

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

PHA Plan Agency Identification

PHAName: *Sinton Housing Authority*

PHANumber: *TX59P174*

PHAFiscalYearBeginning: *April 1, 2003*

PHA Plan Contact Information:

Name: *Ann Duggins*

Pat Smity

Phone: *(361)364-1901*

TDD:

Email (if available): sintonha@awesomenet.net

patsmiscs@aol.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

[24CFR Part 903.7]

i. Table of Contents

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

Contents

Annual Plan

i.	Executive Summary (optional)		
ii.	Annual Plan Information		1
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- 3
4.	Homeownership: Voucher Homeownership Program		3
5.	Crime and Safety: PHDEP Plan		3- 4
6.	Other Information:		
	A. Resident Advisory Board Consultation Process		4
	B. Statement of Consistency with Consolidated Plan		4- 5
	C. Criteria for Substantial Deviations and Significant Amendments		5

Attachments

<input checked="" type="checkbox"/>	Attachment A: Supporting Documents Available for Review	6 - 8	
<input checked="" type="checkbox"/>	Attachment B: Capital Fund Program Annual Statement	9 - 12	
<input checked="" type="checkbox"/>	Attachment C: Capital Fund Program 5 Year Action Plan	13 - 14	
<input type="checkbox"/>	Attachment: Capital Fund Program Replacement Housing Factor Annual Statement		
<input type="checkbox"/>	Attachment: Public Housing Drug Elimination Program (PHDEP) Plan		
<input checked="" type="checkbox"/>	Attachment D: Resident Membership on PHA Board or Governing Body		23
<input checked="" type="checkbox"/>	Attachment E: Membership of Resident Advisory Board or Boards		24
<input type="checkbox"/>	Attachment: Comments of Resident Advisory Board or Boards & Explanation of PH		
Response (must be attached if not included in PHA Plan text)			
<input checked="" type="checkbox"/>	Attachment F: Brief Statement of Progress in Meeting The 5 - Year Plan Mission & Goals	25	- 27
<input checked="" type="checkbox"/>	Attachment G: Voluntary Conversion Initial Assessments	28	
<input checked="" type="checkbox"/>	Attachment H: RASS Follow Up Plan		31
<input checked="" type="checkbox"/>	Attachment I: P & E Reports FY 1998		32 - 34
<input checked="" type="checkbox"/>	Attachment J: P & E Reports FY 1999		35 - 37
<input checked="" type="checkbox"/>	Attachment K: P & E Reports FY 2000		38 - 40
<input checked="" type="checkbox"/>	Attachment L: P & E Reports FY 2001		41 - 43
<input checked="" type="checkbox"/>	Attachment M: P & E Reports FY 2002		44 - 47

ii.ExecutiveSummary

[24CFRPart903.79(r)]

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

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

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

There are no changes anticipated for this year.

2.Capital Improvement Needs

[24CFRPart903.79(g)]

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

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

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$151,775.00

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

D. Capital Fund Program Grant Submissions

(1)Capital Fund Program 5 -Year Action Plan

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

(2)Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment "C"

3.D Demolition and Disposition

[24CFRPart903.79(h)]

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

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

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
--

1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition	<input type="checkbox"/>
Disposition	<input type="checkbox"/>
3. Application status (select one)	
Approved	<input type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <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. Voluntary Homeownership Program

[24CFR Part 903.79(k)]

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

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

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

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

5. Safety and Crime Prevention: PHDEP Plan

[24CFR Part 903.7(m)]

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

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

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

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

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

6. Other Information

[24CFR Part 903.79(r)]

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

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

2. If yes, the comments are as follows

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 end of the RAB Comments in Attachment _____.

Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction:

State of Texas

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:

The Sinton Housing Authority does not receive support from the State of Texas in either actions or commitments.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

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

A. Substantial Deviation from the 5-year Plan:

In accordance with Federal Register 24 CFR Part 903.21, the basic criteria the Sinton Housing Authority will use for determining what constitutes a substantial deviation from the plan is:

- 1. Rent/Admissions policy changes or reorganization of the waiting list*
- 2. Addition of non-emergency work items to the C.F.P.*
- 3. Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities*

B. Significant Amendment or Modification to the Annual Plan:

The addition of non-emergency work items and significant modification of non-emergency work items to the Capital Fund Program is considered as an 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
On Display	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
On Display	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
On Display	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, has addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
On Display	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
On Display	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
On Display	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
N/A	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
On Display	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
On Display	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
On Display	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
On Display	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
On Display	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
On Display	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
On Display	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
On Display	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	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
On Display	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
On Display	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
On Display	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
On Display	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing § 504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH99 -52(HA).	Annual Plan: Capital Needs
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, 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
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	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
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
On Display	Section 3 documentation required by 24 CFR Part 135, Subpart E	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 (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	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 PHA participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHA 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
On Display	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy	Pet Policy
On Display	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
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)

Annual Statement/Performance and Evaluation Report

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

Printed on: 8/21/2003 1:00PM

Part I: Summary

PHAName <i>Sinton Housing Authority</i>		Grant Type and Number Capital Fund Program: <i>TX59P17450103</i> Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: <i>2003</i>	
<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	<i>30,000.00</i>				
3	1408 Management Improvements	<i>2,500.00</i>				
4	1410 Administration	<i>11,100.00</i>				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	<i>11,000.00</i>				
8	1440 Site Acquisition					
9	1450 Site Improvement	<i>8,400.00</i>				
10	1460 Dwelling Structures	<i>76,775.00</i>				
11	1465.1 Dwelling Equipment — Nonexpendable	<i>12,000.00</i>				
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2 -19)	<i>151,775.00</i>				
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					
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

PHAName: <i>Sinton Housing Authority</i>		Grant Type and Number Capital Fund Program : <i>TX59P17450103</i> Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: <i>2003</i>			
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	
<i>H/A Wide</i>	<i>Operations</i>	<i>1406</i>	<i>1</i>	<i>30,000.00</i>				
<i>H/A Wide</i>	<i>Management Improvements</i>							
	<i>Management Training</i>	<i>1408</i>	<i>2</i>	<i>1,500.00</i>				
	<i>Maintenance Training</i>	<i>1408</i>	<i>2</i>	<i>1,000.00</i>				
<i>H/A Wide</i>	<i>Administration</i>							
	<i>CFP Administrator</i>	<i>1410</i>	<i>1</i>	<i>9,100.00</i>				
	<i>Prorate Salaries & Benefits</i>	<i>1410</i>	<i>2</i>	<i>2,000.00</i>				
<i>H/A Wide</i>	<i>Fees & Costs</i>							
	<i>A & E Fees</i>	<i>1430</i>	<i>1</i>	<i>10,000.00</i>				
	<i>Printing Costs</i>	<i>1430</i>	<i>2</i>	<i>1,000.00</i>				
<i>H/A Wide</i>	<i>Site Improvements</i>							
	<i>Repair/Replace Sidewalks</i>	<i>1450</i>	<i>750 Sqft.</i>	<i>5,000.00</i>				
	<i>Replace/Repair Parking Areas</i>	<i>1450</i>	<i>500 Sqft.</i>	<i>3,400.00</i>				

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

PHAName: <i>Sinton Housing Authority</i>	Grant Type and Number Capital Fund Program#: <i>TX59P17450103</i> Capital Fund Program Replacement Housing Factor#:	Federal FY of Grant: <i>2003</i>
---	--	-------------------------------------

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	
<i>TX17401</i>	<i>Dwelling Structures</i>							
	<i>Repair/Replace Roofs</i>	<i>1460</i>	<i>15</i>	<i>61,775.00</i>				
	<i>Paint Interiors</i>	<i>1460</i>	<i>15</i>	<i>15,000.00</i>				
<i>H/A Wide</i>	<i>Dwelling Equipment</i>							
	<i>Replace Ranges</i>	<i>1465.1</i>	<i>15</i>	<i>6,000.00</i>				
	<i>Replace Refrigerators</i>	<i>1465.1</i>	<i>12</i>	<i>6,000.00</i>				

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.

