

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

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

Housing Authority of the City of Ponca City, Oklahoma
201 East Broadway
Ponca City, Oklahoma 74601

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

PHA Plan Agency Identification

PHA Name: Housing Authority of the City of Ponca City

PHA Number: OK111

PHA Fiscal Year Beginning: (12/2003)

PHA Plan Contact Information:

Name: Roger D. Fleetwood

Phone: 580-762-4445

TDD: na

Emai: pcha@poncacity.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
 [24 CFR Part 903.7]

i. Table of Contents

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

Contents	<u>Page #</u>
Annual Plan	
i. Executive Summary (optional)	2
ii. Annual Plan Information	2
iii. Table of Contents	
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2. Capital Improvement Needs	2
3. Demolition and Disposition	3
4. Homeownership: Voucher Homeownership Program	3
5. Crime and Safety: PHDEP Plan	4
6. Other Information:	
A. Resident Advisory Board Consultation Process	5
B. Statement of Consistency with Consolidated Plan	5
C. Criteria for Substantial Deviations and Significant Amendments	6
D. Voluntary Conversion	6
Attachments	
<input checked="" type="checkbox"/> Attachment A : Supporting Documents Available for Review	1
<input checked="" type="checkbox"/> Attachment B: Capital Fund Program Annual Statement	5
<input checked="" type="checkbox"/> Attachment C: Capital Fund Program 5 Year Action Plan	10
<input type="checkbox"/> Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement	
<input type="checkbox"/> Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan	
<input type="checkbox"/> Attachment D: Resident Membership on PHA Board or Governing Body	23
<input checked="" type="checkbox"/> Attachment E: Membership of Resident Advisory Board or Boards	24
<input checked="" type="checkbox"/> Attachment F: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)included within text	
<input type="checkbox"/> Other (List below, providing each attachment name)	

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

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

Information contained in FY2003 Agency Plan for the Housing Authority of the City of Ponca City is provided in this format to keep staff, resident, commissioners and the general public abreast of ongoing activities as well as future endeavors that the Authority has set as goals for itself.

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

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

The Authority has updated Admissions and Occupancy Policies for its Public Housing Programs as well as supporting policies. The Authority has met the challenges that were set for itself in last year's plan and has set new goals for the future.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (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? \$ 312,872.00

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

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

1. Yes 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: <u>(DD/MM/YY)</u>
5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

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

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

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

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

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

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

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

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

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

6. Other Information

[24 CFR Part 903.7 9 (r)]

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

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

2. If yes, the comments are Attached at Attachment (File name)

3. In what manner did the PHA address those comments? (select all that apply)

- The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 Yes No: below or

- Yes No: at the end of the RAB Comments in Attachment ____.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
- Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (State of Oklahoma)
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. (continuation of providing affordable housing to low to moderate income persons)
 - 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: Substantial deviation for the Authority is a change in our mission or a change in a goal or objective to meet that mission.

B. Significant Amendment or Modification to the Annual Plan:

A significant change in rent, admissions and occupancy policies or organization of the waiting list. Additions on non-emergency work items that are not included in the current annual plan or five year plan exceeding the acquisition threshold for small purchases per the Authority's procurement policy or a change in use of replacement reserve funds under the capital fund program. Also additions of new activities or changes with regard to demolition, disposition, designation, homeownership programs or conversion activities.

C. Voluntary Conversion of Developments:

The Authority has determined in its assessments that converting of public housing eligible developments to tenant-based assistance is inappropriate at this time because it creates an increase cost associated with daily operations as well as conversion procedures. The ability to occupy is a factor that is not feasible at this time. Due to the fact of newer tax credit properties in the community, residents surveyed would not opt to use vouchers to live in the less desired public housing areas, therefore, the workability of vouchers in this type of community setting is inappropriate.

Attachment A
Supporting Documents Available for Review

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

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
x	Schedule of flat rents offered at each public housing development <input checked="" 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
x	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
x	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
na	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
na	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
na	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
na	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
na	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
na	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
na	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
na	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
x	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
x	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
x	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
na	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
na	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
na	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 checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
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
na	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of the City of Ponca City, OK		Grant Type and Number Capital Fund Program Grant No: OK56P11150103 Replacement Housing Factor Grant No:			Federal FY of Grant: FY2003
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <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	0			
2	1406 Operations	38,272			
3	1408 Management Improvements Soft Costs	0			
	Management Improvements Hard Costs	7,400			
4	1410 Administration	15,000			
5	1411 Audit	500			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	20,000			
9	1450 Site Improvement	23,000			
10	1460 Dwelling Structures	92,125			
11	1465.1 Dwelling Equipment—Nonexpendable	1,500			
12	1470 Nondwelling Structures	2,300			
13	1475 Nondwelling Equipment	112,775			
14	1485 Demolition	0	0		
15	1490 Replacement Reserve	0	0		
16	1492 Moving to Work Demonstration	0	0		
17	1495.1 Relocation Costs	0	0		
18	1499 Development Activities	0	0		
19	1502 Contingency	0	0		
	Amount of Annual Grant: (sum of lines.....)	312,872			
	Amount of line XX Related to LBP Activities				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of the City of Ponca City, OK		Grant Type and Number Capital Fund Program Grant No: OK56P11150103 Replacement Housing Factor Grant No:		Federal FY of Grant: FY2003	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <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	
	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

