PHA Plans

Streamlined Annual Version

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

OMB No. 2577-0226
(exp. 05/31/2006)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal Year: 2004 PHA Name: Murphy Housing Authority

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

Streamlined Annual PHA Plan
Agency Identification

PHA Name: Murphy Housing Authority **PHA Number:** NC19P030

PHA Fiscal Year Beginning: (mm/yyyy) 07/2004

PHA Programs Administered:

☐**Public Housing and Section 8** ☐**Section 8 Only** ■ι **Public Housing Only**

Number of public housing units: Number of S8 units: Number of public housing units: 50
Number of S8 units:

☐PHA Consortia: (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

PHA Plan Contact Information:

Name: Bennie Jo Palmer Phone: 828-837-6662
TDD: Email (if available): murphyha@webworkz.com

Public Access to Information

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

■ PHA's main administrative office ☐ PHA's development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. ■ι Yes ☐ No.
If yes, select all that apply:

■ι 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)

■ι Main business office of the PHA ☐ PHA development management offices
☐ Other (list below)

Streamlined Annual PHA Plan
Fiscal Year 2004
[24 CFR Part 903.12(c)]

Table of Contents
[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

A. PHA PLAN COMPONENTS

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4 1. Site-Based Waiting List Policies
903.7(b)(2) Policies on Eligibility, Selection, and Admissions
5 2. Capital Improvement Needs
903.7(g) Statement of Capital Improvements Needed
6 3. Section 8(y) Homeownership
903.7(k)(1)(i) Statement of Homeownership Programs
7 4. Project-Based Voucher Programs
8 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
9 6. Supporting Documents Available for Review
11 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
14 8. Capital Fund Program 5-Year Action Plan
9. Attachment – Performance Report – CFP NC30-501-00 – File name nc030a01
10. Attachment – Performance Report – CFP NC30-501-01 – File name nc030b01
11. Attachment – Performance Report – CFP NC30-501-02 – File name nc030c01
12. Attachment – Performance Report – CFP NC30-501-03 – File name nc030d01

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*: *Board Resolution to Accompany the Streamlined Annual Plan* identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, *Certification for a Drug-Free Workplace;*
Form HUD-50071, *Certification of Payments to Influence Federal Transactions*; and
Form SF-LLL &SF-LLLa, *Disclosure of Lobbying Activities*.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

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

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B. NO

Site-Based Waiting Lists				
Development Information: (Name, number, location)	**Date Initiated**	**Initial mix of Racial, Ethnic or Disability Demographics**	**Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL**	**Percent change between initial and current mix of Racial, Ethnic, or Disability demographics**

2. What is the number of site based waiting list developments to which families may apply at one time?

3. How many unit offers may an applicant turn down before being removed from the site-based waiting list?

4. ☐ Yes ☐ No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component. N/A

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

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

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
   ☐ PHA main administrative office
   ☐ All PHA development management offices
   ☐ Management offices at developments with site-based waiting lists
   ☐ At the development to which they would like to apply
   ☐ Other (list below)

2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

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

A. Capital Fund Program

1. ■ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.

2. ☐ Yes ■ No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

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

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

1. ☐ Yes ■ No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).

   2. Status of HOPE VI revitalization grant(s):

HOPE VI Revitalization Grant Status
a. Development Name: b. Development Number:
c. Status of Grant: ☐ Revitalization Plan under development ☐ Revitalization Plan submitted, pending approval ☐ Revitalization Plan approved ☐ Activities pursuant to an approved Revitalization Plan underway

3. ☐ Yes ■ No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name(s) below:

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

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

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program

(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

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

2. Program Description:

a. Size of Program

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

If the answer to the question above was yes, what is the maximum number of participants this fiscal year?

b. PHA-established eligibility criteria

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

c. What actions will the PHA undertake to implement the program this year (list)?

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

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

☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price 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.

☐ Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):

☐ Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

☐ Yes ■ No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.

1. ☐ Yes ☐ No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:

   ☐ low utilization rate for vouchers due to lack of suitable rental units
   ☐ access to neighborhoods outside of high poverty areas
   ☐ other (describe below:)

2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: (provide name here) State of North Carolina

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 on its waiting lists on the needs expressed in the Consolidated Plan/s.
☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
■ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
■ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
☐ Other: (list below)

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

The North Carolina Consolidated Plan's goals of providing decent housing, suitable living environment and expanding economic opportunity are consistent with and support the PHA's goals and objectives.

6. Supporting Documents Available for Review for Streamlined Annual PHA Plans

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 Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans*;	5 Year and Annual Plans
X	*PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan*	Streamlined Annual Plans
	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard 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 for families on the PHA's public housing and Section 8 tenant-based waiting lists.	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] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. ☐ Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
	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. ■ıCheck 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. ■ıCheck here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. ☐ Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
		Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any policies governing any Section 8 special housing types ☐ Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures ■ ı Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures. ☐ Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (Section _____of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs ■ Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
X	Cooperative 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
	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). ■ ı Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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

PHA Name: Murphy Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: NC19P03050104 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2004

■ **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	$13,925			
3	1408 Management Improvements	$2,575			
4	1410 Administration	$13,925			
5	1411 Audit	$1,250			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	$2,550			
8	1440 Site Acquisition				
9	1450 Site Improvement	$5,375			
10	1460 Dwelling Structures	$92,930			
11	1465.1 Dwelling Equipment—Nonexpendable	$5,150			
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	$1,575			
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	$139,255			
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 compliance	0			
24	Amount of line 21 Related to Security – Soft Costs	0			
25	Amount of Line 21 Related to Security – Hard Costs	$4,930			
26	Amount of line 21 Related to Energy Conservation Measures	0			