CFP5 -Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
H/A Wide	Sinton Housing Authority	
1406 Operations		60,000.00 FY2004 -2007
1408 Management Improvements		
Management Training		30,000.00 FY2004 -2007
Upgrade Computer Software		50,000.00 FY2004 -2007
Maintenance Training		30,000.00 FY2004 -2007
1410 Administration		
Prorate Salaries & Benefits		60,000.00 FY2004 -2007
CFP Administrator		45,000.00 FY2004 -2007
1430 Fees & Costs		
A & E Fees		60,000.00 FY2004 -2007
Printing Costs		4,000.00 FY2004 -2007
Annual Plan Preparation		4,000.00 FY2004 -2007
Total estimated cost over next 5 years		343,000.00

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 planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year 0 information is included in the Capital Fund Program Annual Statement.

-wide physical or management improvements
of the 5 - Year cycle, because this

CFP5 - Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
TX59P174 -01	Sinton Housing Authority	
1460 Dwelling Structures		
Paint Exteriors		42,800.00 FY2004
Replace Water Heater/Storage Doors		42,800.00 FY2005
Paint Interiors		30,800.00 FY2006
Replace Bath Fixtures		30,800.00 FY2007
Replace Interior Doors		42,800.00 FY2004
Replace/Repair Ceramic Tile		42,800.00 FY2005
Replace/Repair Kitchen Cabinets & Tops		30,800.00 FY2006
Replace Kitchen Plumbing Fixtures		30,800.00 FY2007
Replace/Repair Roofs		30,800.00 FY2006
Replace Floor Tile		30,800.00 FY2007
1450 Site Improvements		
Landscaping		25,750.00 FY2004
Repair Parking Lots		25,750.00 FY2005
Upgrade Playgrounds/Parks		25,750.00 FY2005
Replace/Repair Water System		25,750.00 FY2006
Total estimated cost over next 5 years		459,000.00

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. This 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 havenot been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balance should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Dates should include any HUD -approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

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

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

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

B. PHDEP Budget Summary

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

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 TAMatch	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise — not 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 TAMatch					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

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

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

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

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

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

1.							
2.							
3.							

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

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

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

Required Attachment D: Resident Member on the PHA Governing Board

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

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

Alma Garcia

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

- Elected
 Appointed

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

Term of Appointment: *2 Years*
Term Expires: *2/01/05*

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):

C. Date of next term expiration of governing board member:

October 1, 2003

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

Ruben Fonseca
Mayor
City of Sinton

Required Attachment E: Membership of the Resident Advisory Board or Boards

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

After numerous attempts to locate persons interested in becoming a member of the Resident Advisory Board (public postings, personal contact, notices to residents, etc.), and as all residents have input into Housing Authority activities, all residents will be considered as members of the Resident Advisory Board.

**REQUIRED ATTACHMENT F: BRIEF STATEMENT OF PROGRESS IN
MEETING 5-YEAR PLAN MISSION & GOALS**

**5-YEAR PLAN
PHAFISCAL YEARS 2000 -2004
[24CFR Part 903.5]**

A. Mission

- 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: (state mission here)

B. Goals

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)
- Improve voucher management: (SEMAP score)
- Increase customer satisfaction:
- Concentrate one effort 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:(listbelow)
PHAGoal:Increaseassistedhousingchoices

Objectives:

- Providevoucher mobilitycounseling:
- Conductoutreacheffortstopotentialvoucherlandlords
- Increasevoucherpaymentstandards
- Implementvoucherhomeownershipprogram:
- Implementpublichousingorotherhomeownershipprograms:
- Implementpublichousing site -basedwaitinglists:
- Convertpublichousingtovouchers:
- Other:(listbelow)

HUDStrategicGoal:Improvecommunityqualityoflifeandeconomicvitality

PHAGoal:Providean improvedliv ingenvironment

Objectives:

- Implementmeasurestodeconcentratepovertybybringinghigherincome publichousinghouseholdstolowerincomedevelopments:
- Implementmeasurestopromoteincomemixinginpublichousingb y assuringaccessforlowerincomefamiliesinto higherincome developments:
- Implementpublichousingsecurityimprovements:
- Designateddevelopmentsorbuildingsforparticularresidentgroups (elderly,personswit hdisabilities)
- Other:(listbelow)

