

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

Small PHA Plan Update
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**

PHA Plan Agency Identification

PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD,
SOUTH CAROLINA

PHA Number: SC 30

PHA Fiscal Year Beginning: (mm/yyyy) 04/01/2003

PHA Plan Contact Information:

Name: JOHN LAMB

Phone: 864-227-3670

TDD:

Email (if available): GWDSCHA@HSPower.COM

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

PHA Programs Administered:

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

**Annual PHA Plan
Fiscal Year 2003**
[24 CFR Part 903.7]

i. Table of Contents

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

Contents	<u>Page #</u>
Annual Plan	
i. Executive Summary (optional)	
ii. Annual Plan Information	
iii. Table of Contents	
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2. Capital Improvement Needs	2
3. Demolition and Disposition	2
4. Homeownership: Voucher Homeownership Program	3
5. Crime and Safety: PHDEP Plan	4
6. Other Information:	
A. Resident Advisory Board Consultation Process	4
B. Statement of Consistency with Consolidated Plan	4
C. Criteria for Substantial Deviations and Significant Amendments	5
Attachments	
<input checked="" type="checkbox"/> Attachment A : Supporting Documents Available for Review	1
<input checked="" type="checkbox"/> Attachment __: Capital Fund Program Annual Statement	5
<input checked="" type="checkbox"/> Attachment __: Capital Fund Program 5 Year Action Plan	
<input type="checkbox"/> Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement	
<input type="checkbox"/> Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan	
<input checked="" type="checkbox"/> Attachment "A": Resident Membership on PHA Board or Governing Body	25
<input checked="" type="checkbox"/> Attachment "B": Membership of Resident Advisory Board or Boards	27
<input checked="" type="checkbox"/> Attachment "C": Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	27
<input checked="" type="checkbox"/> Other (List below, providing each attachment name) AMENDMENT TO THE ANNUAL PLAN "FOLLOW-UP PLAN AS REQUIRED BY RASS SURVEY SECTION: "Neighborhood Appearance"	26

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

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

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

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

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

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

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 420,000

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

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

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

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C.

1437p)) in the plan Fiscal Year? (If “No”, skip to next component ; if “yes”, complete one activity description for each development.)

2. Activity Description

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

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

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

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

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

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):
 - Greenwood Housing Authority administers an FSS Program which has had 12 home purchasers to close on their homes in approximately 24 months from 1998 through 2000
 - GHA is a Home Buyer Education Agency accredited through AHECTI
 - GHA is a HUD-approved Housing Counseling Agency
 - GHA successfully works with State Housing Finance and Development Authority
 - GHA has formed alliances and partnerships with local real estate attorneys and agents

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

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

- A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____
- C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. Yes No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

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

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

2. If yes, the comments are Attached at Attachment (File name)
3. In what manner did the PHA address those comments? (select all that apply)
- The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 Yes No: below or
 Yes No: at the end of the RAB Comments in Attachment ____.
 - Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
 - Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here)

THE GREENWOOD CITY/COUNTY CONSOLIDATION PLAN

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

3. PHA Requests for support from the Consolidated Plan Agency

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

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

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

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

The PHA defines “substantial deviation” as follows:

- Changes to rent or admissions policies of organization of the waiting list.
- Additions of non-emergency work items (not included in the Capital Fund Annual Statement or Five Year Plan).
- Addition of new activities not included in the current PHDEP plan.
- Any changes to demolition, designation, homeownership programs, or conversion activities.

“Substantial deviation” does not include any changes in HUD regulations or requirements.

