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

PHA Plans

5 Year Plan for Fiscal Years 2003 - 2007
Annual Plan for Fiscal Year 2003

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

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OMB Approval No: 2577-0226
Expires: 03/31/2002

PHA Plan
Agency Identification

PHA Name: Housing Authority of Osage County

PHA Number: OK123

PHA Fiscal Year Beginning: 04/2003

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
☐ PHA local 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
☐ PHA local offices
☐ Main administrative office of the local government
☒ Main administrative office of the County government
☐ Main administrative office of the 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)

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5-YEAR PLAN
PHA FISCAL YEARS 2000 - 2004
[24 CFR Part 903.5]

A. Mission

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

☒ The PHA's mission is: *The mission of the Housing Authority of Osage County is to assist low-income families with safe, decent and affordable housing opportunities as they strive to achieve self-sufficiency and improve the quality of their lives. The Housing Authority is committed to operation in an efficient, ethical and professional manner. The Housing Authority will create and maintain partnerships with its clients and appropriate community agencies in order to accomplish this mission.*

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS**. (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

☒ PHA Goal: Expand the supply of assisted housing
Objectives:
- ☐ Apply for additional rental vouchers:
- ☒ Reduce public housing vacancies:
- ☐ Leverage private or other public funds to create additional housing opportunities:
- ☐ Acquire or build units or developments
- ☐ Other (list below)

☒ PHA Goal: Improve the quality of assisted housing
Objectives:
- ☐ Improve public housing management: (PHAS score)

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☐ Improve voucher management: (SEMAP score)
☐ Increase customer satisfaction:
☐ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
☐ Renovate or modernize public housing units:
☐ Demolish or dispose of obsolete public housing:
☐ Provide replacement public housing:
☐ Provide replacement vouchers:
☒ Other: *1) Continue to improve housing with the Capital Fund Program*
2) Implement safety training for residents and employees on use of the Safe Room in the event of threatening weather.

☒ PHA Goal: Increase assisted housing choices
Objectives:
☐ Provide voucher mobility counseling:
☐ Conduct outreach efforts to potential voucher landlords
☐ Increase voucher payment standards
☐ Implement voucher homeownership program:
☐ Implement public housing or other homeownership programs:
☐ Implement public housing site-based waiting lists:
☐ Convert public housing to vouchers:
☒ Other: *Currently working in tandem with Help Works Homes, Inc. in their efforts to provide group homes for developmentally disabled citizens which will be located at Cedar Ridge in Pawhuska, OK.*

HUD Strategic Goal: Improve community quality of life and economic vitality

☒ PHA Goal: Provide an improved living environment
Objectives:
☐ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
☐ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
☐ Implement public housing security improvements:
☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
☒ Other: *Currently working in tandem with Help Works Homes, Inc. in their efforts to provide group homes for developmentally disabled citizens which will be located at Cedar Ridge in Pawhuska, OK.*

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HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

☒ PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- ☐ Increase the number and percentage of employed persons in assisted families:
- ☒ Provide or attract supportive services to improve assistance recipients' employability:
- ☒ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- ☐ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
- ☒ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- ☒ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
- ☐ Other: (list below)

Other PHA Goals and Objectives: (list below)

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Annual PHA Plan
PHA Fiscal Year 2000
[24 CFR Part 903.7]

i. Annual Plan Type:
Select which type of Annual Plan the PHA will submit.

☐ **Standard Plan**

Streamlined Plan:

☒ **High Performing PHA**
☐ **Small Agency (<250 Public Housing Units)**
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

ii. Executive Summary of the Annual PHA Plan
[24 CFR Part 903.7 9 (r)]
Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

1) *Enhance the image of public housing in our community.*
2) *Make public housing the affordable housing of choice for the very low-income residents of our community.*
3) *Deliver timely and high quality maintenance service to the residents of the Housing Authority of Osage County.*
4) *Help the residents feel safer in their homes.*
5) *Help provide assisted living homes for developmentally disabled and handicapped persons.*

iii. Annual Plan Table of Contents
[24 CFR Part 903.7 9 (r)]
Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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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. Note: 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.

Required Attachments:

☒ A. Admissions Policy for Deconcentration
☒ B. FY 2003 Capital Fund Program Annual Statement
☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

☐ PHA Management Organizational Chart
☒ FY 2003 Capital Fund Program 5 Year Action Plan
☐ Public Housing Drug Elimination Program (PHDEP) Plan
☒ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
☐ Other (List below, providing each attachment name)

Supporting Documents Available for Review

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**	**Applicable 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	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs	5 Year and Annual Plans

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List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Applicable Plan Component**
	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.	
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) 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), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/*99 Quality Housing and Work Responsibility Act Initial Guidance; Notice* and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents ☒ 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 ☒ check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies ☐ 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	Public housing grievance procedures ☒ check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures

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List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Applicable Plan Component**
N/A	Section 8 informal review and hearing procedures ☐ 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 the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
N/A	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
N/A	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
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	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	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program ☐ check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	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
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

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1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	N/A						
Income >30% but <=50% of AMI	N/A						
Income >50% but <80% of AMI	N/A						
Elderly	N/A						
Families with Disabilities	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

☒ Consolidated Plan of the Jurisdiction/s
Indicate year: 2003

☐ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset

☐ American Housing Survey data
Indicate year:

☐ Other housing market study
Indicate year:

☐ Other sources: (list and indicate year of information)

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B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s**. Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) ☐ Section 8 tenant-based assistance ☒ Public Housing ☐ Combined Section 8 and Public Housing ☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	23		
Extremely low income <=30% AMI	15	65%	
Very low income (>30% but <=50% AMI)	6	30%	
Low income (>50% but <80% AMI)	2	9%	
Families with children	15	65%	
Elderly families	5	22%	
Families with Disabilities	3	13%	
Race/ethnicity	Caucasian 15	65%	
Race/ethnicity	Indian 6	26%	
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing			

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Housing Needs of Families on the Waiting List			
Only)			
1BR	6		
2 BR	8		
3 BR	8		
4 BR	1		
5 BR			
5+ BR			

Is the waiting list closed (select one)? ☒ No ☐ Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☐ Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☐ No ☐ Yes

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR** and the Agency's reasons for choosing this strategy.

We are currently working in tandem with Help Works Homes, Inc. in an effort to provide group homes for developmentally disabled citizens which will be located at Cedar Ridge in Pawhuska, OK. We are embracing this move in order to help provide an assisted living environment for those who are unable to live alone and for those whose living conditions are substandard.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line

☒ Reduce turnover time for vacated public housing units

☒ Reduce time to renovate public housing units

☐ Seek replacement of public housing units lost to the inventory through mixed finance development

☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources

☐ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction

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- [x] Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- [ ] Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- [ ] Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- [x] Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- [ ] Other (list below)

Strategy 2: Increase the number of affordable housing units by:
Select all that apply

- [ ] Apply for additional section 8 units should they become available
- [ ] Leverage affordable housing resources in the community through the creation of mixed - finance housing
- [ ] Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- [ ] Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI
Select all that apply

- [ ] Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- [ ] Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- [ ] Employ admissions preferences aimed at families with economic hardships
- [x] Adopt rent policies to support and encourage work
- [ ] Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI
Select all that apply

- [ ] Employ admissions preferences aimed at families who are working
- [x] Adopt rent policies to support and encourage work
- [ ] Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:
Select all that apply

- ☐ Seek designation of public housing for the elderly
- ☐ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ☐ Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:
Select all that apply

- ☐ Seek designation of public housing for families with disabilities
- ☐ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☐ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- ☒ Affirmatively market to local non-profit agencies that assist families with disabilities
- ☐ Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:
Select if applicable

- ☐ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- ☐ Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing
Select all that apply