HUDStrategicGoal:Promoteself -sufficiencyandassetdevelopmentoffamilies andindividuals

PHAGoal:Promoteself -sufficiencyandassetdevelopmentofassistedhouseholds

Objectives:

- Increasethenumberandpercentageofemployedpersonsinassisted families:
- Provideorattractsupportiveservicestoimproveassistancerecipients' employability:
- Provideorattractsupportiveservicesto incre aseindependenceforthe elderlyorfamilieswithdisabilities.
- Other:(listbelow)

HUDStrategicGoal:EnsureEqualOpportunityinHousingforallAmericans

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)

Required Attachment G: Voluntary Conversion Initial Assessments

Component 10(B)

- a. How many of the PHA's developments are subject to the Required Initial Assessments?

One

- a. How many of the HA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)?

One

- c. How many assessments were conducted for the PHA's covered developments?

One

- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessment?

Development Name	Number of Units
------------------	-----------------

None

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments.

AttachmentH:FollowUpPlan

The following items have been or are in the process of being implemented to assure compliance with items scored below 75% in the Authority's most recent RASS scores ("Safety", "Neighborhood Appearance" & "Communication").

1. Safety
 - a. Additional security lighting Authority wide
 - b. The Authority will request additional security patrols by the local police department.

2. Neighborhood Appearance
 - a. Landscaping projects to add to curb appeal
 - b. Additional trash containers located at problem sites
 - c. Resident counseling to reinforce need for neighborhood appearance

3. Communication
 - a. Revise office hours of operation to better serve the residents.
 - b. Develop a more positive relationship with residents
 - c. Install a suggestion box and solicit comments from residents concerning H/A issues

These items will be completed April 2004 utilizing CFP as a funding source as necessary

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

PHAName <i>Sinton Housing Authority</i>	Grant Type and Number Capital Fund Program: <i>TX59P17490798</i> Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: <i>1998</i>
---	--	--

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 9/30/02 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds	0.00		0.00	0.00
2	1406 Operations	0.00		0.00	0.00
3	1408 Management Improvements	0.00		0.00	0.00
4	1410 Administration	10,000.00		10,000.00	10,000.00
5	1411 Audit	0.00		0.00	0.00
6	1415 Liquidated Damages	0.00		0.00	0.00
7	1430 Fees and Costs	25,215.00		25,215.00	25,215.00
8	1440 Site Acquisition	0.00		0.00	0.00
9	1450 Site Improvement	23,000.00		23,000.00	23,000.00
10	1460 Dwelling Structures	241,785.00		241,785.00	241,785.00
11	1465.1 Dwelling Equipment — Nonexpendable	0.00		0.00	0.00
12	1470 Nondwelling Structures	0.00		0.00	0.00
13	1475 Nondwelling Equipment	0.00		0.00	0.00
14	1485 Demolition	0.00		0.00	0.00
15	1490 Replacement Reserve	0.00		0.00	0.00
16	1492 Moving to Work Demonstration	0.00		0.00	0.00
17	1495.1 Relocation Costs	0.00		0.00	0.00
18	1498 Mod Used for Development	0.00		0.00	0.00
19	1502 Contingency	0.00		0.00	0.00
20	Amount of Annual Grant: (sum of lines 2 -19)	300,000.00		300,000.00	300,000.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Sect. 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation				

