

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

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

Ellenville Housing Authority

Ellenville New York rk

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

PHA Plan Agency Identification

PHAName: Ellenville Housing Authority

PHANumber: NY103

PHAFiscal Year Beginning:(mm/yyyy) 07/01/2003

PHA Plan Contact Information:

Name: Alice Mumper, Executive Director

Phone: 845 -647-8686

TDD:

Email: eville@warwick.net

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

PHA Programs Administered :

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

Annual PHA Plan
Fiscal Year 20
 [24CFR Part 903.7]

i. Table of Contents

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

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<input checked="" type="checkbox"/> Attachment ny103b02 : Capital Fund Program Annual Statement		
<input checked="" type="checkbox"/> Attachment ny103c02 : 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 ny103d02 : Resident Membership on PHA Board or Governing Body		
<input checked="" type="checkbox"/> Attachment ny103e02 : Membership of Resident Advisory Board or Boards		
<input type="checkbox"/> Attachment__: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)		
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)		
<ul style="list-style-type: none"> • ny103f02 Statement of Progress • ny103g02 P&E Report FY2000 • ny103h02 P&E Report FY2001 • ny103i02 P&E Report FY2002 		

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.

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? \$11,001.00

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 **ny103c02**

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment **ny103b02**

3.D Demolition and Disposition

[24CFR Part 903.79(h)]

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

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

2. Activity Description

Demolition/Disposition Activity Description (Not including activities associated with HOPE VI or Conversion Activities)	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)	
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

4. Voucher Homeownership Program

[24CFR Part 903.79(k)]

A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24CFR part 982? (If "No", skip 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 home ownership 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 meetings 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 (Filename)
- 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: (provide name here)

Town of Wawarsing

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

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

3. PHA Requests for support from the Consolidated Plan Agency

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

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

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

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

A. Substantial Deviation from the 5-year Plan:

- Any change to the Mission Statement;
- 50% deletion from or addition to the goals and objectives as a whole; and
- 50% or more decrease in the quantifiable measurement of any individual goal or objective.

B. Significant Amendment or Modification to the Annual Plan:

- Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or Capital Fund Program Annual Statement;
- Any change in policy or procedure that requires a regulatory 30 -day posting;
- Any submission to HUD that requires a separate notification to residents, such as Hope VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership programs; and
- Any change inconsistent with the local, approved Consolidated Plan, in the discretion of the Executive Director.

Attachment A
Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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	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 3d documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

ELLENVILLE HOUSING AUTHORITY CAPITAL FUND PROGRAM

Attachment ny103b0 2

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PH Name: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations	\$20,508.00			
3	1408 Management Improvements				
4	1410 Administration	\$10,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$11,497.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$68,996.00			
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	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$11,001.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHAName: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2003	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
24	Amount of line 21 Related to Security – Soft Costs					
25	Amount of Line 21 Related to Security – Hard Costs					
26	Amount of line 21 Related to Energy Conservation Measures					

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

PHAName: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: 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	Funds Obligated	Funds Expended	
NY103	OPERATIONS	1406						
	Operations			\$20,508.00				
	Total Account #1406			\$20,508.00				
NY103	ADMINISTRATION	1410						
	Staff Salaries (Percentage of prorated salaries)			\$10,000.00				
	Total Account #1410			\$10,000.00				
NY103	FEES AND COSTS	1430						
	A/E Services			\$11,497.00				
	Total Account #1430			\$11,497.00				
NY103	DWELLING STRUCTURES	1460						
	Reshingle all roofs and mansards			\$68,996.00				
	Total Account #1460			\$68,996.00				
	TOTAL			\$111,001.00				

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

PHAName: ELLENVILLE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:	Federal FY of Grant: 2003
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Operations	6/30/05			6/30/07			
Administration	6/30/05			6/30/07			
Fees & Costs	6/30/05			6/30/07			
Dwelling Structure	6/30/05			6/30/07			

ELLENVILLE HOUSING AUTHORITY
Attachment ny103c0 2

Capital Fund Program Five - Year Action Plan

Part I: Summary

PHAName ELLENVILLE HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original 5 - Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1 2003	Work Statement for Year 2 FFY Grant: PHAFY: 2004	Work Statement for Year 3 FFY Grant: PHAFY: 2005	Work Statement for Year 4 FFY Grant: PHAFY: 2006	Work Statement for Year 5 FFY Grant: PHAFY: 2007
	Annual Statement				
NY103		\$11,001.00	\$11,001.00	\$11,001.00	\$11,001.00
CFPFunds Listed for 5-year planning		\$11,001.00	\$11,001.00	\$11,001.00	\$11,001.00
Replacement Housing Factor Funds					

PHA Public Housing Drug Elimination Program Plan

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

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

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

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

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

E. Target Areas

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

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

F. Duration of Program

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

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

G. PHDEP Program History

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

Fiscal Year of Funding	PHDEP Funding Received	Grant#	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY1995						
FY1996						
FY1997						
FY1998						
FY1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP -funded activities. This summary should not exceed 5 -10 sentences.