- ☐ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☐ Market the section 8 program to owners outside of areas of poverty /minority concentrations
- ☐ Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☐ Limited availability of sites for assisted housing
- ☐ Extent to which particular housing needs are met by other organizations in the community
- ☐ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☐ Influence of the housing market on PHA programs
- ☐ Community priorities regarding housing assistance
- ☐ Results of consultation with local or state government
- ☒ Results of consultation with residents and the Resident Advisory Board
- ☐ Results of consultation with advocacy groups
- ☐ Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
1. **Federal Grants (FY 2003 grants)**		
a) Public Housing Operating Fund	$369,614.00	Public Housing Operations
b) Public Housing Capital Fund 2002	$470,171.00	Public Housing Capital improvements
c) HOPE VI Revitalization	n/a	
d) HOPE VI Demolition	n/a	
e) Annual Contributions for Section 8 Tenant-Based Assistance	n/a	

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Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	n/a	
g) Resident Opportunity and Self-Sufficiency Grants	n/a	
h) Community Development Block Grant	n/a	
i) HOME	n/a	
Other Federal Grants (list below)	n/a	
2. Prior Year Federal Grants (unobligated funds only) (list below)		
CFP 2002	$	
3. Public Housing Dwelling Rental Income	$282,320.00	Public Housing Operations
4. Other income (list below)		
Osage County Nutrition Program Sale of Surplus Equipment	$7,200.00 $4,745.00	Public Housing Operations
Sassy Lassy Beauty Shop Community Building Rental	$ 900.00 $ 150.00	Public Housing Operations
Laundromat	$ 375.00	
4. Non-federal sources (list below)		
Certificates of Deposit Interest	$23,870.00	Public Housing Operations
Total resources	$1,159,795.00	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (Select all that apply)

☐ When families are within a certain number of being offered a unit: (state number)
☐ When families are within a certain time of being offered a unit: (state time)
☒ Other: *At the time of application*

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

☒ Criminal or Drug-related activity
☒ Rental history
☐ Housekeeping
☐ Other (describe)

c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (Either directly or through an NCIC-authorized source)

(2)Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list? (select all that apply)

☐ Community-wide list
☐ Sub-jurisdictional lists
☒ Site-based waiting lists
☐ Other (describe)

b. Where may interested persons apply for admission to public housing?

☒ PHA main administrative office
☐ PHA development site management office
☐ Other (list below)

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c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year? *Six*

2. ☐ Yes ☒ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?

3. ☐ Yes ☒ No: May families be on more than one list simultaneously
If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
☒ PHA main administrative office
☐ All PHA development management offices
☐ Management offices at developments with site-based waiting lists
☐ At the development to which they would like to apply
☒ Other: *1) Prospective applicants may ask for an application by phone.*
2) Prospective applicants may mail in their completed application.
3) Prospective applicants may fax their application to us.

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (Select one)
☐ One
☐ Two
☒ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

a. Income targeting:
☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

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b. Transfer policies:
In what circumstances will transfers take precedence over new admissions? (list below)

- ☒ Emergencies
- ☒ Over housed
- ☒ Under housed
- ☒ Medical justification
- ☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)
- ☒ Resident choice: *In the event of a catastrophic circumstance and with a written request and with documentation of need, the Housing Authority will consider a transfer to accommodate an additional family member, medical equipment and or handicapped accessibility.*
- ☐ Other: (list below)

c. Preferences

1. ☐ Yes ☒ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
Victims ofdomestic violence
Substandard housing
Homelessness
High rent burden

Other preferences (select all that apply)

☐ Working families and those unable to work because of age or disability
☐ Veterans and veterans' families
☐ Residents who live and/or work in the jurisdiction
☐ Those enrolled currently in educational, training, or upward mobility programs
☐ Households that contribute to meeting income goals (broad range of incomes)
☐ Households that contribute to meeting income requirements (targeting)
☐ Those previously enrolled in educational, training, or upward mobility programs
☐ Victims of reprisals or hate crimes
☐ Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

☐ The PHA applies preferences within income tiers
☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

☒ The PHA-resident lease
☒ The PHA's Admissions and (Continued) Occupancy policy
☒ PHA briefing seminars or written materials
☒ Other source: *Monthly Newsletter*

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b. How often must residents notify the PHA of changes in family composition? (select all that apply)

☒ At an annual reexamination and lease renewal
☒ Any time family composition changes
☐ At family request for revision
☒ Other: *Anytime there is an income change of $100.00 or more per month.*

(6) Deconcentration and Income Mixing

a. ☐ Yes ☒ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. ☐ Yes ☒ No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

☐ Adoption of site based waiting lists
If selected, list targeted developments below:

☐ Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:

☐ Employing new admission preferences at targeted developments
If selected, list targeted developments below:

☐ Other (list policies and developments targeted below)

d. ☐ Yes ☒ No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

☐ Additional affirmative marketing
☐ Actions to improve the marketability of certain developments
☐ Adoption or adjustment of ceiling rents for certain developments
☐ Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
☐ Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)
☒ Not applicable: results of analysis did not indicate a need for such efforts
☐ List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)
☒ Not applicable: results of analysis did not indicate a need for such efforts
☐ List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)
☐ Criminal or drug-related activity only to the extent required by law or regulation
☐ Criminal and drug-related activity, more extensively than required by law or regulation
☐ More general screening than criminal and drug-related activity (list factors below)
☐ Other (list below)

b. ☐ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. ☐ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. ☐ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

☐ Criminal or drug-related activity
☐ Other (describe below)

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

☐ None
☐ Federal public housing
☐ Federal moderate rehabilitation
☐ Federal project-based certificate program
☐ Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

☐ PHA main administrative office
☐ Other (list below)

(3) Search Time

a. ☐ Yes ☐ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

(4) Admissions Preferences

a. Income targeting

☐ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. ☐ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of

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application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
Victims of domestic violence
Substandard housing
Homelessness
High rent burden

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Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- ☐ Date and time of application
- ☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- ☐ This preference has previously been reviewed and approved by HUD
- ☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- ☐ The PHA applies preferences within income tiers
- ☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- ☐ The Section 8 Administrative Plan
- ☐ Briefing sessions and written materials
- ☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- ☐ Through published notices

☐ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

☒ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

☐ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

☒ $0
☐ $1-$25
☐ $26-$50

2. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below**:**

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c. Rents set at less than 30% than adjusted income

1. ☐ Yes ☒ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

☐ For the earned income of a previously unemployed household member
☐ For increases in earned income
☐ Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

☐ Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

☐ For household heads
☐ For other family members
☐ For transportation expenses
☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

☒ Yes for all developments
☐ Yes but only for some developments
☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

☒ For all developments
☐ For all general occupancy developments (not elderly or disabled or elderly only)
☐ For specified general occupancy developments
☐ For certain parts of developments; e.g., the high-rise portion
☐ For certain size units; e.g., larger bedroom sizes

☐ Other: None

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

☒ Market comparability study
☐ Fair market rents (FMR)
☐ 95th percentile rents
☐ 75 percent of operating costs
☐ 100 percent of operating costs for general occupancy (family) developments
☐ Operating costs plus debt service
☐ The "rental value" of the unit
☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

☐ Never
☐ At family option
☐ Any time the family experiences an income increase
☒ Any time a family experiences an income increase above a threshold amount or percentage: $100.00 or more per month increase
☒ Other: *At the time of any change in household composition.*

g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

☐ The section 8 rent reasonableness study of comparable housing
☒ Survey of rents listed in local newspaper
☒ Survey of similar unassisted units in the neighborhood
☐ Other (list/describe below)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

☐ At or above 90% but below100% of FMR
☐ 100% of FMR
☐ Above 100% but at or below 110% of FMR
☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
☐ The PHA has chosen to serve additional families by lowering the payment standard
☐ Reflects market or submarket
☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
☐ Reflects market or submarket
☐ To increase housing options for families
☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

☐ Annually
☐ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

☐ Success rates of assisted families

☐ Rent burdens of assisted families
☐ Other (list below)

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)
☐ $0
☐ $1-$25
☐ $26-$50

b. ☐ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)
☐ An organization chart showing the PHA's management structure and organization is attached.
☐ A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing		
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section		

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8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

(2) Section 8 Management: (list below)

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. ☐ Yes ☐ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

☐ PHA main administrative office

☐ PHA development management offices

☐ Other (list below)

B. Section 8 Tenant-Based Assistance

1. ☐ Yes ☐ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

☐ PHA main administrative office

☐ Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment OK123a01

-or-

☐ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. ☒ Yes ☐ No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

☒ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment OK123a01

-or-

☐ The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

☐ Yes ☐ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)

b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)
   - ☐ Revitalization Plan under development
   - ☐ Revitalization Plan submitted, pending approval
   - ☐ Revitalization Plan approved
   - ☐ Activities pursuant to an approved Revitalization Plan underway

☐ Yes ☐ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:

☐ Yes ☐ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
If yes, list developments or activities below:

☐ Yes ☐ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: 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 component 9; if "yes", complete one activity description for each development.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)

Demolition/Disposition Activity Description
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition ☐ Disposition ☐
3. Application status (select one) Approved ☐ Submitted, pending approval ☐ Planned application ☐
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected: 6. Coverage of action (select one)

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☐ Part of the development ☐ Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. ☒ Yes ☐ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below.