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

PHAName: <i>Sinton Housing Authority</i>		Grant Type and Number Capital Fund Program: <i>TX59P17490798</i> Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: <i>1998</i>		
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	
<i>H/A Wide</i>	<i>Administration</i>	<i>1410</i>	<i>1</i>	<i>10,000.00</i>		<i>10,000.00</i>	<i>10,000.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Fees & Costs</i>	<i>1430</i>	<i>1</i>	<i>25,215.00</i>		<i>25,215.00</i>	<i>25,215.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Site Improvements</i>							<i>Complete</i>
	<i>Replace Sewer Lines</i>	<i>1450</i>	<i>1000 Ft</i>	<i>23,000.00</i>		<i>23,000.00</i>	<i>23,000.00</i>	<i>Complete</i>
<i>TX174 -01</i>	<i>Dwelling Structures</i>							
	<i>Replaced Floor Tile</i>	<i>1460</i>	<i>10,000 Ft</i>	<i>84,652.00</i>		<i>84,652.00</i>	<i>84,652.00</i>	<i>Complete</i>
	<i>Replace Kitchen Cabinets</i>	<i>1460</i>	<i>60</i>	<i>78,600.00</i>		<i>78,600.00</i>	<i>78,600.00</i>	<i>Complete</i>
	<i>Replace Tub Surrounds</i>	<i>1460</i>	<i>5</i>	<i>12,500.00</i>		<i>12,500.00</i>	<i>12,500.00</i>	<i>Complete</i>
	<i>Replace Shower Diverters</i>	<i>1460</i>	<i>5</i>	<i>2,000.00</i>		<i>2,000.00</i>	<i>2,000.00</i>	<i>Complete</i>
	<i>Replace Lavatories</i>	<i>1460</i>	<i>40</i>	<i>10,000.00</i>		<i>10,000.00</i>	<i>10,000.00</i>	<i>Complete</i>
	<i>Replace Windows</i>	<i>1460</i>	<i>84</i>	<i>54,533.00</i>		<i>54,533.00</i>	<i>54,533.00</i>	<i>Complete</i>

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

PHAName <i>Sinton Housing Authority</i>	Grant Type and Number Capital Fund Program: <i>TX59P17490799</i> Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: <i>1999</i>
---	--	--

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: **9/30/02**
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds	0.00			
2	1406 Operations	60,000.00		60,000.00	60,000.00
3	1408 Management Improvements	0.00		0.00	0.00
4	1410 Administration	10,765.00		10,765.00	4,500.00
5	1411 Audit	0.00		0.00	0.00
6	1415 Liquidated Damages	0.00		0.00	0.00
7	1430 Fees and Costs	15,000.00		15,000.00	5,000.00
8	1440 Site Acquisition	0.00		0.00	0.00
9	1450 Site Improvement	35,000.00		35,000.00	35,000.00
10	1460 Dwelling Structures	29,000.00		29,000.00	45,100.00
11	1465.1 Dwelling Equipment — Nonexpendable	6,500.00		6,500.00	6,665.00
12	1470 Non Dwelling Structures	0.00		0.00	0.00
13	1475 Non Dwelling Equipment	0.00		0.00	0.00
14	1485 Demolition	0.00		0.00	0.00
15	1490 Replacement Reserve	0.00		0.00	0.00
16	1492 Moving to Work Demonstration	0.00		0.00	0.00
17	1495.1 Relocation Costs	0.00		0.00	0.00
18	1498 Mod Used for Development	0.00		0.00	0.00
19	1502 Contingency	0.00		0.00	0.00
20	Amount of Annual Grant: (sum of lines 2 - 19)	156,265.00		156,265.00	156,265.00
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				
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

PHAName: <i>Sinton Housing Authority</i>		Grant Type and Number Capital Fund Program: <i>TX59P17490799</i> Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: <i>1999</i>		
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	
<i>H/A Wide</i>	<i>Operations</i>	<i>1406</i>	<i>1</i>	<i>60,000.00</i>		<i>60,000.00</i>	<i>60,000.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Administration</i>	<i>1410</i>	<i>1</i>	<i>10,765.00</i>		<i>10,765.00</i>	<i>4,500.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Fees & Costs</i>	<i>1430</i>	<i>1</i>	<i>15,000.00</i>		<i>15,000.00</i>	<i>5,000.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Site Improvements</i>	<i>1450</i>	<i>1</i>	<i>35,000.00</i>		<i>35,000.00</i>	<i>35,000.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Dwelling Structures</i>	<i>1460</i>	<i>1</i>	<i>29,000.00</i>		<i>29,000.00</i>	<i>45,100.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Dwelling Equipment</i>	<i>1465.1</i>	<i>1</i>	<i>6,500.00</i>		<i>6,500.00</i>	<i>6665.00</i>	<i>Complete</i>

