

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

SmallPHAPlanUpdate
AnnualPlanforFiscalYear:2003

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDIN
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

PHA Plan Agency Identification

PHAName: PoteetHousingAuthority

PHANumber: TX59P236

PHAFiscalYearBeginning:(mm/yyyy) 10/2003

PHA Plan Contact Information:

Name: Rebecca Leal

Phone: (830) 742 -3589

TDD:

Email (if available): poteethousing@karnesec.net

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

PHA Programs Administered :

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

Annual PHA Plan Fiscal Year 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.

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ii. Executive Summary

[24CFR Part 903.79(r)]

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

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

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

The Housing Authority of the City of Poteet is not proposing any changes in Policy at this time. Changes to the Annual Plan and the Five Year Action Plan have been made to complete the proposed work in a more comprehensive manner.

2. Capital Improvement Needs

[24CFR Part 903.79(g)]

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

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

- What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$108,419
- 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 C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3.D Demolition and Disposition

[24CFR Part 903.79(h)]

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

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

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2. Activity Description

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

4. Voucher Homeownership Program

[24CFR Part 903.79(k)]

- A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 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 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 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

[24CFR Part 903.79(r)]

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

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are attached at Attachment (Filename)
3. In what manner did the PHA address those comments? (select all that apply)
- The PHA changed portions of the PHA Plan in response to comments. A list of these changes is included
 Yes No: below
 Yes No: at the end of the RAB Comments in Attachment _____
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment _____.
- Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here)
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: (describe below)

- Signed the Certification of Compliance with the State Consolidated Plan. Additionally, the State of Texas encourages all PHA to pursue any and all possible efforts to provide decent and safe housing for low income families by contributing funds for those efforts to the cities in which they are relocated. These funds are to be used to better the quality of life for low income families

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

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

A. Substantial Deviation from the 5-year Plan:

- Any change to the Mission Statement;
- 50% deletion from or addition to the goals and objectives as a whole;

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- 50% or more decrease in the quantifiable measurement of any individual goal or objective.

B. Significant Amendment or Modification to the Annual Plan:

- A change of more than 50% in the funding amount projected in the Financial Resource Statement and/or the capital Fund Program Annual Statement;
- Any change in a policy or procedure that requires a regulatory 30 day posting.

Attachment A

Supporting Documents Available for Review

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

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

List of Supporting Documents Available for Review

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

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
NA	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
NA	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
NA	<p>PHDEP-related documentation:</p> <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 - a hard 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	<p>Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G)</p> <p><input type="checkbox"/> check here if included in the public housing A&O Policy</p>	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
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

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

PHAName: Poteet Housing Authority	Grant Type and Number Capital Fund Program: TX59 -P23650103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement **Reserve for Disasters/Emergencies** **Revised Annual Statement (revision no:)**
 Performance and Evaluation Report for Period Ending: **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	15,050			
3	1408 Management Improvements				
4	1410 Administration	2,920			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	18,421			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	40,800			
11	1465.1 Dwelling Equipment — Nonexpendable	6,000			
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	25,228			
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 - 19)	108,419			
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				

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

PHAName: Poteet Housing Authority		Grant Type and Number Capital Fund Program: TX59 -P23650103 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	
24	Amount of line 20 Related to Energy Conservation Measures				

ATTACHMENTC:

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Poteet Housing Authority		Grant Type and Number Capital Fund Program#: TX59-P236-50103 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	
PHA-Wide	Operations	1406		12,550				
PHA-Wide	Administration Program administration, advertising	1410		2,920				
PHA-Wide	Fees and Costs Design services, preparation of annual plan, accounting fees	1430		11,750				
TX-2 TX-1	Dwelling Structures Abate asbestos -24 units Upgrade Bathrooms	1460		40,199				
PHA-Wide	Dwelling Equipment Ranges, refrigerators, water heaters	1465		6,000				
PHA-Wide	Non-Dwelling Equipment Maintenance equipment	1475		5,000				
	Relocation Costs Temporary relocation of residents during abatement	1485		30,000				

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

PHAName: Poteet Housing Authority		Grant Type and Number Capital Fund Program#: TX59-P236-50103 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	

TableLibrary

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)	
	PHA Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