B. PHDEP Budget Summary

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

<p>FFY _____ PHDEP Budget Summary</p> <p>Original statement</p> <p>Revised statement dated:</p>
--

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

C. PHDEP Plan Goals and Activities

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

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

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							

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

9116 - Gun Buyback TAMatch					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

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

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

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

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

2.							
3.							

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

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

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

1.							
2.							
3.							

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

Ellenville Housing Authority

Required Attachment NY103d02: 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:

Juan Pagan
Carmelo Robles

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

- Elected
- Appointed

C. The term of appointment is (include the date term expires): 6/1/01 to 6/1/06

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

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
- the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
- Other (explain):

B. Date of next term expiration of a governing board member: 6/1/2002

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

Thomas Briggs, Mayor
Village of Ellenville

Required Attachment ny103e02 _____: 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.)

1. Juan Pagan
2. Carmelo Robles (Section 8 Participant)
3. Joanne Gaeta
4. Edna Fredick

Ellenville Housing Authority

Required Attachment NY103f02:

STATEMENT OF PROGRESS
5- YEAR PLAN MISSION AND GOALS
ELLENVILLE HOUSING AUTHORITY

The following describes the actions and activities that the Ellenville Housing Authority engaged in during the past year in order to carry out its mission and pursue the housing agency's mission and goals,

A. Expand the supply of assisted housing.

The Ellenville Housing Authority continues to work with the Village of Ellenville and Town of Wawarsing, including activities such as property inspections, attend REAP zone meetings and apply for additional vouchers through HUD.

B. Improve public housing management.

1. The Ellenville Housing Authority continues to maintain and modernize public housing properties that will result in improved PHAS scores. Improvements included welling units, building systems, building exteriors, sites and common areas.

2. The Ellenville Housing Authority continues to improve voucher management as related to SEMAP scores including the changing of payment standards to increase the number of units available.

C. Increase assisted housing choice.

1. The Ellenville Housing Authority continues to provide mobility assistance to program participants, including personal counseling and written information and explanations in areas such as portability, new unit search, housekeeping etc.

2. The Ellenville Housing Authority continues to conduct outreach to potential landlords, including personal meetings and providing written materials regarding the program rules and regulations.

ELLENVILLEHOSUINGAUTHORITYCAPITALFUNDPROGRAM

Attachmentny103g01

AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Summary						
PHAName: ELLENVILLEHOUSIN GAUTHORITY		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P10350100 ReplacementHousingFactorGrantNo:			FederalFYofGrant: 2000	
<input type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergenc ies <input type="checkbox"/> RevisedAnnualStatement(revisio:) <input checked="" type="checkbox"/> PerformanceandEvaluationRe portforPeriodEnding:12/31/02 <input type="checkbox"/> FinalPerformanceandEvaluationReport						
Line No.	SummarybyDevelopmentAcc ount	TotalEstimatedCost		TotalActualCost		
		Original	Revised	Obligated	Expended	
1	Totalnon -CFPFunds					
2	1406Operations	\$34,497.00	\$2,300.00	\$2,300.00	\$2,300.00	
3	1408ManagementImprovements	\$11,740.00	\$16,593.05	\$16,593.05	\$16,593.05	
4	1410Administration	\$11,499.00	\$11,499.00	\$11,499.00	\$11,499.00	
5	1411Audit					
6	1415LiquidatedDamages					
7	1430FeesandCosts	\$11,685.17	\$10,325.17	\$10,325.17	\$10,325.17	
8	1440SiteAcquisition					
9	1450SiteImprovement	\$12,479.88	\$17,261.01	\$17,261.01	\$17,261.01	
10	1460DwellingStructures	\$2,500.00	\$13,200.00	\$13,200.00	\$13,200.00	
11	1465.1DwellingEquipment —Nonexpendable	\$25,354.00	\$25,354.00	\$25,354.00	\$25,354.00	
12	1470NondwellingStructures	\$3,500.00	\$9,360.00	\$9,360.00	\$9,360.00	
13	1475NondwellingEquipment	\$1,734.95	\$9,097.77	\$9,097.77	\$9,097.77	
14	1485Demolition					
15	1490ReplacementReserve					
16	1492MovingtoWorkDemonstration					
17	1495.1RelocationCosts					
18	1499DevelopmentActiv ities					
19	1501CollaterizationorDebtService					
20	1502Contingency					
21	AmountofAnnualGrant:(sumoflines2 –20)	\$114,990.00	\$114,990.00	\$114,990.00	\$114,990.00	
22	Amountofline21RelatedtoLBPActivities					
23	Amountofline21 RelatedtoSection504compliance					
24	Amountofline21RelatedtoSecurity –SoftCosts					
25	AmountofLine21RelatedtoSecurity – HardCosts					