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

PHAName <i>Sinton Housing Authority</i>		Grant Type and Number Capital Fund Program: TX59P17450100 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies			<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/02		<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total Non -CFP Funds	0.00				
2	1406 Operations	31,715.00	31,715.00	31,715.00	31,715.00	
3	1408 Management Improvements	0.00	0.00	0.00	0.00	
4	1410 Administration	5,000.00	5,000.00	5,000.00	5,000.00	
5	1411 Audit	0.00	0.00	0.00	0.00	
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00	
7	1430 Fees and Costs	22,052.00	22,052.00	22,052.00	0.00	
8	1440 Site Acquisition	0.00	0.00	0.00	0.00	
9	1450 Site Improvement	0.00	0.00	0.00	0.00	
10	1460 Dwelling Structures	0.00	0.00	0.00	0.00	
11	1465.1 Dwelling Equipment — Nonexpendable	97,948.00	0.00	0.00	0.00	
12	1470 Nondwelling Structures	0.00	97,948.00	97,948.00	0.00	
13	1475 Nondwelling Equipment	0.00	0.00	0.00	0.00	
14	1485 Demolition	0.00	0.00	0.00	0.00	
15	1490 Replacement Reserve	0.00	0.00	0.00	0.00	
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00	
17	1495.1 Relocation Costs	0.00	0.00	0.00	0.00	
18	1498 Mod Used for Development	0.00	0.00	0.00	0.00	
19	1502 Contingency	0.00	0.00	0.00	0.00	
20	Amount of Annual Grant: (sum of lines 2 - 19)	156,715.00	156,715.00	156,715.00	36,715.00	
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					
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

PHAName: <i>Sinton Housing Authority</i>		Grant Type and Number Capital Fund Program: <i>TX59P17450100</i> Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: <i>2000</i>		
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	
<i>H/A Wide</i>	<i>Operations</i>	<i>1406</i>	<i>1</i>	<i>60,000.00</i>	<i>31,715.00</i>	<i>31,715.00</i>	<i>31,715.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Administration</i>	<i>1410</i>	<i>1</i>	<i>10,765.00</i>	<i>5,000.00</i>	<i>5,000.00</i>	<i>5,000.00</i>	<i>Complete</i>
<i>H/A Wide</i>	<i>Fees & Costs</i>	<i>1430</i>	<i>1</i>	<i>22,052.00</i>	<i>22,052.00</i>	<i>22,052.00</i>	<i>0.00</i>	<i>Pending</i>
<i>H/A Wide</i>	<i>Site Improvements</i>	<i>1450</i>	<i>1</i>	<i>60,000.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	
<i>H/A Wide</i>	<i>Dwelling Structures</i>	<i>1460</i>	<i>1</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	
<i>H/A Wide</i>	<i>Dwelling Equipment</i>	<i>1465.1</i>	<i>5</i>	<i>97,948.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	
<i>H/A Wide</i>	<i>Non Dwelling Structures</i>							
	<i>Construct Maintenance Facility</i>	<i>1475</i>	<i>1</i>	<i>0.00</i>	<i>97,948.00</i>	<i>97,948.00</i>	<i>0.00</i>	<i>Pending</i>

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

PHAName: <i>Sinton Housing Authority</i>	Grant Type and Number Capital Fund Program : TX59P174501 -01 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: <i>2001</i>
--	--	--