Operations	12,550	2004
Programadministration,CFPclerk,advertising	2,920	
Designservices,annualplan	12,199	
Foundationrepairs,backfillsoil	3,650	
TX1 -Upgradebathrooms	34,025	
TX-1-Upgradeelectrical,installcentralheat/ac	37,075	
Dwellingequipment –ranges,refrigerators,waterheaters	4,000	
Non-dwellingequipment -ma intenance	2,000	
Operations	12,550	2005
Programadministration,CFPclerk,advertising	2,920	
Designservices,annualplan	10,634	
TX-1 Upgradeelectrical,installcentralheat/ac	52,000	
Dwellingequipment –ranges,refrigerators,waterheaters	6,000	
Non-dwellingequipment –maintenancetruckw/lift,maintenance,office equipment	24,315	
Operations	12,550	2006
Programadministration,CFPclerk,advertising	2,920	
Designservices,annualplan	10,634	
TX-1 Upgradeelectrical,installcentralheat/ac	76,315	
Dwellingequipment –ranges,refrigerators,waterheaters	6,000	
Operations	12,550	2007
Programadministrat ion,CFPclerk,advertising	2,920	
Designservices,annualplan	10,634	
TX-2 Upgradeelectrical,installcentralheat/ac	76,315	
Dwellingequipment –ranges,refrigerators,waterheaters	6,000	

Totalestimatedcostovernext5yea rs	542,095	
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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 PHDEPT target Area (development or site where activities will be conducted), the total number of units in each PHDEPT 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.

PHDEPT Target Areas (Name of development(s) or site)	Total # of Units within the PHDEPT Target Area(s)	Total Population to be Served within the PHDEPT 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 PH DE P 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 –ReimbursementofLawEnforcement					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	OtherFunding (Amount/ Source)	PerformanceIndicators
1.							
2.							
3.							

9115 -SpecialInitiative					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/ Source)	PerformanceIndicators
1.							
2.							
3.							

9116 -GunBuybackTAMatch					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9120 -SecurityPersonnel					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9130 –EmploymentofInvestigators					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
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 -DrugIntervention					TotalPHD EPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9180 -DrugTreatment					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
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:

Dolores Kievit

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

Elected

Appointed

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

Two year term to end 5/31/2004

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

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain):

B. Date of next term expiration of a governing board member: 5/31/04

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

Mr. Lino Donato, the Mayor of the City of Poteet, TX.

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.)

Mr. Lucio Pacheco
151 Avenue D
Poteet, TX 78065

Ms. Mary Strong (Section 8 resident)
701 Oak Haven
Pleasanton, TX 78064

Ms. Anna Guzman
163 Avenue D
Poteet, TX 78065

The members of the Resident Advisory Board did not have any comments concerning the PHA Plan.

Required Attachment F: Component 10(B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? 2
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? 0
- c. How many Assessments were conducted for the PHA's covered developments? 1
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: 0

Required Attachment G: Deconcentration Plan

The primary components of the Deconcentration Plan for the Housing Authority of the City of Poteet are:

1. At least 40 percent of the families admitted during the fiscal year must not have incomes over 30 percent of the median income for the area, as defined by HUD;
2. In order to prevent or correct concentrations of the lowest income families in any one project, the Authority may skip over another family on the waiting list in order to house a family with higher income.

ATTACHMENTH –2001CFPforperiodending3/03
AnnualStatement/PerformanceandEvaluationReport
CapitalFundProgramandCapitalFundProgramReplacementFactor(CFP/CFPRHF)Part1:Summary

HAName: HousingAuthorityoftheCityofPoteet
 GrantTypeandNumber: CFPTX59P23650101
 FederalFYof Grant: 2001
 CapitalFundProgramGrantNo.: TX59P23650101
 ReplacementHousingFactorGrantNo.:

OriginalAnnualStatement ReserveforDisasters/Emergencies **XXRevisedAnnualStatement(RevisionNo.:1)** FinalProgressReport
XPerformanceandEvaluationReportforPeriodEnding:03/2003 FinalPerformanceandEvaluationReport

LineNo.	SummarybyDevelopmentAccount	TotalEstimatedCost Original	Revised	TotalActualCost Obligated	Expended
1	TotalNon -CFPFunds	0	0	0	0
2	1406 Operations	0	0	0	0
3	1408 ManagementImprovementsSoftCosts	0	0	0	0
	ManagementImprovementsHardCosts	2,500	0	0	0
4	1410 Administration	13,650	4,975	4,225	1,925
5	1411 Audit	0	0	0	0
6	1415 LiquidatedDamages	0	0	0	0
7	1430 FeesandCosts	25,800	26,450	23,450	0

