Clarkson Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE027 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Obligated	Expended	
NE027	Operations		1406		3883	3,883	3883	3883	
	Management Improvements Computer training; conference, travel		1408		4000	4,000	4000	4000	
	Administration		1410		1500	1,500	1500	1500	
	Audit		1411		1631	385	385	385	
	Fees and Costs		1430		0	1,246	1246	1246	
	Site Improvement Parking Lot		1450		0	7,650	7650	7650	
	Dwelling Structure Carpeting in units		1460		14801	9,301	9301	9301	
	Dwelling Equipment Stoves and Refrigerators in units		1465		0	5,500	5500	5500	
	Non Dwelling Structure Boiler Repairs		1470		13650	6,000	6000	6000	
	Non Dwelling Equipment		1475						
	TOTAL				39465	39465	39465	39465	

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

PHAName:ClarksonHousingAuthority			GrantTypeandNumber CapitalFundProgramNo: NE26P027 ReplacementHousingFactorNo:			FederalFYofGrant: 2001	
DevelopmentNumber Name/HA-Wide Activities	AllFundObligated (QuarterEndingDate)12/31/00			AllFundsExpended (QuarterEndingDate)12/31/00			ReasonsforRevisedTargetDates
	Original	Revised	Actual	Original	Revised	Actual	
NE027	09/30/02			3/31/04			

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

PHAName: Clarkson Housing Authority	Grant Type and Number Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 02)
 Performance and Evaluation Report for Period Ending: **December 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	\$3,940	\$3,940	\$3,940	\$3,940.00
3	1408 Management Improvements Soft Costs	\$1,000	\$1,000	\$1,000	
	Management Improvements Hard Costs				
4	1410 Administration	\$1,975	\$1,975	\$1,975	\$1,661.95
5	1411 Audit	\$800	\$800	\$800	
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$1,000	\$1,000	\$1,000	
8	1440 Site Acquisition				
9	1450 Site Improvement	\$3,450	\$3,450	\$3,450	\$125.00
10	1460 Dwelling Structures	\$16,000	\$14,104	\$14,104	\$ 12,329.41
11	1465.1 Dwelling Equipment — Nonexpendable	\$3,000	\$3,000	\$3,000	
12	1470 Non dwelling Structures	\$6,000	\$6,000	\$6,000	
13	1475 Non dwelling Equipment	\$2,300	\$2,300	\$2,300	
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)	\$39,465	\$37,569	\$37,569	\$ 18,056.36

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

PHAName: Clarkson Housing Authority	Grant Type and Number Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 02)
 Performance and Evaluation Report for Period Ending: **December 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 LBP Activities				
	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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Clarkson Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:				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 Work
				Original	Revised	Obligated	Expended	
NE027	Operation	1406		\$3,940	\$3,940	\$3,940	\$3,940	
	Management Improvements • Hard Costs - Software • Soft Costs - Training	1408		\$1,000	\$1,000	\$1,000		
	Administration	1410		\$1,975	\$1,975	\$1,975	\$1,661.95	
	Audit	1411		\$800	\$800	\$800		
	Fees & Costs	1430		\$1,000	\$1,000	\$1,000		
	Site Improvement • Landscaping grounds • Replacement of Sidewalks & repair of steps	1450		\$3,450	\$3,450	\$3,450	\$125	
	Dwelling Structures • Carpet & vinyl in apartments • Begin Replacement of Kitchen countertops/sinks/faucets • Begin vinyl siding of buildings	1460		\$16,000	\$14,104	\$14,104	\$12,329.41	
	Dwelling Equipment • Begin replacement of Appliances	1465.1		\$3,000	\$3,000	\$3,000		

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

PHAName: Clarkson Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:				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 Work
				Original	Revised	Obligated	Expended	
	Non-Dwelling Structure • Begin Vinyl Siding on 1 story bldgs • Boiler repair, lights	1470		\$6,000	\$6,000	\$6,000		
	Non-Dwelling Equipment • Fuel tank and fencing replaced	1475		\$2,300	\$2,300	\$2,300		
	Total			\$39,465	\$37,569	\$37,569	\$ 18,056.36	

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

PHAName: CLARKSON Housing Authority		Grant Type and Number Capital Fund Program No: NE26P027 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	
NE027	09/31/03			3/31/05			