PHA Name: Housing Authority of the City of Ponca City, Oklahoma		Grant Type and Number Capital Fund Program Grant No: OK56P11150103. Replacement Housing Factor Grant No:				Federal FY of Grant: FY2003			
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
HA wide	Operations		1406		38,272				
HA wide	Consultant		1408		5,000				
HA wide	Applicant Outreach		1408		2,400				
HA wide	Non-Tech Salaries		1410		15,000				
HA wide	CFP Audit		1411	1	500				
OK56P001	Entrance Door Canopy's		1450	4	2,000				
OK56P001-2	Exterior Park Benches/Tables		1450	4	2,000				
OK56P001-2	Tree/Brush Removal		1450		6,000				
OK56P002	Perimeter Fencing		1450	1	2,500				
OK56P002	Sidewalk Repair/Replacement		1450	2	3,000				
OK56P002	Concrete Driveway Installation		1450	3	7,500				
OK56P001	Roof Vents		1460	20	2,000				
OK56P002	Replacement of Porch Post		1460	30	1,800				
OK56P002	Foundation Work		1460	3	12,000				
OK56P002	Storage Closet Door Replacement		1460	35	3,500				
OK56P002	Window Replacement Vinyl Dbl Hung		1460	30	34,600				
OK56P002	Kitchen/Bath Cabinet Replacement		1460	20	20,000				
OK56P002	Kitchen/Bath Faucet Replacement		1460	73	5,475				
OK56P002	Kitchen/Bath Sink Replacement		1460	73	12,750				
OK56P002	Carbon Monoxide Alarms/Detectors		1465.1	73	1,500				
OK56P001	Individual Mailboxes		1470	113	2,300				
HA Wide	Lawn Mowers		1475	2	8,000				

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

PHA Name: Housing Authority of the City of Ponca City, Oklahoma		Grant Type and Number Capital Fund Program Grant No: OK56P11150103. Replacement Housing Factor Grant No:				Federal FY of Grant: FY2003			
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
HA Wide	Maintenance Hand Tools (3 sets)		1475	3	3,100				
HA Wide	Carpet Extractor		1475	1	4,500				
HA Wide	Shop Vac		1475	1	250				
HA Wide	110 Amp Welder/400 Watt Generator		1475	1	2,500				
HA Wide	Air Compressor		1475	1	1,000				
HA Wide	Table Saw		1475	1	1,200				
HA Wide	Combustible Gas Detector		1475	1	300				
HA Wide	Electric Circuit Locators		1475	3	225				
OK56P001	Emergency Generator		1475	1	60,000				
HA Wide	Roto Machine		1475	1	1,500				
HA Wide	Cordless Drills		1475	3	600				
HA Wide	Combination Saw Kit		1475	1	800				
HA Wide	A/C Clamp Ampmeter		1475	1	300				
OK 56P001	Security Camera's		1475	4	2,500				
HA Wide	Maintenance/inspector Vehicle		1475	1	20,000				
HA Wide	Hand Held Inspection Module		1475	1	2,500				
HA Wide	Computer Hardware		1475	3	3,500				
HA Wide	Site Acquisition		1498	1	20,000				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of the City of Ponca City, Oklahoma		Grant Type and Number Capital Fund Program No: OK56P11150103 Replacement Housing Factor No:				Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
OK56P111001	09/05			09/07			
OK56P111002	09/05			09/07			
HA Wide Mgmt. Imp.	09/05			09/07			

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Housing Authority of City of Ponca City, Oklahoma		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2			
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
OK56P111001		133,246	158,872	128,472	24,526
OK56P111002		29,126	97,000	84,400	188,346
HA Wide		150,500	57,000	100,000	100,000
Total CFP Funds (Est.)		312,872	312,872	312,872	312,872
Total Replacement Housing Factor Funds					