Designation of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. Designation type: Occupancy by only the elderly ☐ Occupancy by families with disabilities ☐ Occupancy by only elderly families and families with disabilities ☐
3. Application status (select one) Approved; included in the PHA's Designation Plan ☐ Submitted, pending approval ☐

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Planned application ☐
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)
5. If approved, will this designation constitute a (select one) ☐ New Designation Plan ☐ Revision of a previously-approved Designation Plan?
6. Number of units affected: 7. Coverage of action (select one) ☐ Part of the development ☐ Total development

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

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

Conversion of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. What is the status of the required assessment? ☐ Assessment underway ☐ Assessment results submitted to HUD ☐ Assessment results approved by HUD (if marked, proceed to next question) ☐ Other (explain below)
3. ☐ Yes ☐ No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to

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block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) ☐ Conversion Plan in development ☐ Conversion Plan submitted to HUD on: (DD/MM/YYYY) ☐ Conversion Plan approved by HUD on: (DD/MM/YYYY) ☐ Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) ☐ Units addressed in a pending or approved demolition application (date submitted or approved: ☐ Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:) ☐ Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:) ☐ Requirements no longer applicable: vacancy rates are less than 10 percent ☐ Requirements no longer applicable: site now has less than 300 units ☐ Other: (describe below)

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

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☐ Yes ☒ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for

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each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: ☐ HOPE I ☐ 5(h) ☐ Turnkey III ☐ Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) ☐ Approved; included in the PHA's Homeownership Plan/Program ☐ Submitted, pending approval ☐ Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)
5. Number of units affected: 6. Coverage of action: (select one) ☐ Part of the development ☐ Total development

B. Section 8 Tenant Based Assistance

1. ☐ 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 component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

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2. Program Description:

a. Size of Program

☐ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

☐ 25 or fewer participants
☐ 26 - 50 participants
☐ 51 to 100 participants
☐ more than 100 participants

b. PHA-established eligibility criteria

☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

☐ Yes ☐ No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

☐ Client referrals
☐ Information sharing regarding mutual clients (for rent determinations and otherwise)
☐ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
☐ Jointly administer programs
☐ Partner to administer a HUD Welfare-to-Work voucher program
☐ Joint administration of other demonstration program
☐ Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- ☐ Public housing rent determination policies
- ☐ Public housing admissions policies
- ☐ Section 8 admissions policies
- ☐ Preference in admission to section 8 for certain public housing families
- ☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

☐ Yes ☐ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)

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(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

b. ☐ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

☐ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
☐ Informing residents of new policy on admission and reexamination
☐ Actively notifying residents of new policy at times in addition to admission and reexamination.
☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
☐ Establishing a protocol for exchange of information with all appropriate TANF agencies
☐ Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

☐ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
☐ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
☐ Residents fearful for their safety and/or the safety of their children
☐ Observed lower-level crime, vandalism and/or graffiti
☐ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
☐ Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

☐ Safety and security survey of residents
☐ Analysis of crime statistics over time for crimes committed “in and around” public housing authority
☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
☐ Resident reports
☐ PHA employee reports
☐ Police reports
☐ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
☐ Other (describe below)

3. Which developments are most affected? (list below)

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

☐ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
☐ Crime Prevention Through Environmental Design
☐ Activities targeted to at-risk youth, adults, or seniors
☐ Volunteer Resident Patrol/Block Watchers Program
☐ Other (describe below)

2. Which developments are most affected? (list below)

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

☐ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
☐ Police provide crime data to housing authority staff for analysis and action
☐ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
☐ Police regularly testify in and otherwise support eviction cases
☐ Police regularly meet with the PHA management and residents
☐ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
☐ Other activities (list below)

2. Which developments are most affected? (list below)

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

☐ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
☐ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
☐ Yes ☐ No: This PHDEP Plan is an Attachment. (Attachment Filename: ___)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))? (If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☐ Yes ☒ No: Were there any findings as the result of that audit?
4. ☐ Yes ☒ No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain?____
5. ☐ Yes ☒ No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☐ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

☐ Not applicable
☐ Private management
☐ Development-based accounting
☐ Comprehensive stock assessment
☐ Other: (list below)

3. ☐ Yes ☐ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

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: (if comments were received, the PHA **MUST** select one)

☐ Attached at Attachment (File name)

☒ Provided below: *Members of the board of commissioners discussed and agreed with the plan and had no comments, suggestions or changes to recommend.*

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

☐ Considered comments, but determined that no changes to the PHA Plan were necessary.

☐ The PHA changed portions of the PHA Plan in response to comments
List changes below:

☒ Other: *There was no action taken as everyone was in agreement.*

B. Description of Election process for Residents on the PHA Board

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. ☐ Yes ☒ No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

☐ Candidates were nominated by resident and assisted family organizations

☐ Candidates could be nominated by any adult recipient of PHA assistance

☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot

☐ Other: (describe)

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b. Eligible candidates: (select one)

☐ Any recipient of PHA assistance
☐ Any head of household receiving PHA assistance
☐ Any adult recipient of PHA assistance
☐ Any adult member of a resident or assisted family organization
☐ Other (list)

c. Eligible voters: (select all that apply)

☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
☐ Representatives of all PHA resident and assisted family organizations
☐ Other (list)

C. 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: *Tulsa County Home Consortium*

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 the initiatives contained in the Consolidated Plan. (list below)
☐ Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: *See attached statement on page ????????*

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

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Attachments

Use this section to provide any additional attachments referenced in the Plans.

1. PHA Certifications of Compliance with the PHA Plans Related Regulations Board Resolution to Accompany PHA Plan.
2. Certification by State or Local Official of PHA Consistency with the Consolidated Plan.
3. Certification of Payments to Influence Federal Transactions.
4. Certification of drug free work place.
5. Disclosure of lobbying activities
6. Capital Fund Program Amendment.
7. Certified appointment of resident commissioner
8. Public Notice of Hearing
9. Cooperative Agreements
10. Osage County Commissioner Certification
11. Form HUD 52837 Annual Statement and Performance and Evaluation Report

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PHA Certifications of Compliance with the PHA Plans and Related Regulations
Board Resolution to Accompany the PHA Plan

ing on behalf of the Board of Commissioners of the Public Housing Agency (PHA)
ed below, as its Chairman or other authorized PHA official if there is no Board of
mmissioners, I approve the submission of the 5-Year Plan and Annual Plan for PH
al year beginning FY 2003, hereinafter referred to as the Plan
ich this document is a part and make the following certifications and agreements wi
Department of Housing Development (HUD) in connection with the submission of
Plan and implementation thereof:

The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.

The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes the Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consist with the applicable Consolidated Plan.

The PHA has established a Resident Advisory Board or Boards, the membership of which represent the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boarc and a description of the manner in which the Plan addresses these recommendations.