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

PHAName: ELLENVILLE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY36P10350100 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:)
 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
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHAName: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P10350100 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.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
NY103	OPERATIONS	1406						
	Operations Total Account #1406			\$34,497.00 \$34,497.00	\$2,300.00 \$2,300.00	\$2,300.00 \$2,300.00	\$2,300.00 \$2,300.00	Completed
NY103	MANAGEMENT IMPROVEMENTS	1408						
	Replace workstation computer Purchase new computers software program. Total Account #1408			\$1,200.00 \$10,540.00 \$11,740.00	\$6,053.05 \$10,540.00 \$16,593.05	\$6,053.05 \$10,540.00 \$16,593.05	\$6,053.05 \$10,540.00 \$16,593.05	Completed Completed
NY103	ADMINISTRATION	1410						
	Staff Salaries (percentage of prorated salaries) Total Account #1410			\$11,499.00 \$11,499.00	\$11,499.00 \$11,499.00	\$11,499.00 \$11,499.00	\$11,499.00 \$11,499.00	Completed
NY103	FEES AND COSTS	1430						
	A/E Services Ads for Contractors Bids - Record Ads for Contractors - Bid - Freeman Total Account #1430			\$11,250.00 \$172.94 \$262.23 \$11,685.17	\$9,890.00 \$172.94 \$262.23 \$10,325.17	\$9,890.00 \$172.94 \$262.23 \$10,325.17	\$9,890.00 \$172.94 \$262.23 \$10,325.17	Completed Completed Completed
NY103	SITE IMPROVEMENTS	1450						
	Change Timers for parking lot and building light to sensors. Save energy and provide lighting when needed. Finish sealing & stripping parking lots Install tub rail section on walkway Repair to lot decking Total Account #1450			\$4,000.00 \$779.59 \$1,000.00 \$6,700.29 \$12,479.88	\$8,781.13 \$779.59 \$1,000.00 \$6,700.29 \$17,261.01	\$8,781.13 \$779.59 \$1,000.00 \$6,700.29 \$17,261.01	\$8,781.13 \$779.59 \$1,000.00 \$6,700.29 \$17,261.01	Completed Completed Completed Completed

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

PHAName: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P10350100 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.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
NY103	DWELLING STRUCTURES	1460						
	From PHAS inspection – Install some type wall in Apts. To make rail sturdy & tight.			\$2,500.00	\$13,200.00	\$13,200.00	\$13,200.00	Completed
	Total Account #1460			\$2,500.00	\$13,200.00	\$13,200.00	\$13,200.00	
	DWELLING EQUIPMENT	1465						
	Replace Kitchen ranges in all units.			\$25,354.00	\$25,354.00	\$25,354.00	\$25,354.00	Completed
	Total Account 1465			\$25,354.00	\$25,354.00	\$25,354.00	\$25,354.00	
	NONDWELLING STRUCTURES	1470						
	Install canopy over Community Room door to prevent rooting from water			\$3,500.00	\$9,360.00	\$9,360.00	\$9,360.00	Completed
	Total Account 1470			\$3,500.00	\$9,360.00	\$9,360.00	\$9,360.00	
	NONDWELLING EQUIPMENT	1475						
	Purchase safety storage cabinet per REAC inspector			\$669.45	\$4,669.45	\$4,669.45	\$4,669.45	Completed
	Purchase parcel locker for tenant packages delivered by post office.			\$1,065.50	\$4,428.32	\$4,428.32	\$4,428.32	Completed
	Total Account 1475			\$1,734.95	\$9,097.77	\$9,097.77	\$9,097.77	
	GRAND TOTAL			\$114,990.00	\$114,990.00	\$114,990.00	\$114,990.00	