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

Activities for Year 1	Activities for Year : 4 FFY Grant: 2006 PHA FY: 2006			Activities for Year: 5 FFY Grant: 2007 PHA FY: 2007		
	OK56P111001	Counter tops	80000	OK56P111001	Refrigerators	6750
		Kit/Bath sinks	20000		Ranges	5250
		Emergency cords	28472		Washers/Dryers	2000
					Reseal Ext. Windows	10526
		Total CFP Cost	128472			24526

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

Activities for Year 1	Activities for Year : 2 FFY Grant: 2004 PHA FY: 2004			Activities for Year: 3 FFY Grant: 2005 PHA FY: 2005		
	OK56P111002	Refrigerators	4500	OK56P111002	Electric Service	4000
		Ranges	3500		Landscape	4000
		Sidewalk/Porch Repl	11126		Tree Prun/Removal	4000
		Termite Treatment	5000		Interior Mod. Work	80000
		Bathtub Repr/Repl	5000		Vinyl Siding Repl.	5000
		Total CFP Cost	29126			97000

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

Activities for Year 1	Activities for Year : 4 FFY Grant: 2006 PHA FY: 2006			Activities for Year: 5 FFY Grant: 2007 PHA FY: 2007		
	OK56P111002	Counter tops	50000	OK5P111002	Parking Lot Repair	60000
		Sinks/Faucets	21900		Tile Floor Replacmt.	73000
		Vent Hoods	11500		Guttering	30146
		Vinyl Siding	1000		Replace Furnaces	14000
					Replace A/C	11200
		Total CFP Cost	84400			188346

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

Activities for Year 1	Activities for Year : 1 FFY Grant: 2004 PHA FY: 2004			Activities for Year: 2 FFY Grant: 2005 PHA FY: 2005		
	OK56111-PHA wide	Copy Machine	10000	OK56111-PHA wide	Technical Salary	30000
		Admin Bldg Expansion	35000		Employee Benefits	5000
		Site Acquisition	25000		Operations	2000
		Technical Salaries	30000		Computer Equipment	6000
		Employee Benefits	5000		Computer Software	2000
		A&E Misc.	3500		Non-Tech Salary	2000
		Mold Testing	2000		Site Acquisition	10000
		Staff Vehicle	24000			
		Non-Tech Salaries	2000			
		Maintenance Tools	2000			
		Operations	12000			
		Total CFP Cost	150500			57000

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

Activities for Year 1	Activities for Year : 4 FFY Grant: 2006 PHA FY: 2006			Activities for Year: 5 FFY Grant: 2007 PHA FY: 2007		
	OK56P111-PHA Wide	Technical Salary	2000	OK56P111-PHA Wide	Maintenance Uniform	500
		Employee Benefits	6000		Technical Salary	32000
		Operating Budget	20000		Employee Benefits	5500
		Vehicle	20000		Non-tech Salary	30000
		Non-Tech Salary	12000		Operations	22000
		Maint. Shop/Office	30000		Site Acquisition	10000
		Site Acquisition	10000			
		Total CFP Cost	100000			100000

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of the City of Ponca City, Oklahoma		Grant Type and Number Capital Fund Program Grant No: OK5611150100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<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: 06/30/02 Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	32450	32450	32450	32450
3	1408 Management Improvements Soft Costs	0	0		
	Management Improvements Hard Costs	5000	5004	5004	5004
4	1410 Administration	1000	0		
5	1411 Audit	1490	1600	0	
6	1415 Liquidated Damages	0	0		
7	1430 Fees and Costs	19900	18100	8196.14	6196.14
8	1440 Site Acquisition	0	0		
9	1450 Site Improvement	0	0		
10	1460 Dwelling Structures	193450	200850	200850	43723
11	1465.1 Dwelling Equipment—Nonexpendable	0	2800	1890	1890
12	1470 Nondwelling Structures	28000	32000	32000	1981.75
13	1475 Nondwelling Equipment	32000	31722	31722	31722
14	1485 Demolition	0	0		
15	1490 Replacement Reserve	0	0		
16	1492 Moving to Work Demonstration	0	0		
17	1495.1 Relocation Costs	0	0		
18	1499 Development Activities	0	0		
19	1502 Contingency	11526	0		

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Housing Authority of the City of Ponca City, Oklahoma		Grant Type and Number Capital Fund Program Grant No: OK5611150100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000	
<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: 06/30/02 Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
	Amount of Annual Grant: (sum of lines.....)	324526	324526	312112.14	122966.89	
	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 III: Implementation Schedule							
PHA Name: Housing Authority of Ponca City, Oklahoma			Grant Type and Number Capital Fund Program No: OK56P11150100 Replacement Housing Factor No:			Federal FY of Grant: 2000	
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	
PHA Wide Mgmt Imp	09/02			09/04			
PHA Wide Admin.	09/02			09/04			
OK56P111001	09/02			09/04			
OK56P111001	09/02			09/04			