The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be hel and conducted a hearing to discuss the Plan and invited public comment.

The PHA will carry out the plan in conformity with Title VI of the Civil Rights Act of 1964, the Fai Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.

The PHA will affirmatively further fair housing by examining their programs or proposed programs identify any impediments to fair housing choice within those programs, address those impediments i reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.

For PHA Plan that includes a policy for site based waiting lists:

- The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
- The system of site-based waiting lists provides for full disclosure to each applicant in the select of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
- Adoption of site-based waiting list would not violate any court order or settlement agreement or inconsistent with a pending complaint brought by HUD;
- The PHA shall take reasonable measure to assure that such waiting list is consistent with affirmatively furthering fair housing;
- The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).

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Certification by State or Local Official of PHA Plans Consistenc the Consolidated Plan

I, Rich Brierre the Deputy Director

that the Five Year and Annual PHA Plan of the Housing Authority Of Osage County

consistent with the Consolidated Plan of Tulsa County Home Consortium (INCOG)

pursuant to 24 CFR Part 91.

Rich Brierre 1/2/03

Signed / Dated by Appropriate State or Local Official

ication by State and Local Official of PHA Plans Consistency with the Consolidated Plan to Accompany the I

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Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing Authority of Osage County

Program/Activity Receiving Federal Grant Funding

Public Housing (HUD)

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Thelma Holt	Executive Director
Signature: Thelma Holt	Date (mm/dd/yyyy): 12-02-2002

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Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of Osage County

Program/Activity Receiving Federal Grant Funding

Public Housing (HUD)

Acting on behalf of the above named Applicant as the Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

b. Establishing an ongoing drug free awareness program to inform employees —

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that as a condition of employment under the grant, the employee will —

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted —

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program that may be prescribed by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall insert in the space below the place(s) for the performance of work done in connection with the HUD funding of the program or activity shown above. Place of Performance (Street address, city, county, state, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

☐ Check if there are workplaces on file that are not identified here.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Thelma Hight	Executive Director
Signature: X Thelma Hight	Date: 12-12-2000

form HUD-50070
ref Handbooks 7417.1, 7475.13, 7485.1 & 2

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DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

1. Type of Federal Action:
B a. contract
b. grant
c. cooperative agreement
d. loan
e. loan guarantee
f. loan insurance

2. Status of Federal Action:
A a. bid/offer/application
b. initial award
c. post-award

3. Report Type:
A a. initial filing
b. material change
For Material Change Only:
year _____ quarter _____
date of last report _____

4. Name and Address of Reporting Entity:
☒ Prime ☐ Subawardee
Tier _____, *if known*:

Congressional District, *if known*:

5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:
N/A

Congressional District, *if known*:

6. Federal Department/Agency:
United States Department of Housing and Urban Develop

7. Federal Program Name/Description:
2001 Capital Fund Program
CFDA Number, *if applicable*: _____

8. Federal Action Number, *if known*:

9. Award Amount, *if known*:
$

10. a. Name and Address of Lobbying Registrant (*if individual, last name, first name, MI*):
N/A

b. Individuals Performing Services (*including address if different from No. 10a*) (*last name, first name, MI*):
N/A

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Signature: Thelma Holt
Print Name: Thelma Holt
Title: Executive Director
Telephone No.: 918 287 2270 Date: 12-03-02

Federal Use Only:

Authorized for Local Reproduction
Standard Form LLL (Rev. 7-97)

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Capital Fund Program
(CFP) Amendment

To The Consolidated Annual Contributions
Contract (Form HUD-53012)

U.S. Department of Housing
and Urban Development

Office of Public and Indian Housing

RECEIVED
HUD

JUN 1 9 2002

DALLAS/FT. WORTH

Whereas, (This is the Housing Authority) Corpus Christi Housing Authority (hereinafter the "PHA") and the United States of America, Secretary of Housing and Urban Development (hereinafter "HUD") entered into a Consolidated Annual Contributions Contract (HUD Numbers) TX2006 dated 10-10-53

Whereas, HUD has agreed to provide CFP assistance upon execution of this Amendment, to the PHA in the amount to be specified below as the PHA has met the requirements governing the PHA in connection with capital and management activities, including public hearing requirements in order to assure that such activities continue to be available to serve low income families.

$972,724 for Fiscal Year(s) 02 to be referred to as the Capital Fund Grant Number TX06P006501-2

PHA Tax Identification Number (TIN) 746-6000

Whereas, HUD and the PHA are entering into this CFP Amendment Number 02-24

Now Therefore, the ACC(s) is (are) amended as follows:

1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This assistance is part of the ACC(s).

2. The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.

3. (Check one)

[ ] a. In accordance with the HUD regulations, the Annual PHA Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the Annual PHA Plan Capital Fund Annual Statement.

OR

[ ] b. The Annual PHA Plan has not been adopted by the PHA and approved by HUD. Unless the PHA is found, the PHA may drawdown up to 90% of its CFP assistance, as more fully contained in its approved 5-Year Plan, before the Annual PHA Plan is approved. However, all of the CFP assistance for the fiscal year is considered [illegible] for purposes of statutory obligation and expenditure and cannot exceed the selection form of the CFP amendment.

CFP FY 2000, annual, in cases where HUD has approved a Capital Fund Financing Amendment to the ACC (CFFP Amendment), effective HUD will reduce the Agency's [illegible] amortization and debt service payments from the grant, in addition to the effective date of the CFP Amendment. The payment of CFP funds as per the amortization schedule will be made [illegible] Debt Service Agreement attached within 3 days of the due date.

Attachment or the form specified above, the Annual Statement, and [illegible] in which the PHA must [illegible] the CFP assistance [illegible] and 40 not in the period in which the PHA must expend the CFP assistance pursuant to section 9(j)(2) of the Act and [illegible] the effective date of this CFP amendment (the date on which the CFP assistance becomes [illegible] PHA's obligation.

4. Subject to the provisions of the ACC(s) and paragraph 3, and in accordance with capital and management activities, HUD agrees to disburse to the PHA on the approved Federal [illegible] from time to time as needed up to the [illegible] funding assistance specified herein.

5. The PHA shall commence expenditures and development activities [illegible] in accordance with the ACC(s), as amended, the Act and all HUD regulations for a period of twenty years after the last disbursement of CFP assistance for modernization activities [illegible] period of twenty years after the initial disbursement of CFP assistance for development activities. However, in pursuance of section 7 of the ACC(s), upon HUD's determination that it is [illegible] or obsolescence of the PHA in [illegible] any development(s) [illegible] and which is not eligible for long-term, and provided further that for a period of ten years [illegible] the full payment of assistance from the Operating Fund to the PHA, no disposition of any development(s) owned by the Grantee, and [illegible] approved by HUD.

6. The PHA will apply for the entire CFP assistance amount for the FY if the PHA does not comply with any of its obligations under this Amendment and does not have its Annual PHA Plan approved within the period specified by HUD. HUD shall impose such penalties or take such remedial action as provided by law. HUD may [illegible] the PHA to terminate [illegible] activities described in the Capital Fund Annual Statement of the Annual PHA Plan. In [illegible] case, the PHA and HUD may [illegible] conditions under HUD's [illegible].

7. Implementation or use of funding assistance provided under this Amendment is subject to [illegible] approval.

Check one: [ ] Yes [x] No

8. The PHA acknowledges its responsibility for adherence to this Amendment by subgrantees to which it makes funding assistance to the extent available.

The HUD has reviewed this document and find it in compliance on MAY 31 2002 (the date on which CFP assistance becomes available to the PHA from HUD).