ELLENVILLEHOUSINGAUTHORITYCAPITALFUNDPROGRAM

Attachmentny103h01

AnnualStatement/PerformanceandEvaluationReport					
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Summary					
PHAName: ELLENVILLEHOUSINGAUTHORITY		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P103501-01 ReplacementHousingFactorGrantNo:			FederalFYofGrant: 2001
<input type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input type="checkbox"/> RevisedAnnualStatement(revisionno:) <input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding:12/31/02 <input type="checkbox"/> FinalPerformanceandEvaluationReport					
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	\$26,783.00	\$26,783.00	\$26,783.00	\$26,783.00
3	1408ManagementImprovements	\$10,000.00	\$10,000.00	\$10,000.00	\$2,701.43
4	1410Administration	\$10,000.00	\$10,000.00	\$10,000.00	\$10,000.00
5	1411Audit				
6	1415LiquidatedDamages				
7	1430FeesandCosts	\$11,499.00	\$11,499.00	\$9,031.97	\$2,668.36
8	1440SiteAcquisition				
9	1450SiteImprovement	\$23,994.00	\$23,994.00	\$0.00	\$0.00
10	1460DwellingStructures				
11	1465.1DwellingEquipment —Nonexpendable	\$35,000.00	\$35,000.00	\$0.00	\$0.00
12	1470NondwellingStructures				
13	1475NondwellingEquipment				
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1499DevelopmentActivities				
19	1501CollateralizationorDebtService				
20	1502Contingency				
21	AmountofAnnualGrant:(sumoflines2 –20)	\$117,276.00	\$117,276.00	\$55,814.97	\$42,152.79
22	Amountoffline21RelatedtoLBPActivities				
23	Amountoffline21RelatedtoSection504compliance				

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

PHAName: ELLENVILLE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY36P103501-01 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:)
 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
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHANa me: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P103501-01 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	Funds Obligated	Funds Expended	
NY103	OPERATIONS	1406						
	Operations			\$26,783.00	\$26,783.00	\$26,783.00	\$26,783.00	Completed
	Total Account #1406			\$26,783.00	\$26,783.00	\$26,783.00	\$26,783.00	
NY103	MANAGEMENT IMPROVEMENTS	1408						
	Total Account #1408			\$10,000.00	\$10,000.00	\$10,000.00	\$2,701.43	27% Completed
	Total Account #1408			\$10,000.00	\$10,000.00	\$10,000.00	\$2,701.43	
NY103	ADMINISTRATION	1410						
	Staff Salaries (percentage of prorated salaries)			\$10,000.00	\$10,000.00	\$10,000.00	\$10,000.00	Completed
	Total Account #1410			\$10,000.00	\$10,000.00	\$10,000.00	\$10,000.00	
NY103	FEES AND COSTS	1430						
	A/E Services			\$11,499.00	\$11,499.00	\$9,031.97	\$2,668.36	30% Completed
	Total Account #1430			\$11,499.00	\$11,499.00	\$9,031.97	\$2,668.36	
NY103	SITE IMPROVEMENTS	1450						
	Total Account #1450			\$23,994.00	\$23,994.00	\$0.00	\$0.00	
	Total Account #1450			\$23,994.00	\$23,994.00	\$0.00	\$0.00	
	NONDWELLING EQUIPMENT	1475						
	Total Account #1475			\$35,000.00	\$35,000.00	\$0.00	\$0.00	
	Total Account #1475			\$35,000.00	\$35,000.00	\$0.00	\$0.00	
	GRAND TOTAL			\$117,276.00	\$117,276.00	\$55,814.97	\$42,152.79	

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

PHAName: ELLENVILLEHOUSINGAUTHORITY		GrantTypeandNumber CapitalFundProgramNo: NY36P103501-01 ReplacementHousingFactorNo:				FederalFYofGrant: 2001	
DevelopmentNumber Name/HA-Wide Activities	AllFundObligated (QuarterEndingDate)			AllFundsExpended (QuarterEnding Date)			ReasonsforRevisedTargetDates
	Original	Revised	Actual	Original	Revised	Actual	
Operations	6/30/03		6/15/02	6/30/05		6/30/02	
Management Improvements	6/30/03		6/30/02	6/30/05			
Administration	6/30/03		6/15/02	6/30/05		6/28/02	
FeesandCosts	6/30/03			6/30/05			
SiteImprovements	6/30/03			6/30/05			
NonDwellingEquipment	6/30/03			6/30/05			

ELLENVILLE HOUSING AUTHORITY CAPITAL FUND PROGRAM

Attachment ny 103 i01

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHAName: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P103501-02 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations	\$27,754.00	\$25,000.00	\$25,000.00	\$0.00
3	1408 Management Improvements	\$3,994.00	\$500.00	\$0.00	\$0.00
4	1410 Administration	\$10,000.00	\$10,000.00	\$10,000.00	\$0.00
5	1411 Audits				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$11,499.00	\$10,000.00	\$0.00	\$0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	\$15,000.00	\$19,006.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$20,754.00	\$13,167.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment — Nonexpendable	\$20,000.00	\$15,501.00	\$0.00	\$0.00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$2,000.00	\$17,827.00	\$0.00	\$0.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$111,001.00	\$111,001.00	\$35,000.00	\$0.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				