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Housing Authority of the City of Ponca City, Oklahoma		Grant Type and Number Capital Fund Program Grant No: OK5611150101 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:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/02 Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	32450	42000	42000	42000	
3	1408 Management Improvements Soft Costs					
	Management Improvements Hard Costs	5000	22200	14718.82	14718.82	
4	1410 Administration	1000	10000	10000	10000	
5	1411 Audit	1490	1600	500	500	
6	1415 Liquidated Damages	0	0			
7	1430 Fees and Costs	19900	0			
8	1440 Site Acquisition	0	30000	0	0	
9	1450 Site Improvement	0	59384	12958.85	12958.85	
10	1460 Dwelling Structures	193450	46000	0	0	
11	1465.1 Dwelling Equipment—Nonexpendable	0	8000	0	0	
12	1470 Nondwelling Structures	28000	0			
13	1475 Nondwelling Equipment	32000	112000	68911.48	68911.48	
14	1485 Demolition	0	0			
15	1490 Replacement Reserve	0	0			
16	1492 Moving to Work Demonstration	0	0			
17	1495.1 Relocation Costs	0	0			
18	1499 Development Activities	0	0			
19	1502 Contingency	0	0			
	Amount of Annual Grant: (sum of lines.....)	331184	331184	149089.15	149089.15	
	Amount of line XX Related to LBP Activities					
	Amount of line XX Related to Section 504 compliance					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of the City of Ponca City, Oklahoma		Grant Type and Number Capital Fund Program Grant No: OK5611150101 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:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/02 Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages									
PHA Name: Housing Authority of Ponca City, Oklahoma			Grant Type and Number Capital Fund Program Grant No: OK56P11150101 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
HA Wide	Security Measures		1406			12,000		12,000	complete
HA Wide	Operations		1406			30000		30000	Complete
HA Wide	Computer Software Upgrades		1408			3000		600	
HA Wide	Consultant Admin. Needs		1408			6000		3155	
HA Wide	Applicant Outreach		1408			1200		1200	Complete
HA Wide	Computer Software Training		1408			1000		915.82	Complete
HA Wide	Computer Hardware		1408			5000		5448	Complete
HA Wide	Copy Machine		1408			6000		3400	Complete
HA Wide	Technical Salaries		1410			10000		10000	Complete
HA Wide	Audit		1411			1600		500	Complete
HA Wide	Site Acquisition		1440			30000		0	
HA Wide	Termite Treatment		1450			3384		1750	
OK56P111002	Sidewalk Repair/Replacement		1450			4000		0	
“	Perimeter Fencing		1450			5000		5483.85	Complete
HA Wide	Tree Pruning		1450			2000		5725	Complete
OK56P111001	Sprinkler system		1450			5000		0	
“	Parking Lot		1450			40000		0	
“	New kitchen sinks/faucets		1460			23000		0	
OK56P111002	Re-tile floors		1460			8000		0	
“	New Cabinets		1460			15000		0	
“	Refrigerators		1465.1			4500		0	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of Ponca City, Oklahoma			Grant Type and Number Capital Fund Program No: OK56P11150101 Replacement Housing Factor No:			Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide Mgmt Imp	09/03			09/05			
HA Wide Administrative	09/03			09/05			
OK56P111001	09/03			09/05			
OK56P111002	09/03			09/05			

PHA Public Housing Drug Elimination Program Plan

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

Section 1: General Information/History

- A. Amount of PHDEP Grant \$** _____
- B. Eligibility type (Indicate with an “x”)** N1 _____ N2 _____ R _____
- C. FFY in which funding is requested** _____
- D. Executive Summary of Annual PHDEP Plan**

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

E. Target Areas

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

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

F. Duration of Program

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

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

G. PHDEP Program History

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

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

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

B. PHDEP Budget Summary

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

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

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in

shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

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

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

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)	Perform
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)	Perform
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)	Perform
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
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
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
1.							
2.							
3.							

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

Required Attachment ____: 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: Barbara Ennis

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

- Elected
- Appointed

C. The term of appointment is (include the date term expires): 3-year term, expiring May 2003

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: May 2003

C. Name and title of appointing official(s) for governing board (Tom Leonard, Mayor)

Required Attachment _____: 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.)

Lisa Dischhauser
Mable Smith
M.C. Honeyman
Kevin Unruh
Anita Johnson