U.S. Department of Housing and Urban Development	PHA Executive Director
By: JUN 25 2002	By: Date: 6-10-02
Title: HOUSING HUB DIRECTOR for OFFICE OF PUBLIC HOUSING	Title: Executive Director

Public Housing Director

Ref: HUD-52841-A (01/2000)

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

CERTIFICATION OF APPOINTMENT OF

THE OSAGE COUNTY COMMISSIONERS WITH THE

OSAGE COUNTY HOUSING AUTHORITY

WHEREAS, The Board of County Commissioners of Osage County, held a duly authorized meeting on the 5th day of August, 2002 at which time Pascale Whinery was appointed to serve the unexpired term of Elizabeth Hulsey as Commissioner of the Housing Authority of the County of Osage, State of Oklahoma. This term shall expire on December 31, 2008.

IN WITNESS WHEREOF, we have hereunto signed our names as members of the Board of County Commissioners of the County of Osage, State of Oklahoma, and caused the official seal of said County Clerk of Osage County, Oklahoma, to be affixed hereto this 5th day of August, 2002.

BOARD OF COUNTY COMMISSIONERS
OSAGE COUNTY, OKLAHOMA

Chairman

Member

Member

COUNTY CLERK, OSAGE COUNTY, OKLA.

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

PUBLIC NOTICE

The Housing Authority of Osage County has developed its 2000 Agency Plan in compliance with the Quality Housing and Work Responsibility Act of 1998. This Agency Plan is available for review at the Housing Authority offices located at 200 Atlantic Field Road in Pawhuska, Oklahoma. The Authority's hours of operation are 8:00 a.m. to 2:00 p.m., Monday through Friday. In addition, a Public Hearing will be held on Friday, January 10th at 2:00 p.m. at the Authority office at Cedar Ridge in Pawhuska.

All residents and interested parties are encouraged to review the plan and attend the public hearing and make such comment as they wish.

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Housing Authority of Osage County
P.O. Box 518, Pawhuska, Oklahoma 74056
918-287-2270 -- 918-287-2278
Fax 918-287-2284 -- TTY 918 287 2278

Barnsdall Police Department
John O'Rourke, Chief of Police
P.O. Box 778
Barnsdall, OK 74002

We at the Housing Authority have enjoyed a good working relationship with you and your staff for many years. Your staff is always available for advice or to support us with their physical presence. As required by HUD, we are seeking to renew the commitment between our agencies to work together, in that we may continue to share information and / or target supportive services for the benefit or our clients.

This agreement will be valid from April 1, 2003 through March 31, 2004 as per this agency's FY 2003-2004 Annual Plan. There will be no fees charged by either agency.

We agree to continue a Cooperative Agreement with the Barnsdall Police Department.

1) To continue to provide statistics / data (names, addresses, locations, dates, etc.) and on occasion, a pass key when a search warrant merits, to you and / or your staff and vise versa.
2) To receive from your office requested copies of call sheets or incident reports for court purposes.
3) To make each other aware of suspicious activity, questionable guests and any known violation of our lease or the law.
4) To inform residents of our policies regarding our Cooperative Agreement.
5) To request officer backup in the event of a "One Strike Your Out" eviction or a Welfare check.
6) As per HUD allowances, to provide housing to officers at a reduced rate.
7) To cooperate to the fullest extent possible with your execution of the duties of you and your officers.

Barnsdall Police Department accepts the above agreement.

Name John O'Rourke Title Police Chief Date 12-07-02

Name Thelma Holt Title Executive Director Date 11-20-02

Office Hours: Monday – Friday ~ 8:00 AM to 2:00 PM ~ Phone calls only from 2:00 PM until 4:00 PM

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Housing Authority of Osage County
P.O. Box 918, Pawhuska, Oklahoma 74056
918-287-2270 ~ 918-287-2278
Fax 918 287 2221 ~ TTY 918 287 2279

Osage Tribal TANF
Raymond Lasley
1333 Grandview
Pawhuska, OK 74056

We at the Housing Authority have enjoyed a good working relationship with you and your staff for many years. Your staff is always available for advice or to support our housing applicants As required by HUD, we are seeking to renew the commitment between our agencies to work together, in that we may continue to share information and / or target supportive services for the benefit or our clients.

This agreement will be valid from April 1, 2003 through March 31, 2004 as per this agency's FY 2003-2004 Annual Plan. There will be no fees charged by either agency.

We agree to continue a Cooperative Agreement with the Osage Tribal TANF agency.

1) To continue to provide statistics / data (names, addresses, locations, dates, etc.) and to coordinate our services with each other.
2) To receive from your office requested copies of income verifications.
3) To refer clients to each other and share information regarding mutual clients.
4) To inform residents of our policies regarding our Cooperative Agreement.
5) To adopt any future changes appropriate to rent calculation policies
6) To cooperate to the fullest extent possible with your execution of the duties of you and your staff.

Osage Tribal TANF Agency accepts the above agreement.

Name Raymond Lasley Title Director Date 12-6-

Name Helma Hale Title Executive Director Date 11-22-0

Office Hours: Monday – Friday ~ 8:00 AM to 2:00 PM ~ Phone calls only from 2:00 PM until 4:00 PM

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Housing Authority of Osage County
PO Box 818, Pawhuska, Oklahoma 74056
918 287 2270 -- 918 287-2278
Fax 918 287 2271 -- TTY 918 287-2279

Hominy Police Department
Mason Goode, Chief of Police
113 S. Regan
Hominy, OK 74035

We at the Housing Authority have enjoyed a good working relationship with you and your staff for many years. Your staff is always available for advice or to support us with their physical presence. As required by HUD, we are seeking to renew the commitment between our agencies to work together, in that we may continue to share information and / or target supportive services for the benefit or our clients.

This agreement will be valid from April 1, 2003 through March 31, 2004 as per this agency's FY 2003-2004 Annual Plan. There will be no fees charged by either agency.

We agree to continue a Cooperative Agreement with the Hominy Police Department.

1) To continue to provide statistics / data (names, addresses, locations, dates, etc.) and on occasion, a pass key when a search warrant merits, to you and / or your staff and vise versa.
2) To receive from your office requested copies of call sheets or incident reports for court purposes.
3) To make each other aware of suspicious activity, questionable guests and any known violation of our lease or the law.
4) To inform residents of our policies regarding our Cooperative Agreement.
5) To request officer backup in the event of a "One Strike Your Out" eviction or a Welfare check.
6) As per HUD allowances, to provide housing to officers at a reduced rate.
7) To cooperate to the fullest extent possible with your execution of the duties of you and your officers.

Hominy Police Department accepts the above agreement.

Name [signature] Title Chief of Police Date 11/23/02

Name [signature] Title Executive Director Date 11-23-02

Office Hours: Monday – Friday ~ 8:00 AM to 2:00 PM ~ Phone calls only from 2:00 PM until 4:00 PM

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Housing Authority of Osage County
P.O. Box 818, Pawhuska, Oklahoma 74056
918-287-2270 ~ 918-287-2275
Fax 918-287-2224 ~ TTY 918-287-2278

Pawhuska Police Department
Kevin St. Peter, Chief of Police
128 W. Main
Pawhuska, OK 74056

We at the Housing Authority have enjoyed a good working relationship with you and your staff for many years. Your staff is always available for advice or to support us with their physical presence. As required by HUD, we are seeking to renew the commitment between our agencies to work together, in that we may continue to share information and / or target supportive services for the benefit or our clients.

This agreement will be valid from April 1, 2003 through March 31, 2004 as per this agency's FY 2003-2004 Annual Plan. There will be no fees charged by either agency.

We agree to continue a Cooperative Agreement with the Pawhuska Police Department.

1) To continue to provide statistics / data (names, addresses, locations, dates, etc.) and on occasion, a pass key when a search warrant merits, to you and / or your staff and vise versa.
2) To receive from your office requested copies of call sheets or incident reports for court purposes.
3) To make each other aware of suspicious activity, questionable guests and any known violation of our lease or the law.
4) To inform residents of our policies regarding our Cooperative Agreement.
5) To request officer backup in the event of a "One Strike Your Out" eviction or a Welfare check.
6) As per HUD allowances, to provide housing to officers at a reduced rate.
7) To cooperate to the fullest extent possible with your execution of the duties of you and your officers.