A. Substantial Deviation from the 5-year Plan:

B. Significant Amendment or Modification to the Annual Plan:

Attachment A
Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program (section FSS of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Other supporting documents (optional) (list individually; use as many lines as necessary) Membership of the Resident Advisory Board Resident Comments Capital Fund Tables	(specify as needed)

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA		Grant Type and Number Capital Fund Program: SC16PO3050101 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2001	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	52000		52000	52000
3	1408 Management Improvements	40000		33195.40	33195.40
4	1410 Administration	2000		537.30	537.30
5	1411 Audit	500			
6	1415 liquidated Damages				
7	1430 Fees and Costs	27280		23515	18812
8	1440 Site Acquisition				
9	1450 Site Improvement	75843		75843	
10	1460 Dwelling Structures	238829		238829	29829
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5000		5000	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	441452		428919.70	134373.70
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA		Grant Type and Number Capital Fund Program: SC16PO3050101 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				
<input type="checkbox"/> Reserve for Disasters/ Emergencies				
<input type="checkbox"/> Revised Annual Statement (revision no:)				
<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA			Grant Type and Number Capital Fund Program #: SC16PO3050101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	OPERATIONS	1406		52000		52000	52000	
HA-WIDE	COPIER	1408		20000		10261.40	10261.40	
HA-WIDE	AUTOMOBILE	1408		20000		22934	22934	
HA-WIDE	ADMINISTRATION	1410		2000		537.30	537.30	
HA-WIDE	AUDIT	1411		500				
HA-WIDE	FEES & COSTS	1430		27280		23515	18812	
30-1,30-2	NEW PORCHES AND STOOPS	1460		209000		209000		
30-1,30-2	ROOFING	1460		29829		29829	29829	
30-5	PLAYGROUD EQUIPMENT	1475		5000				
HA-WIDE	MAIL RECEPTICLES	1450		45843				
30-1,30-2	ASPHALT REPAIR	1450		10000				
HA-WIDE	SIGNAGE	1450		20000				

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA		Grant Type and Number Capital Fund Program: SC16PO03050102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2002	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)			
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	52000		52000	
3	1408 Management Improvements	50000			
4	1410 Administration	2000		2000	
5	1411 Audit	1000			
6	1415 liquidated Damages				
7	1430 Fees and Costs	25200			
8	1440 Site Acquisition				
9	1450 Site Improvement	90850			
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	200000			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	421050		54000	
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA		Grant Type and Number Capital Fund Program: SC16PO03050102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2002
<input checked="" type="checkbox"/> Original Annual Statement				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				
<input type="checkbox"/> Reserve for Disasters/ Emergencies				
<input type="checkbox"/> Revised Annual Statement (revision no:)				
<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA			Grant Type and Number Capital Fund Program #: SC16PO3050102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	COPS OFFICES/RIC	1406		52000		52000		
HA-WIDE	COMPUTER UPGRADES	1408		50000				
HA-WIDE	ADMINISTRATION	1410		2000		2000		
HA-WIDE	AUDIT	1411		1000				
HA-WIDE	A&E FEES	1430		25200				
HA-WIDE	LANDSCAPING	1450		90850				
HA-WIDE	OFFICE ADDITION	1470		200000				

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA		Grant Type and Number Capital Fund Program: SC16PO3050103 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	52000		52000	
3	1408 Management Improvements	20000			
4	1410 Administration	2000		2000	
5	1411 Audit	1000			
6	1415 liquidated Damages				
7	1430 Fees and Costs	28000			
8	1440 Site Acquisition				
9	1450 Site Improvement	62000			
10	1460 Dwelling Structures	145000			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	125000			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	435000		54000	
21	Amount of line 20 Related to LBP Activities				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA		Grant Type and Number Capital Fund Program: SC16PO3050103 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2003
<input checked="" type="checkbox"/> Original Annual Statement				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				
<input type="checkbox"/> Reserve for Disasters/ Emergencies				
<input type="checkbox"/> Revised Annual Statement (revision no:)				
<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: HOUSING AUTHORITY OF THE CITY OF GREENWOOD, SOUTH CAROLINA			Grant Type and Number Capital Fund Program #: SC16PO3050103 Capital Fund Program Replacement Housing Factor #:			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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	COPS OFFICES/RIC	1406		52000		52000		
HA-WIDE	MAINTENANCE TRUCK	1408		20000				
HA-WIDE	ADMINISTRATION	1410		2000		2000		
HA-WIDE	AUDIT	1411		1000				
HA-WIDE	A&E FEES	1430		28000				
HA-WIDE	LANDSCAPING	1450		62000				
30-1, 30-2	INTERIOR REHAB	1460		145000				
30-5	COMMUNITY BUILDING	1470		125000				