8	1440	SiteAcquisition	0	0	0	0
9	1450	SiteImprovements	0	0	0	0
10	1460	DwellingStructures	60,000	60,000	0	0
11	1465.1	DwellingEquipment -Nonexpendable	0	3,043	3,043	3,043
12	1470	NondwellingStructures	0	0	0	0
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13	1475	NondwellingEquipment	0	18,440	18,440	18,440
14	1485	Demolition	0	0	0	0
15	1490	ReplacementReserve	0	0	0	0
16	1492	MovingtoWorkDemonstration	0	0	0	0
17	1495.1	RelocationCosts	14,723	3,765	0	0
18	1499	DevelopmentActivities	0	0	0	0
19	1502	Contingency	0	0	0	0
20	AmountofAnnualGrant(Sumoflines2 -19)		116,673	116,673	49,158	23,408
	Amountoffline20RelatedtoLBPActivities		0	0	0	0
	Amountoffline20RelatedtoSection504Compliance		0	0	0	0

Amountoffline20RelatedtoSecurity	-SoftCosts	0	0	0	0
Amountoffline20RelatedtoSecurity	-HardCosts	0	0	0	0
Amountoffline20RelatedtoEnergyConservationMeasures		0	0	0	0
CollateralizationExpensesorDebtService		0	0	0	0

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**AnnualStatement/PerformanceandEvaluationReport
CapitalFundProgramandCapitalFundProgramReplacementFactor(CFP/CFPRHF)
PartII:SupportingPages**

HAName:	GrantTypeandNumber:	CFPTX59P 23650101	FederalFYof Grant
HousingAuthorityoftheCityofPoteet	CapitalFundProgramGrantNo.:	TX59P23650101	2001
	ReplacementHousingFactorGrantNo.:		

Development Number	GeneralDescriptionofMajorWork Name/HA-Wide Activities	Development Account Number	Quantity	TotalEstimatedCost		TotalActualCost		StatusofWork
				Original	Revised	Obligated	Expended	

HOUSINGAUTHORITYTOTAL:

		0	116,673	116,673	49,158	23,408
	MANAGEMENT IMPROVEMETS	1408	2,500	0	0	0
PHAWide	Hardware/software		2,500	0	0	0
	ADMINISTRATION	1410	13,650	4,975	4,225	1,925
	advertising,printing		750	750	0	0
	CFPclerk		11,800	1,925	1,925	1,925
PHAWide	programadministration		1,100	2,300	2,300	0
	FEESANDCOSTS	1430	25,800	26,450	23,450	0
PHAWide	constructiondesign,constructionadministration		22,050	22,100	22,100	0
	asbestostesting,specsandmonitoring					
	StateofTexasabatementsfees		3,000	3,000	0	0
	accountingfees		0	600	600	0
	preparationofPHAPlan		750	750	750	0
	SITEIMPROVEMENTS	1460	60,000	60,000	0	0
TX-1	Abatementofasbestoscontainingflooringand installationofnewflooring		60,000	60,000	0	0

	DWELLINGEQUIPMENT	1465.1	0	3,043	3,043	3,043
PHAWide	Installadditionalwindowa/cunits		0	3,043	3,043	3,043
	NON-DWELLINGEQUIPMENT	1475	0	18,440	18,440	18,440
	Maintenancetruckw/liftgate		0	18,440	18,440	18,440
PHAWide	RELOCATIONCOSTS	1495	14,723	3,765	0	0
	Temporaryrelocationofresidentsduring abatement		14,723	3,765	0	0

**CapitalFundProgramandCapitalFundProgramReplacementFactor(CFP/CFPRHF)
PartIII:ImplementationSchedule**

HAName:	GrantTypeandNumber:	CFPTX59P23650101	FederalFYof Grant	2001
HousingAuthorityoftheCityofPoteet	CapitalFundProgramGrantNo.:	TX59P23650101		
	ReplacementHousingFactorGrantNo.:			

DevelopmentNumber Name/HA -Wide Activities	AllFundsO Original	bligated Revised (Attachexplanation)	Actual	AllFundsExpended (QuarterEndingDate) Original	Revised (Attachexplanation)	Actual	ReasonsforRevisedTargetDates
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PHAWide

09/2003

09/2004

TX-1

09/2003

09/2004

TX-2

09/2003

09/2004

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ATTACHMENT I –2002CFPforperiodending03/2003

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgramReplacementFactor(CFP/CFPRHF)Part1:Summary