Pawhuska Police Department accepts the above agreement.

Name [illegible] Title Chief of Police Date 11-25-02

Name Thelma Hall Title Executive Director Date 11-20-02

Office Hours: Monday – Friday ~ 8:00 AM to 2:00 PM ~ Phone calls only from 2:00 PM until 4:00 PM

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Housing Authority of Osage County
P.O. Box 818, Pawhuska, Oklahoma 74056
918 287 2270 ~ 918 287 2278
Fax 918 287 2294 ~ TTY 918 287 2278

Osage County Sheriff's Department
Sheriff Russell Cottle
900 St. Paul St.
Pawhuska, OK 74056

We at the Housing Authority have enjoyed a good working relationship with you and your staff for many years. Your staff is always available for advice or to support us with their physical presence. As required by HUD, we are seeking to renew the commitment between our agencies to work together, in that we may continue to share information and / or target supportive services for the benefit or our clients.

This agreement will be valid from April 1, 2003 through March 31, 2004 as per this agency's FY 2003-2004 Annual Plan. Except for #2, there will be no other fees charged by either agency.

We agree to continue a Cooperative Agreement with the Osage County Sheriff's Department.

1) To continue to provide our ORI number for background checks to be conducted on each adult housing applicant.
2) To remit on a monthly basis payment (at $15.00 per inquiry) for a criminal background check on each adult housing applicant.
3) To provide statistics / data (names, addresses, locations, dates, etc.) and on occasion, a pass key when a search warrant merits, to you and or your staff and vise versa.
4) To receive from your office requested copies of call sheets or incident reports for court purposes.
5) To make each other aware of suspicious activity, questionable guests and any known violation of our lease or the law.
6) To inform residents of our policies regarding our Cooperative Agreement.
7) To request deputy backup in the event of a "One Strike Your Out" eviction or a Welfare check.
8) As per HUD allowances, to provide housing to deputies at a reduced rate.
9) To cooperate to the fullest extent possible with your execution of search warrants or undercover surveillance by providing information and / or an available vacant house.

Osage County Sheriff's Department accepts the above agreement.

Name Russell Cottle Title SHERIFF Date 12/02/02

Name Selma Hale Title Executive Director Date 11-22-02

Office Hours: Monday – Friday ~ 8:00 AM to 2:00 PM ~ Phone calls only from 2:00 PM until 4:00 PM

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

"There's No Place Like Home"

Osage County Resources

[illegible]

REFERRAL AGREEMENT

In order to promote the health, safety and independence of frail elderly persons at risk of inappropriate institutionalization that prevent the provision of health and social services in the least restrictive environment, preferably in home and in the community; promote appropriate, accessible, human care; and promote the development of formal and informal resources in the community the Osage County agree to:

Osage County Housing Authority

1. Inform one another regarding resources and services offered;

2. Exchange information on services maps and application;

3. Take prompt action on referrals and inquiries into, and on action taken;

4. Require "Authorization to Release Information" form signed by the client or responsible party before exchange of information to insure client confidentiality;

5. Cooperate to develop new resources for frail elderly persons.

APPROVED:

Representing the Director as Legal Signatory:

Name

Program Coordinator

Title

12-6-02

Date

Representing the Executive Director as Legal Signatory:

Name

Executive Director

Title

12-23-02

Date

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Table Library

Table Library

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 Osage County	Grant Type and Number Capital Fund Program Grant No: OK56P123501-01 Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2001

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2002 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	12,830.00		12,830.00	
3	1408 Management Improvements Soft Costs	13,523.00		13,523.00	
	Management Improvements Hard Costs				
4	1410 Administration	6,381.00		6,381.00	230.84
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	40,111.00		40,111.00	28,255
8	1440 Site Acquisition				
9	1450 Site Improvement	109,300.00		109,300.00	71,253.68
10	1460 Dwelling Structures	288,450.00		288,450.00	291,318.54
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	7,500.00		7,500.00	
13	1475 Nondwelling Equipment	15,500.00		15,500.00	15,429
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency	1,472.00		1,472.00	
	Amount of Annual Grant: (sum of lines…..)	495,067.00		495,067.00	406,487.06
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: **Housing Authority of Osage County**		**Grant Type and Number** Capital Fund Program Grant No.: **OK56P123501-01** Replacement Housing Factor Grant No:					**Federal FY of Grant:** **FY 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
PHA-Wide	New Truck		1475	1	14,000		14,000		Completed
PHA-Wide	Tommy lift for truck		1475	1	1,500		1,429		Completed
PHA-Wide	A&E Fees		1430	1	40,111.00		43,026.00		On going
OK123001 Cedar Ridge	A/C units		1460	60	108,000		108,000		On going
	Clean HVAC ducts		1460	60	7,500.00		7,500.		On going
OK123002 Down Town	Concrete paving and sidewalks		1450		20,500		20,500		Completed
OK123003 Osage	Concrete paving and sidewalks		1450		2,000		2,000		Completed
	Replace Windows w/New Vinyl Window		1460	54	16,200		16,200		On going
OK123003 Barnsdall	Concrete paving and sidewalks		1450		3,500		3,500		Completed
OK123004 Shidler	Concrete paving and sidewalks		1450		9,000		9,000		Completed
OK123005 Fairfax	Concrete paving and sidewalks		1450		6,600		6,600		Completed
	Replace Windows w/New Vinyl Window		1460	210	16,200		16,200		On going

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 Osage County**		**Grant Type and Number** Capital Fund Program Grant No.: **OK56P123501-01** Replacement Housing Factor Grant No:					**Federal FY of Grant:** **FY 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
OK123006 Cedar Ridge	Concrete paving and sidewalks		1450		55,400		55,400		Completed
	A/C units		1460	30	90,000		90,000		On going
	Clean HVAC ducts		1460	60	3,750		3,750		On going
	Roof top A/C unit Community Build.		1470	1	7,500		7,500		Completed
OK123006 Hominy	Concrete paving and sidewalks		1450		12,000		12,000		Completed

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 Osage County `**	**Grant Type and Number** Capital Fund Program No: **OK56P123501-01** Replacement Housing Factor No:	**Federal FY of Grant:** **FY 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	
OK123001	9/30/2002		9/30/2002	9/30/2003			No Dates Revised
OK123002	9/30/2002		9/30/2002	9/30/2003			No Dates Revised
OK123003	9/30/2002		9/30/2002	9/30/2003			No Dates Revised
OK123004	9/30/2002		9/30/2002	9/30/2003			No Dates Revised
OK123005	9/30/2002		9/30/2002	9/30/2003			No Dates Revised
OK123006	9/30/2002		9/30/2002	9/30/2003			No Dates Revised

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 Osage County	Grant Type and Number Capital Fund Program Grant No: OK56P123501-02 Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2002

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2002 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	23,839			
3	1408 Management Improvements Soft Costs	12,711			
	Management Improvements Hard Costs				
4	1410 Administration	23,850			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	37,711			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	95,400			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	267,503			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency	9,157			
	Amount of Annual Grant: (sum of lines…..)	470,171			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: **Housing Authority of Osage County**		**Grant Type and Number** Capital Fund Program Grant No.: **OK56P123501-02** Replacement Housing Factor Grant No:					**Federal FY of Grant:** **FY 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
OK123-1 Cedar Ridge	Architectural Fee's		1430		17,248				On going
	Heat vent light bathroom		1460		12,000				pending
	Purchase land & Maintenance Garage		1470		125,400				pending
	Roof top A/C unit Community Build		1470		15,000				pending
	Rebuild kitchen sewer line		1470		20,000				pending
OK123-2 Down Town	Architectural Fee's		1430		950				pending
	Heat vent light bathroom		1460		10,000				pending
OK123-3 Osage	Architectural Fee's		1430		988				pending
	Heat vent light bathroom		1460	10	2,000				pending
	Relocate electrical panel boxes to meet building cods		1460	7	8,400				pending
OK123-3 Barnsdall	Architectural Fee's		1430		1,824				pending
	Relocate electrical panel boxes to meet building cods		1460	16	19,200				pending
OK123-4 Shidler	Architectural Fee's		1430		14,915				pending
	Heat vent light bathroom		1460	29	5,800				pending
	Relocate electrical panel boxes to meet building cods		1460	16	19,200				pending
	Construct safe room		1470	1	107,103				pending