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 9/30/02
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations	9,268.00	9,268.000	0.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration	0.00	0.00	0.00	0.00
5	1411 Audit		0.00		
6	1415 Liquidated Damages		0.00		
7	1430 Fees and Costs	25,923.00	25,923.00	0.00	0.00
8	1440 Site Acquisition		0.00		
9	1450 Site Improvement	124,645.00	0.00	0.00	0.00
10	1460 Dwelling Structures	0.00	58,200.00	0.00	0.00
11	1465.1 Dwelling Equipment — Nonexpendable	0.00	16,250.00	0.00	0.00
12	1470 Nondwelling Structures	0.00	50,195.00	0.00	0.00
13	1475 Nondwelling Equipment	0.00	0.00	0.00	0.00
14	1485 Demolition		0.00		
15	1490 Replacement Reserve		0.00		
16	1492 Moving to Work Demonstration		0.00		
17	1495.1 Relocation Costs		0.00		
18	1498 Mod Used for Development		0.00		
19	1502 Contingency		0.00		
20	Amount of Annual Grant: (sum of lines 2 - 19)	159,836.00	159,836.00	0.00	0.00
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 II: Supporting Pages								
PHAN Name: Sinton Housing Authority		Grant Type and Number Capital Fund Program#: TX59P17450101 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	
<i>H/A Wide</i>	<i>Operations</i>	<i>1406</i>	<i>1</i>	<i>0.00</i>	<i>9,268.00</i>			
<i>H/A Wide</i>	<i>Management Improvements</i>							
	<i>Non Technical Help</i>	<i>1408</i>	<i>1</i>	<i>6,268.00</i>	<i>0.00</i>	<i>0.00</i>		<i>Pending</i>
	<i>Sundry Items</i>	<i>1408</i>	<i>1</i>	<i>3,000.00</i>	<i>0.00</i>	<i>0.00</i>		<i>Pending</i>
<i>H/A Wide</i>	<i>Fees & Costs</i>							
	<i>A & E Fees</i>	<i>1430</i>	<i>1</i>	<i>15,671.00</i>	<i>15,671.00</i>	<i>0.00</i>		<i>Pending</i>
	<i>On -Site Inspector</i>	<i>1430</i>	<i>1</i>	<i>7,052.00</i>	<i>7,052.00</i>	<i>0.00</i>		<i>Pending</i>
	<i>Printing</i>	<i>1430</i>	<i>1</i>	<i>1,200.00</i>	<i>1,200.00</i>	<i>0.00</i>		<i>Pending</i>
	<i>Annual Plan Preparation</i>	<i>1430</i>	<i>1</i>	<i>2,000.00</i>	<i>2,000.00</i>	<i>0.00</i>		<i>Pending</i>
<i>TX174 -01</i>	<i>Site Improvements</i>							
	<i>Replace Lateral Sewer Lines</i>	<i>1450</i>	<i>84</i>	<i>124,645.00</i>	<i>0.00</i>	<i>0.00</i>		<i>Pending</i>
<i>TX174 -01</i>	<i>Dwelling Structures</i>							
	<i>Paint Exteriors</i>	<i>1460</i>	<i>60</i>	<i>0.00</i>	<i>42,000.00</i>	<i>0.00</i>		<i>Pending</i>
	<i>Paint Soffit & Trim</i>	<i>1460</i>	<i>60</i>	<i>0.00</i>	<i>9,000.00</i>	<i>0.00</i>		<i>Pending</i>
	<i>Replace Call To Aid Devices</i>	<i>1460</i>	<i>24</i>	<i>0.00</i>	<i>7,200.00</i>	<i>0.00</i>		<i>Pending</i>
<i>H.A Wide</i>	<i>Non Dwelling Structures</i>							
	<i>Renovate Main Office</i>	<i>1470</i>	<i>1</i>	<i>0.00</i>	<i>50,195.00</i>	<i>0.00</i>		<i>Pending</i>
<i>H/A Wide</i>	<i>Dwelling Equipment</i>							
	<i>Replace Ranges/Refrigerators</i>	<i>1465.1</i>	<i>25</i>	<i>0.00</i>	<i>12,500.00</i>	<i>0.00</i>		<i>Pending</i>
	<i>Replace Water Heaters</i>	<i>1465.1</i>	<i>25</i>	<i>0.</i>	<i>3,750.00</i>	<i>0.00</i>		<i>Pending</i>

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

PHAName <i>Sinton Housing Authority</i>	Grant Type and Number Capital Fund Program: <i>TX59P17450102</i> Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: <i>2002</i>
---	--	--

<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/02	<input type="checkbox"/> Final Performance and Evaluation Report	