HAName: HousingAuthorityoftheCityofPoteet	GrantTypeandNumber: CapitalFundProgramGrantNo.: ReplacementHousingFactorGrantNo.:	CFPTX59P23650102 TX59P23650102	FederalFYof Grant 2002
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<input type="checkbox"/> OriginalAnnualStatement	<input type="checkbox"/> ReserveforDisasters/Emergencies	XXRevisedAnnualStatement(RevisionNo.:1)	<input type="checkbox"/> FinalProgressReport
XPerformanceandEvaluationReportforPeriodEnding:03/2003		<input type="checkbox"/> FinalPerformanceandEvaluationReport	

LineNo.	SummarybyDevelopmentAccount	TotalEstimatedCost Original	Revised	TotalActualC Obligated	ost Expended
1	TotalNon -CFPFunds	0	0	0	0
2	1406 Operations	0	0	0	0
3	1408 ManagementImprovementsSoftCosts	0	0	0	0
	ManagementImprovementsHardCosts	2,500	2,500	0	0
4	1410 Administration	15,470	15,470	0	0
5	1411 Audit	0	0	0	0
6	1415 LiquidatedDamages	0	0	0	0
7	1430 FeesandCosts	26,800	22,800	0	0
8	1440 SiteAcquisition	0	0	0	0
9	1450 SiteImprovements	0	0	0	0
10	1460 DwellingStructures	46,649	46,649	0	0
11	1465.1 DwellingEquipment -Nonexpendable	0	0	0	0
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12	1470 NondwellingStructures	0	0	0	0
13	1475 NondwellingEquipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 ReplacementReserve	0	0	0	0
16	1492 MovingtoWorkDemonstration	0	0	0	0
17	1495.1 RelocationCosts	17,000	21,000	0	0

18	1499	DevelopmentActivities	0	0	0	0
19	1502	Contingency	0	0	0	0
20	AmountofAnnualGrant(Sumoflines2 -19)		108,419	108,419	0	0
	Amountoffline20RelatedtoLBPActivities		0	0	0	0
	Amountoffline20Related toSection504Compliance		0	0	0	0
	Amountoffline20RelatedtoSecurity -SoftCosts		0	0	0	0
	Amountoffline20RelatedtoSecurity -HardCosts		0	0	0	0
	Amountoffline20RelatedtoEnergyConservationMeasures		0	0	0	0

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**AnnualStatement/PerformanceandEvaluationReport
CapitalFundProgramandCapitalFundProgramReplacementFactor(CFP/CFPRHF)
PartII:SupportingPages**

HAName:	GrantTypeandNumber:	CFPTX59P23650102	FederalFYof Grant
HousingAuthorityoftheCityofPoteet	CapitalFundProgramGrantNo.:	TX59P23650102	2002
	ReplacementHousingFactorGrantNo.:		

Development Number	GeneralDescriptionofMajorWork Categories	Development Account	Quantity	TotalEstimatedCost	TotalActualCost	StatusofWork
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HOUSINGAUTHORITYTOTAL:		0	108,419	108,419	0	0
	MANAGEMENTIMPROVEMENTS	1408	2,500	2,500	0	0
PHAWide	computersoftware/hardwareupgrade		2,500	2,500	0	0
	ADMINISTRATION	1410	15,470	15,470	0	0
PHAWide	advertising,printing		1,500	1,500	0	0
PHAWide	CFPclerk		11,800	11,800	0	0
PHAWide	programadministration		2,170	2,170	0	0
	FEESANDCOSTS	1430	26,800	22,800	0	0
PHAWide	constructiondesign,constructionadministration		22,050	18,050	0	0
	TX -1StateofTexasfees		3,000	3,000	0	0
	accountingfees		1,000	1,000	0	0
	preparationofannualplan		750	750	0	0
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	DWELLINGSTRUCTURES	1460	46,649	46,649	0	0
TX-1	Upgradeofbathrooms		46,649	46,649	0	0
	RELOCATIONCOSTS	1495.1	17,000	21,000	0	0
TX-1	temporaryrelocationofresidents		17,000	21,000	0	0

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

HAName:	GrantTypeandNumber:	CFPTX59P23650102	FederalFYof
HousingAuthorityoftheCityofPoteet	CapitalFundProgramGrantNo.:	TX59P23650102	Grant
	ReplacementHousingFactorGrantNo.:		2002

DevelopmentNumber Name/HA -Wide Activities	AllFundsObligated			AllFundsExpended (QuarterEndingDate)			ReasonsforRevisedTargetDates
	Original	Revised (Attachexplanation)	Actual	Original	Revised (Attachexplanation)	Actual	
PHAWide	03/2004			09/2006			
TX-1	03/2004			09/2006			
TX-2	03/2004			09/20065			