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

PHAName: ELLENVILLE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY36P103501-02 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:)
 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
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHAName: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P103502-02 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	Funds Obligated	Funds Expended	
NY103	OPERATIONS	1406						
	Operations			\$ 27,754.00	\$ 2,500.00	\$ 2,500.00	\$ 0.00	Obligated
	Total Account #1406			\$27,754.00	\$25,000.00	\$25,000.00	\$0.00	
NY103	MANAGEMENT IMPROVEMENTS	1408						
	Replace Computer Work System			\$2,500.00	\$0.00	\$0.00	\$0.00	No Activity
	Purchase New Laser Printer			\$1,000.00	\$0.00	\$0.00	\$0.00	No Activity
	Purchase New Facsimile Machine			\$494.00	\$500.00	\$0.00	\$0.00	No Activity
	Total Account #1408			\$3,994.00	\$ 500.00	\$0.00	\$0.00	
NY103	ADMINISTRATION	1410						
	Staff Salaries (percentage of prorated salaries)			\$10,000.00	\$10,000.00	\$10,000.00	\$0.00	Obligated
	Total Account #1410			\$10,000.00	\$10,000.00	\$10,000.00	\$0.00	
NY103	FEES AND COSTS	1430						
	A/E Fees			\$11,499.00	\$10,000.00	\$0.00	\$0.00	No Activity
	Total Account #1430			\$11,499.00	\$1,000.00	\$0.00	\$0.00	
NY103	SITE IMPROVEMENTS	1450						
	Repair Tot Lot Surface & Replace Equip.			\$10,000.00	\$10,000.00	\$0.00	\$0.00	No Activity
	Change Lights in Parking Lots			\$5,000.00	\$9,006.00	\$0.00	\$0.00	No Activity
	Total Account #1450			\$15,000.00	\$19,006.00	\$0.00	\$0.00	

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

PHAName: ELLENVILLE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P103502-02 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	Funds Obligated	Funds Expended	
	DWELLING STRUCTURES	1460						
	Remove ACS sleeves at Eastwood Site			\$15,000.00	\$10,000.00	\$0.00	\$0.00	No Activity
	Roof repair for A -13			\$5,754.00	\$3,167.00	\$0.00	\$0.00	No Activity
	Total Account #1460			\$20,754.00	\$13,167.00	\$0.00	\$0.00	
	DWELLING EQUIPMENT	1475						
	Replace Toilets w/Water saving Model			\$10,000.00	\$5,000.00	\$0.00	\$0.00	No Activity
	Replace Kitchen Ranges			\$0.00	\$5,000.00	\$0.00	\$0.00	No Activity
	Paint Selected Apartments			\$0.00	\$5,501.00	\$0.00	\$0.00	No Activity
	Replace Noisy Stairs in Apts.			\$10,000.00	\$0.00	\$0.00	\$0.00	No Activity
	Total Account #1465			\$20,000.00	\$15,501.00	\$0.00	\$0.00	
	NONDWELLING EQUIPMENT							
	Replace Chairs \$ Equip. In Comm. Room			\$2,000.00	\$2,000.00	\$0.00	\$0.00	No Activity
	Replace Sewer Lines at Hillside Heights			\$0.00	\$15,827.00	\$0.00	\$0.00	No Activity
	Total account #1475			\$2,000.00	\$17,827.00	\$0.00	\$0.00	
	GRAND TOTAL			\$111,001.00	\$111,001.00	\$35,000.00	\$0.00	

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

PHAName: ELLENVILLEHOUSINGAUTHORITY		GrantTypeandNumber CapitalFundProgramNo: NY36P103502-02 ReplacementHousingFactorNo:				FederalFYofGrant: 2002	
DevelopmentNumber Name/HA-Wide Activities	AllFundObligated (QuarterEndingDate)			AllFundsExpended (QuarterEndingDate)			ReasonsforRevisedTargetDates
	Original	Revised	Actual	Original	Revised	Actual	
Operations	6/16/04			6/16/06			
Management Improvements	6/16/04			6/16/06			
Administration	6/16/04			6/16/06			
FeesandCosts	6/16/04			6/16/06			
SiteImprovements	6/16/04			6/16/06			
NonDwellingEquipment	6/16/04			6/16/06			