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

PHA Name: Clarkson Housing Authority	Grant Type and Number Capital Fund Program Grant No: NE26P027 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: 01)
 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	\$3,940	\$3,940		
3	1408 Management Improvements Soft Costs	\$1,000	\$1,000		
	Management Improvements Hard Costs				
4	1410 Administration	\$1,975	\$1,975		
5	1411 Audit	\$800	\$800		
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$1,500	\$1,500		
8	1440 Site Acquisition				
9	1450 Site Improvement	\$3,000	\$14,104		
10	1460 Dwelling Structures	\$19,800	\$6,800		
11	1465.1 Dwelling Equipment — Nonexpendable	\$7,000	\$7,000		
12	1470 Non Dwelling Structures				

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

PHA Name: Clarkson Housing Authority	Grant Type and Number Capital Fund Program Grant No: NE26P027 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: 01)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
13	1475 Nondwelling Equipment	\$450	\$450		
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)	\$39,465	\$37,569		
	Amount of line XX Related to LBP Activities				
	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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Clarkson Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P027 Replacement Housing Factor Grant No:			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 Work
				Original	Revised	Original	Revised	
NE027	Operation	1406		\$3,940				
	Management Improvements	1408		\$1,000				
	Administration	1410		\$1,975				
	Audit	1411		\$800				
	Fees & Costs	1430		\$1,500				
	Site Improvement • Landscaping trees and bushes • Tank and fencing • sprinklers	1450		\$14,104				
	Dwelling Structures • Begin replacing kitchen cabinets, sink, faucets • Begin carpet units	1460		\$6,800				
	Dwelling Equipment • Boilers	1465.1		\$7,000				
	Non-Dwelling Structure	1470						
	Non-Dwelling Equipment • Office machine – fax, shredder	1475		\$450				
	Total			37,569				

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

PHAName:ClarksonHousingAuthority		Grant Type and Number CapitalFundProgramNo: NE26P027 ReplacementHousingFactorNo:				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	
NE027							

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

CLARKSON HOUSING AUTHORITY
ATTACHMENT C
Five Year Action Plan

Capital Fund Program Five - Year Action Plan

Part I: Summary

PHA Name: Clarkson Housing Authority					<input type="checkbox"/> Original 5 - Year Plan <input checked="" type="checkbox"/> Revision No: 03				
Development Number/ Name/HA-Wide	Year 1 2003	Work Statement for Year 4		Work Statement for Year 5		Work Statement for Year 6		Work Statement for Year 7	
		FFY Grant: 2004 PHAFY: 10/2004		FFY Grant: 2005 PHAFY: 10/2005		FFY Grant: 2006 PHAFY: 10/2006		FFY Grant: 2007 PHAFY: 10/2007	
NE027	Annual tatemer								
		Operations	3,940	Operations	3,940	Operations	3,940	Operations	3,940
		Management Improvements	1,000	Management Improvements	1,000	Management Improvements	1,000	Management Improvements	1,000
		Administration	1,975	Administration	1,975	Administration	1,975	Administration	1,975
		Audit	800	Audit	800	Audit	800	Audit	800
		Fees and Costs	1,500	Fees and Costs	1,500	Fees and Costs	1,000	Fees and Costs	1,000
		Site Improvement	3,450	Site Improvement	3,000	Site Improvement	3,000	Site Improvement	2,000
		Dwelling Structure	16,904	Dwelling Structure	21,904	Dwelling Structure	20,904	Dwelling Structure	8,904
		Dwelling Equipment	8,000	Dwelling Equipment	3,000	Dwelling Equipment	3,000	Dwelling Equipment	15,000
		NonDwelling Equipment	0	NonDwelling Equipment	450	NonDwelling Structure	1,000	NonDwelling Structure	2,000
						NonDwelling Equipment	950	NonDwelling Equipment	950
Total CFP Funds (Est.)		37,569		37,569		37,569		37,569	
Total Replacement Housing Factor Funds									