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 Osage County**		**Grant Type and Number** Capital Fund Program Grant No.: **OK56P123501-02** Replacement Housing Factor Grant No:					**Federal FY of Grant:** **FY 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
OK123-5 Hominy	Architectural Fee's		1430		608				pending
	Heat vent light bathroom		1460	32	6,400				pending
OK123-5 Fairfax	Architectural Fee's		1430		570				pending
	Heat vent light bathroom		1460	30	6,000				pending
OK123-6 Hominy	Architectural Fee's		1430		608				
	Heat vent light bathroom		1460	32	6,400				

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 Osage County `**	**Grant Type and Number** Capital Fund Program No: **OK56P123501-02** Replacement Housing Factor No:	**Federal FY of Grant:** **FY 2002**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
OK123001	11/20/2003			5/20/2005			No Dates Revised
OK123002	11/20/2003			5/20/2005			No Dates Revised
OK123003	11/20/2003			5/20/2005			No Dates Revised
OK123004	11/20/2003			5/20/2005			No Dates Revised
OK123005	11/20/2003			5/20/2005			No Dates Revised
OK123006	11/20/2003			5/20/2005			No Dates Revised

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 Osage County	Grant Type and Number Capital Fund Program Grant No: OK56P123501-03 Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2003

☒Original Annual Statement ☐Reserve for Disasters/ Emergencies ☐Revised Annual Statement (revision no:)
☐Performance and Evaluation Report for Period Ending ☐Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs	15,533.00			
	Management Improvements Hard Costs				
4	1410 Administration	6,550.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	39,522.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	254,555.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	120,000.00			
13	1475 Nondwelling Equipment	30,000.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency	4,011.00			
	Amount of Annual Grant: (sum of lines…..)	470,171.00			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: Housing Authority of Osage County		**Grant Type and Number** Capital Fund Program Grant No: OK156P1235001-3 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
OK123-1 Cedar Ridge	Architectural Fee's		1430		8,827.00				
	Install guttering replace downspouts & splash blocks		1460	60	21,000.00				
	Replace Hot Water tanks unit by unit		1460	30	7,500.00				
	Modify & repair emergency call system		1460	60	36,000.00				
	Furniture for Community Building Public space		1475	1	6,000.00				
	Van or Car for E. D.		1475	1	10,000.00				
OK123-2 Down Town	Architectural Fee's		1430		2,850.00				
	Install VC tile complete with painted quarter rounds.		1460	25	30,000.00				
	Purchase main6tenance pickup with added storage		1475	1	14,000.00				
OK123-3 Osage	Architectural Fee's		1430		551.00				
	Replace Hot Water tanks unit by unit		1460	5	1,250.00				
	Rebuild HWT closets platforms, walls		1460	7	5,600.00				
OK123-3 Barnsdall	Architectural Fee's		1430		1,748.00				
	Rebuild HWT closets platforms, walls		1460	16	12,800.00				
	Install guttering replace downspouts & splash blocks		1460	16	5,600.00				

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 Osage County		**Grant Type and Number** Capital Fund Program Grant No: OK56P1235001-3 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
OK123-4 Shidler	Architectural Fee's		1430		3,697.00				
	Install VC tile complete with painted quarter rounds.		1460		21,840.00				
	Install guttering replace downspouts & splash blocks		1460	29	10,150.00				
	Replace Hot Water tanks unit by unit		1460	15	3,625.00				
OK123-5 Hominy	Architectural Fee's		1430		2,914.00				
	Install VC tile complete with painted quarter rounds.		1460		17,520.00				
	Install guttering replace downspouts & splash blocks		1460	29	10,150.00				
OK123-5 Fairfax	Architectural Fee's		1430		13,634.00				
	Install VC tile complete with painted quarter rounds.		1460		18,720.00				
	Construct Safe Room Laundry Facility W/ emergency generator		1470		120,000.00				
OK123-6	Architectural Fee's		1430		285.00				

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 Osage County		**Grant Type and Number** Capital Fund Program Grant No: OK56P1235001-3 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
OK123-6 Hominy	Architectural Fee's		1430		5,016.00				
	Install VC tile complete with painted quarter rounds		1460		52,800.00				

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

PHA Name Housing Authority of Osage County				☒**Original 5-Year Plan** ☐**Revision No:**	
Development Number/Name/HA-Wide	Year 1 2003	Work Statement for Year 2 FFY Grant: PHA FY: 2004	Work Statement for Year 3 FFY Grant: PHA FY:2005	Work Statement for Year 4 FFY Grant PHA FY:2006	Work Statement for Year 5 FFY Grant: PHA FY:2007
OK123-1		183,127	170,071	2,541	36,000
OK123-2		65,454	47,906	6,844	2,500
OK123-3 Osage		21,347	59,048	1.916	7,700
OK123-3 Barnsdall		46,165	3,416	4,380	1,600
OK123-4 Shidler		55,533	2,382	17,520	42,200
OK123-5 Hominy		5,875	27,786	197,100	21,000
OK123-5 Fairfax		6,077	32,850		22,200
OK123-6 Cedar Ridge		6,077	32,686	3,285	6,000
OK123-6 Lynn		2,836	30,660	16,533	1,400
Ok123-6 Barnsdall		2,026	22,721	198,195	11,000
OK123-6 Hominy		65,941	30,660	3,504	61,600
Total CFP Funds (est.)		460,455	460,186	451,818	213,200

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

Activities for Year 1	Activities for Year :__2___ FFY Grant: PHA FY: 2004			Activities for Year: __3__ FFY Grant: PHA FY: 2005		
See Annual	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Statement	OK123-1	A&E Fees	16,027.00	Ok123-1	A&E Fees	14,571
	Cedar Ridge	Replace windows	108,000.00	Cedar Ridge	Exercise equipment	15,000
		Dryer Vents	2,100.00		Furnace	97,500
		Replace refrigerators	27,000.00		Maintenance Truck	43,000
		Clothes lines	9,000.00			
		Replace ranges	21,000.00			
	Sub-Total		**183,127.00**	Sub-Total		**170,071.00**
	OK123-2	A&E Fees	5,679.00	OK123-2	A&E Fees	4,156.00
	Down Town	Replace columns/ Wrought iron/steel	3,900.00	Down Town	Replace Roof with Metal	40,000.00
		Dryer vents	875.00			
		Replace refrigerators	11,250.00			
		Replace ranges	8,750.00			
		Move washer & Dryer	35,000.00			
	Sub-Total		**65,454.00**	**Sub-Total**		**47,906.00**
	OK123-3	A&E Fees	1,852.00	OK123-3	A&E Fees	5,123.00
	Osage	Portable Building	12,600.00	Osage	VC Tile	8,400.00
		Dryer vents	245.00		Reconfigure 3 duplex	45,000.00
		Clothes lines	1,050.00		Polycarts trash cans	525.00
		Replace refrigerators	3,150.00			
		Replace ranges	2,450.00			
	Sub-Total		**21,347.00**	**Sub-Total**		**59,048.00**