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
PHA WIDE	PHA WIDE	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
LANDSCAPING	62000	04/01/2003
MAINTENANCE TRUCK	20000	04/01/2004
AUTOMOBILE	25000	04/01/2004
AUTOMOBILE	30000	04/01/2007
MAINTENANCE TRUCK	25000	04/01/2008
Total estimated cost over next 5 years	162000	

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
30-5	COLEMAN TERRACE	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
COMMUNITY BUILDING CONSTRUCTION	125000	04/01/2003
ROOF REPLACEMENT	90000	04/01/2006
REFRIGERATORS	33000	04/01/2008
RANGES	33000	04/01/2008
Total estimated cost over next 5 years	481000	

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
30-8	BURGESS HOMES	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
REPLACE REFRIGERATORS	18000	04/01/2004
ADD SIDEWALKS	50000	04/01/2004
RANGES	20000	04/01/2008
Total estimated cost over next 5 years	88000	

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
30-1,30-2	FAIRFIELD & WINNS	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
REHAB UNITS BY REPLACING:		
BATHTUBS, FAUCETS, MEDICINE CABINETS	115000	04/01/2003
VANITIES, SINKS	221000	04/01/2004
FLOOR TILES	300000	04/01/2005
SHEET ROCK	214000	04/01/2006
LIGHT FIXTURES	322000	04/01/2007
BASE BOARDS	240000	04/01/2008
INTERIOR DOORS		
REPLACE STOVES	42000	04/01/2004
REPLACE REFRIGERATORS	54000	04/01/2005
Total estimated cost over next 5 years	1,508,000	

PHA Public Housing Drug Elimination Program Plan

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

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

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

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

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

E. Target Areas

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

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

F. Duration of Program

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

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

G. PHDEP Program History

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

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

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

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

B. PHDEP Budget Summary

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

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

C. PHDEP Plan Goals and Activities

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

9110 – Reimbursement of Law Enforcement	Total PHDEP Funding: \$
Goal(s)	
Objectives	

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

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

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

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

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

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

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

2.							
3.							

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

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

Required Attachment "A" Resident Member on the PHA Governing Board

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

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

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

- Elected
 Appointed

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

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

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

B. Date of next term expiration of a governing board member: August, 2003

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mayor Floyd Nicholson
City of Greenwood

AMENDMENT TO THE ANNUAL PLAN

FOLLOW-UP PLAN AS REQUIRED BY RASS SURVEY SECTION:

Neighborhood Appearance:

The Greenwood Housing Authority is currently working to improve its neighborhood appearance in all project areas with capital funds from FY 2002. A list of actions that have been completed or are still underway are as follows:

1. Completed new roofs on all the apartments, which totally enhanced the outside appearance of the neighborhood. (30-1 & 30-2) – CF
2. Completed new facial, siding, and gutters on all the apartments. (30-1 & 30-2) – CF
3. Placing new rear and wider front porches with overhang on 2 and 3 bedroom apartments. The porches have brick columns, which add significantly to the overall appearance and provide privacy between apartments. (30-1 & 30-2) - CF
4. Installing new covered mail boxes in all the neighborhoods. (30-1, 30-2, 30-5, 30-8) – CF
5. Installing new community signs at the entrance to all neighborhoods. (30-1, 30-2, 30-5, 30-8) – CF
6. Planting new shrubbery and trees around the apartments. (30-1, 30-2, 30-5, 30-8) – CF
7. Sponsoring neighborhood cleanups on a monthly basis throughout all communities. (30-1, 30-2, 30-5, 30-8)
8. Received approval to install outside surveillance cameras in common areas for improve appearance and security of communities. (30-1, 30-2, 30-5, 30-8)
9. Adding new playground equipment. (30-5) – CF
10. Replacing outside apartment numbers in communities. (30-1, 30-2) – CF
11. Community Police Officer in now issuing littering fines. (30-1, 30-2, 30-5, 30-8)

Required Attachment “B” Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Ernestine Aiken
Denise Miller
Dorothy Williams
Ruth Wideman
Tammy Campbell
Benita Strong

ATTACHMENT “C”

MINUTES OF THE 5-YEAR PLANNING COMMITTEE FOR FISCAL YEARS 2002 - 2007

DECEMBER 9, 2002

The 5-Year Planning Committee met on December 9, 2002 at 11:00 a.m. at the Greenwood Housing Authority.