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

Activities for 2001 & 2002	Activities for Year: 2004 FFY Grant: 2004 PHAFY: 10/2004			Activities for Year: 2005 FFY Grant: 2005 PHAFY: 10/2005		
NE027	Operations	#1406	\$3,940	Operations	1406	\$ 3,940
	Management Improvements • Computer Help, Training, Nahro Training & Meetings	1408	\$1,000	Management Improvements • Trainings, travel	1408	\$ 1,000
	Administration	1410	\$1,975	Administration	1410	\$ 1,975
	Audit	1411	\$800	Audit	1411	\$ 800
	Fees and Costs	1430	\$1,500	Fees and Costs	1430	\$ 1,500
	Site Improvement: • Landscaping, trees and bushes • New Sign • Underground sprinkler lower level	1450	\$3,450	Site Improvement • Landscaping • Garbage room renovation	1450	\$ 3,000
	Dwelling Structure • Cont. replacement kitchen cabinets, sinks, faucets • Cont. carpet in units • Doors & Windows & locks	1460	\$16,904	Dwelling Structures • Replace kitchen cabinets, carpet units, Sinks, faucets, stoves, Bathroom vanities	1450	\$ 21,904
	Dwelling Equipment • Boilers and Water Heaters	1465	\$8,000	Dwelling Equipment • Replace appliances – stove, refrigerators, Boilers	1465	\$ 3,000
				Non-Dwelling Structure	1470	
				Non-Dwelling Equip: • Maintenance tools	1475	\$ 450
	Total Amount of Grant		\$37,569			\$37,569

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

Activities 2001 & 2002	Activities for Year: 2006 FFY Grant: 2006 PHAFY: 10/2006			Activities for Year: 2007 FFY Grant: 2007 PHAFY 10/2007		
NE027	Operations	1406	\$3,940	Operations	1406	\$3,940
	Management Improvements • Computer Help, Training,	1408	\$1,000	Management Improvements • Computer Help, Training,	1408	\$1,000
	Administration	1410	\$1,975	Administration	1410	\$1,975
	Audit	1411	\$800	Audit	1411	\$800
	Fees and Costs	1430	\$1,000	Fees and Costs	1430	\$1,000
	Site Improvement • Florallandscaping • Playground equipment, Picnic table, yard furniture	1450	\$3,000	Site Improvement • Sitework	1450	\$2,000
	Dwelling Structures: • Bathroom vanities and sinks • Shower replacement	1460	\$20,904	Dwelling Structures: • Cont. 2006	1460	\$8,904
	Dwelling Equipment • Boilers – new or repairs	1465	\$3,000	Dwelling Equipment • Boilers – new or repairs – cont. 2006	1465	\$15,000
	NonDwelling Structure • Shingles Maintenance building	1470	\$1,000	NonDwelling Structure • Shingles Maintenance building	1470	\$2,000
	NonDwelling Equipment • Mower & Snow blower repairs or replace	1475	\$950	NonDwelling Equipment • Maintenance	1475	\$950
	Total Annual Grant		\$37,569	Total Annual Grant		\$37,569
	Total estimated cost over next 5 years					

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

SmallPHAPlanUpdate
AnnualPlanforFiscalYear: 2003

**CLARKSONHOUSINGAUTHORITY
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):

The Clarkson housing authority has posted notice on the bulletin board informing residents of the resident board member requirement. The Executive Director has informed residents verbally and by written notice numerous times of the Resident Commissioner requirement. No one is willing to assume the position of Resident Board Commissioner.

B. Date of next term expiration of governing board member: February 2003

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mr. Charles Hammernik, Mayor

**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:

- In spite of numerous notices, residents of the Clarkson Housing Authority have not expressed interest in serving on the Resident Advisory Board. Residents provide feedback as needed.

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

RAB BOARD RECOMMENDATIONS AND CLARKSON HOUSING AUTHORITY RESPONSE:

No active Resident Advisory Board. No comments on the Agency Plan from residents.

**Required Attachment G:
 COMPONENT 10(B) VOLUNTARY CONVERSION OF
 DEVELOPMENT(S) FROM PUBLIC HOUSING STOCK:
 REQUIRED INITIAL ASSESSMENTS**

1. How many of the PHA's developments are subject to the Required Initial Assessment?
One
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?)
3. How many Assessments were conducted for the PHA's covered developments? One
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.
 Completed in 2002.