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds	0.00			
2	1406 Operations	0.00	25,500.00		
3	1408 Management Improvements	7,500.00	0.00		
4	1410 Administration	3,000.00	0.00		
5	1411 Audit	0.00	0.00		
6	1415 Liquidated Damages	0.00	0.00		
7	1430 Fees and Costs	17,500.00	17,500.00		
8	1440 Site Acquisition	0.00	0.00		
9	1450 Site Improvement	14,814.00	14,814.00		
10	1460 Dwelling Structures	16,461.00	16,461.00		
11	1465.1 Dwelling Equipment — Nonexpendable	12,500.00	12,500.00		
12	1470 Nondwelling Structures	65,000.00	65,000.00		
13	1475 Nondwelling Equipment	0.00	0.00		
14	1485 Demolition	0.00	0.00		
15	1490 Replacement Reserve	0.00	0.00		
16	1492 Moving to Work Demonstration	0.00	0.00		
17	1495.1 Relocation Costs	0.00	0.00		
18	1498 Mod Used for Development	0.00	0.00		
19	1502 Contingency	15,000.00	0.00		
20	Amount of Annual Grant: (sum of lines 2 - 19)	151,775.00	151,775.00		
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				
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

PHAName: <i>Sinton Housing Authority</i>		Grant Type and Number Capital Fund Program: <i>TX59P17450102</i> Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: <i>2002</i>		
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	
<i>H/A Wide</i>	<i>Operations</i>	<i>1406</i>	<i>1</i>	<i>0.00</i>	<i>25,500.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
<i>H/A Wide</i>	<i>Management Improvements</i>							
	<i>Management Training</i>	<i>1408</i>	<i>1</i>	<i>5,000.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	
	<i>Maintenance Training</i>	<i>1408</i>	<i>1</i>	<i>2,500.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	
<i>H/A Wide</i>	<i>Administration</i>							
	<i>Prorate Salaries</i>	<i>1410</i>	<i>2</i>	<i>2,250.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	
	<i>Prorate Benefits</i>	<i>1410</i>	<i>2</i>	<i>750.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	
<i>H/A Wide</i>	<i>Fees & Costs</i>							
	<i>A&E Fees</i>	<i>1410</i>	<i>1</i>	<i>15,700.00</i>	<i>15,700.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
	<i>Reproduction Costs</i>	<i>1410</i>	<i>1</i>	<i>785.00</i>	<i>785.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
	<i>Five Year Plan Preparation</i>	<i>1410</i>	<i>1</i>	<i>1,015.00</i>	<i>1,015.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
<i>TX174 -01</i>	<i>Site Improvements</i>							
	<i>Repair/Replace Parking Lots</i>	<i>1450</i>	<i>9</i>	<i>4,500.00</i>	<i>4,500.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
	<i>Upgrade Playgrounds/Parks</i>	<i>1450</i>	<i>1</i>	<i>7,500.00</i>	<i>7,500.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
	<i>Reseed Bare Dirt Areas</i>	<i>1450</i>	<i>1</i>	<i>2,814.00</i>	<i>2,814.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>

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

PHAName: <i>Sinton Housing Authority</i>		Grant Type and Number Capital Fund Program#: <i>TX59P17450102</i> Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: <i>2002</i>		
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	
<i>TX174 -01</i>	<i>Dwelling Structures</i>							
	<i>Replace Kitchen Cabinets & Tops</i>	<i>1460</i>	<i>7</i>	<i>15,800.00</i>	<i>15,800.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
	<i>Replace Kitchen Plumbing Fixtures</i>	<i>1460</i>	<i>7</i>	<i>5,600.00</i>	<i>5,600.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
	<i>Replace/Repair Roofs</i>	<i>1460</i>	<i>45</i>	<i>0.00</i>	<i>65,000.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
<i>H/A Wide</i>	<i>Dwelling Equipment</i>							
	<i>Replace Ranges</i>	<i>1465.1</i>	<i>18</i>	<i>7142.00</i>	<i>7,142.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
	<i>Replace Refrigerators</i>	<i>1465.1</i>	<i>18</i>	<i>5358.00</i>	<i>5,358.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
<i>H/A Wide</i>	<i>Non Dwelling Structures</i>							
	<i>Construct Maintenance Facility</i>	<i>1470</i>	<i>1</i>	<i>65,000.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>Pending</i>
<i>H/A Wide</i>	<i>Contingency</i>	<i>1502</i>	<i>1</i>	<i>15,000.00</i>	<i>0.00</i>			