Attendance included:

Ronnie Banks -- Residence Services Coordinator
Ms. Ruth Wideman – Tenant, 300 A New York Court
Ms. Dorothy Williams – Tenant, 301 B New York Court
Ms. Tammy D Campbell – Tenant, 251 Burgess Drive
Ms. Ernestine Aiken – Tenant, 215 A Brooks Stuart Drive
Ms. Denis Miller – Tenant, 235 A Brooks Stuart Drive

Absent:

Ms. Benita Strong –Tenant, 241 Burgess

Mr. Banks opened the meeting by explaining the mission of the Greenwood Housing Authority and the purpose of the 5-Year Planning Committee. He further explained the contents of the 5-year plan for fiscal year 2002-2007. Members were encouraged to ask questions at any point while going through the plan.

For Year 2002

52,000 for Resident Programs and Community Police Officer
28,200 for Audit, Administration, and Architectural & Engineer fees
50,000 for Computer Upgrades
200,000 for New Office additions
90,850 for Landscaping – PHA wide

For Year 2003

52,000 for Resident Programs and Community Police Officer
20,000 for New Maintenance Truck
31,000 for Audit, Administration and Architectural & Engineering fees

125,000 for Community Center in Coleman Terrace
115,000 for Replacement of Bathtubs, Faucets, and Medicine Cabinets in
Fairfield & Winns

For Year 2004

52,000 for Resident Programs and Community Police Officer
31,000 for Audit, Administration, and Architectural & Engineer fees
25,000 for New Automobile
62,000 for Landscaping – PHA wide
50,000 for Sidewalks in Burgess
18,000 for Replacement of Refrigerators in Burgess
221,000 for Replacement of Vanities and Sinks in Fairfield & Winns
42,000 for Replacement of Stoves in Fairfield & Winns

For Year 2005

102,000 for Operations, Computers, Copier and Phones
52,000 for Resident Programs and Community Police Officer
31,000 for Audit, Administration and Architectural & Engineering fees
300,000 for Replacement of Floor tile in Fairfield & Winns
54,000 for Replacement of Refrigerators in Fairfield & Winns

For Year 2006

102,000 for Operations, Computers, Copier and Phones
52,000 for Resident Programs and Community Police Officer
31,000 for Audit, Administration and Architectural & Engineering fees
90,000 for Roofs at Coleman Terrace
214,000 for Sheet Rock in Fairfield & Winns

For Year 2007

102,000 for Operations, Computers, Copier and Phones
52,000 for Resident Programs and Community Police Officer
31,000 for Audit, Administration and Architectural & Engineering fees
30,000 for New Automobile
322,000 for Replacement of Light Fixtures, Base Boards, and Interior Doors in
Fairfield & Winns

This is our proposal provided nothing catastrophic happens. Tiles, cabinets and appliances will be replaced on an as needed basis.

Comments From Tenants:

Question: Are sidewalks necessary at Burgess Homes?

Answer: The sidewalks will help ensure the longevity of the landscaping. Sidewalks will also give children a safer place to walk and ride their bicycles.

Question: When will the Housing Authority implement the surveillance cameras in the neighborhoods?

Answer: Although not specifically addressed in this plan, we have addressed on paper, a need for surveillance cameras in all three neighborhoods.

Comment: We've seen a lot of positive changes in our community and I think you're on the right track. The other tenants gave positive nods to this comment.

Mr. Banks informed the group that they didn't have to wait for a meeting to address their issues and concerns. They should feel free to call the office at any time.

The meeting adjourned at 11:45 am.