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

Activities for Year 1	Activities for Year :__2___ FFY Grant: PHA FY: 2004			Activities for Year: __3__ FFY Grant: PHA FY: 2005		
See Annual	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Statement	OK123-3 Barnsdall	A&E Fees	4,005.00	OK123-3	A&E Fees	296.00
		Dryer vents	560.00	Barnsdall	VC Tile	1,920.00
		Replace refrigerators	7,200.00		Polycarts trash cans	1,200.00
		Dryer vents	5,600.00			
		Portable Building	28,800.00			
	Sub-Total		**46,165.00**	**Sub-Total**		**3,416.00**
	OK123-4	A&E Fees	4,818.00	OK123-4	A&E Fees	207.00
	Shidler	Parking covers	12,000.00	Shidler	Polycarts trash cans	2,175.00
		Refrigerators	13,050.00			
		Ranges	10,150.00	**Sub-Total**		**2,382.00**
		Dryer vents	1,015.00			
		Clothes lines	4,350.00	OK123-5	A&E Fees	2,411.00
		Replace gas lines	10,150.00	Hominy	Replace refrigerators	13,050.00
	Sub-Total		**55,533.00**		Replace ranges	10,150.00
					Polycarts trash cans	2,175.00
	OK123-5	A&E Fees	510.00	**Sub-Total**		**27,786.00**
	Hominy	Clothes lines	4,350.00			
		Dryer vents	1,015.00	OK123-5	A&E Fees	2,850.00
	Sub-Total		**5,875.00**	Fairfax	Hot water tanks	3,750.00
					Replace refrigerators	13,500.00
	OK123-5	A&E Fees	527.00		Replace ranges	10,500.00
	Fairfax	Dryer vents	1,050.00		Polycarts trash cans	2,250.00
		Clothes lines	4,500.00	**Sub-Total**		**32,850.00**
	Sub-Total		**6,077.00**			

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

Activities for Year 1	Activities for Year :__2___ FFY Grant: PHA FY: 2004			Activities for Year: __3__ FFY Grant: PHA FY: 2005		
See Annual	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Statement	OK123-6	A&E Fee	527.00	OK123-6	A&E Fees	2,836.00
	Cedar Ridge	Clothes lines	4,500.00	Cedar Ridge	Replace refrigerators	13,500.00
		Dryer vents	1,050.00		Replace ranges	10,500.00
	Sub-Total		**6,077.00**		Polycarts trash cans	2,250.00
					VC Tile	3,600.00
	OK123-6	A&E Fees	**246.00**	**Sub-Total**		**32,686.00**
	Lynn Pawhuska	Dryer vents	490.00			
		Clothes lines	2,100.00	OK123-6	A&E Fees	2,660.00
	Sub-Total		**2,836.00**	Pawhuska Lynn	VC Tile	16,800.00
					Replace refrigerators	6,300.00
	OK123-6	A&E Fees	176.00		Replace ranges	4,900.00
	Barnsdall	Dryer vents	350.00	**Sub-Total**		30,660.00
		Clothes lines	1,500.00			
	Sub-Total		**2,026.00**	OK123-6	A&E Fees	1,971.00
				Barnsdall	Polycarts trash cans	750.00
	OK123-6	A&E Fees	5,721.00		VC Tile	12,000.00
	Hominy	Replace columns/ Wrought iron/steel	2,100.00		Replace refrigerators	4,500.00
		Replace Windows	52,200.00		Replace ranges	3,500.00
		Dryer vents	1,120.00			
		Clothes lines	4,800.00			
	Sub-Total		**65,941.00**	**Sub-Total**		**22,721.00**
				OK123-6	A&E Fees	2,660.00
				Hominy	Replace refrigerators	14,400.00
					Replace ranges	11,200.00
					Polycarts trash cans	2,400.00
				Sub-Total		**30,660.00**
	Total CFP Funds (Est.)		**460,186.00**	**Total CFP Funds (Est.)**		**451,818.00**

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

Activities for Year 1	Activities for Year :__4___ FFY Grant: PHA FY: 2006			Activities for Year: __5__ FFY Grant: PHA FY: 2007		
See Annual	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Statement	OK123-1	A&E Fees	2,541.00	OK123-1	A&E Fees	
	Cedar Ridge	Landscapint		Cedar Ridge	Vent hood over stove	6,000
					Bathroom Vanities	24,000
	Sub-Total		**2,541.00**		Front & back porch post with wrought iron	6,000
				Sub-Total		**36,000**
				OK123-2	A&E Fees	
	OK123-2	A&E Fees	594.00	Down Town	Vent hood over stove	2,500
	Down Town	Light fix & switch	6,250.00		Foundation Stabilizing	
	Sub-Total		**6,844.00**	**Sub-Total**		**2,500**
	OK123-3	A&E Fees	**166.00**	**OK123-3**	A&E Fees	
	Osage	Light fix & switch	1,750.00	Osage	Vent hood over stove	700
					Storm &entry door	7,000
	Sub-Total		**1,916.00**	**Sub-Total**		**7,700**

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

Activities for Year 1	Activities for Year :__4___ FFY Grant: PHA FY: 2006			Activities for Year: __5__ FFY Grant: PHA FY: 2007		
See Annual	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Statement	OK123-3	A&E Fees	380.00	OK123-3	A&E Fees	
	Barnsdall	Light fix & switch	4,000.00	Barnsdall	Vent hood over stove	1,600
	Sub-Total		**4,380.00**	**Sub-Total**		**1,600**
	OK123-4	A&E Fees	1,520.00	OK123-4	A&E Fees	
	Shidler	Light fix & switch	4,000.00	Shidler	Vent hood over stove	2,900
		Refurbish storage build	12,000.00		A/C & heater	36,000
					Front & Back porch post with wrought iron	**3,300**
	Sub-Total		**17,520.00**	**Sub-Total**		**42,200**
	OK123-5	A&E Fees	17,100.00	OK123-5	A&E Fees	
	Hominy	Saferoom/Laundry	180,000.00	Hominy	Vent hood over stove	3,000
					Bathroom Vanities	**15,000**
					Front & back porch post with wrought iron	3,000
	Sub-Total		**197,100.00**	**Sub-Total**		**21,000**
				OK123-5	A&E Fees	
				Fairfax	Vent hood over stove	2,900
					Bathroom Vanities	14,500
					Front & back porch post with wrought iron	4,800
				Sub-Total		**22,200**

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

Activities for Year 1	Activities for Year :__4___ FFY Grant: PHA FY: 2006			Activities for Year: __5__ FFY Grant: PHA FY: 2007		
See Annual	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Statement	OK123-6	A&E Fees	285.00	OK123-6	A&E Fees	
	Cedar Ridge	Clean dryer ducts	3,000.00	Cedar Ridge	Vent hood over stove	3,000
					Front & back porch post with wrought iron	3,000
	Sub-Total		**3,285.00**	**Sub-Total**		**6,000**
	OK123-6	A&E Fees	133.00	OK123-6	A&E Fees	
	Pawhuska Lynn	Dryer Vents	1,400.00	Pawhuska Lynn	Vent hood over stove	1,400
		Play ground equip.	15,000.00			
	Sub-Total		**16,533.00**	**Sub-Total**		**1,400**
	OK123-6	A&E Fees	**17,195.00**	OK123-6	A&E Fees	
	Barnsdall	Safe room/Laundry	180,000.00	Barnsdall	Vent hood over stove	1,000
		Clean dryer ducts	1,000.00		Storm & entry door	10,000
	Sub-Total		**198,195.00**	**Sub-Total**		**11,000**
	OK123-6	A&E Fees	304.00	OK123-6	A&E Fees	
	Hominy	Clean dryer ducts	**3,200.00**	Hominy	Vent hood over stove	3,200
					Storm & entry door	32,000
	Sub-Total		**3,504.00**			
				PHA Wide	Maintenance Truck	24,000
				Community Build	Replace porch columns with wrought iron	2,4000
				Sub-Total		**61,600**
	Total CFP Funds (Est.)		**451.818.00**			**213,200**