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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

PHA Name: Murphy Housing Authority		**Grant Type and Number** Capital Fund Program Grant No: NC19P03050104 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
NC 30-1 & 2	Landscape/Sitework	1450	LS	$5,375				
Scattered Sites	Kitchens	1460	40	$62,000				
	Hardware	1460	42	$4,930				
	Flooring	1460	15	$15,600				
	Porches/Rails	1460	32	$10,400				
	Appliances	1475	20	$5,150				
	Subtotal			**$103,455**				
PHA-Wide	Operations	1460	LS	$13,925				
	Management Improvements	1408	LS	$2,575				
	Administration	1410	LS	$13,925				
	Audit	1411	LS	$1,250				
PHA-Wide	Fees and Costs	1430	LS	$2,550				
	Relocation	1495	5	$1,575				
	Subtotal			**$35,800**				
	Grant Total			**$139,255**				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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

PHA Name: Murphy Housing Authority	**Grant Type and Number** Capital Fund Program No: NC19P03050104 Replacement Housing Factor No:	**Federal FY of Grant:** 2004

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NC30-1	9/30/06			9/30/08			
Scattered Sites							
NC30-2	9/30/06			9/30/08			
Scattered Sites							
PHA-Wide	9/30/06			9/30/08			

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan **Part I: Summary**					
PHA Name Murphy Housing Authority				**ιOriginal 5-Year Plan** **☐Revision No:**	
Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2005 PHA FY: 7/01/05	Work Statement for Year 3 FFY Grant: 2006 PHA FY: 7/01/06	Work Statement for Year 4 FFY Grant: 2007 PHA FY: 7/01/07	Work Statement for Year 5 FFY Grant: 2008 PHA FY: 7/01/08
	Annual Statement				
NC30-1		$60,600	$105,030	$37,000	$37,000
Scattered Sites					
NC30-2		$44,430	0	$68,030	$68,030
Scattered Sites					
PHA-Wide		$34,225	$34,225	$34,225	$34,225
CFP Funds Listed for 5-year planning		$139,255	$139,255	$139,255	$39,255
Replacement Housing Factor Funds		0	0	0	0

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : 2005 FFY Grant: 2005 PHA FY: 7/01/05			Activities for Year: 2006 FFY Grant: 2006 PHA FY: 7/01/06		
	Development Name/Number	**Major Work Categories**	**Estimated Cost**	**Development Name/Number**	**Major Work Categories**	**Estimated Cost**
See						
Annual	NC30-1	Sewer System	$23,500	NC30-1	Kitchens	$12,100
Statement	Scattered Sites	Kitchens	$12,100	Scattered Sites	Closets	$4,100
		Appliances	$4,250		Appliances	$4,100
		Plumbing	$1,750		Plumbing	$2,500
		Painting	$4,250		Painting	$4,200
		Electrical	$12,500		Doors	$4,500
		Porch Rails	$2,250		HVAC	$10,000
	NC30-2	Parking/Paving	$10,430		Block Walls	$27,500
	Scattered Sites	HC Unit	$34,000		Sidewalks	$3,000
					Site Lights	$2,500
	PHA-Wide	Fees and Costs	$2,550		Electrical	$12,500
		Operations	$13,925		Sewer System	$18,030
		Audit	$1,250			
		Administration	$13,925	PHA-Wide	Fees and Costs	$2,550
		Management	$2,575		Operations	$13,925
Total CFP Estimated Cost			$ 139,255			$ 139,255

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities					
Activities for Year : 2007 FFY Grant: 2007 PHA FY: 7/01/07			Activities for Year: 2008 FFY Grant: 2008 PHA FY: 7/01/08		
Development Name/Number	**Major Work Categories**	**Estimated Cost**	**Development Name/Number**	**Major Work Categories**	**Estimated Cost**
NC30-1	Kitchens	$12,000	NC30-1	Kitchens	$12,000
Scattered Sites	Appliances	$4,250		Appliances	$4,250
	Plumbing	$1,750		Plumbing	$1,750
	Painting	$4,250		Painting	$4,250
	Electrical	$12,500		Electrical	$12,500
	Rails	$2,250		Rails	$2,250
NC30-2	Appliances	$11,030	NC30-2	Parking/Paving	$11,030
Scattered Sites	Plumbing	$3,500	Scattered Sites	Plumbing	$3,500
	Flooring	$10,000		Flooring	$10,000
	HVAC	$15,000		HVAC	$15,000
	Rails	$5,000		Rails	$5,000
	Security Screens	$13,000		Security Screens	$13,000
	Landscaping	$2,000		Landscaping	$2,000
	Site Lights	$2,500		Site Lights	$2,500
	Siding	$6,000		Siding	$6,000
PHA-Wide	Fees and Costs	$2,550		Fees and Costs	$2,550
	Operations	$13,925		Operations	$13,925
	Audit	$1,250		Audit	$1,250
	Administration	$13,925		Administration	$13,925
	Management	$2,575		Management	$2,575
Total CFP Estimated Cost		$139,255			$139,255

CIAP Budget/Progress Report
Part I: Summary
Comprehensive Improvement Assistance Program (CIAP)

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

OMB Approval No. 2577-0044 (exp. 1/31/96)

Public Reporting Burden for this collection of information is estimated to average 12.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0044), Washington, D.C. 20503. Do not send this completed form to either of these addressees.

HA Name MURPHY HOUSING AUTHORITY | Modernization Project Number NC19P030501-00 | FFY of Grant Approval 2000

☐ Original CIAP Budget ☐ Revised CIAP Budget/Revision Number _____ ■ Progress Report for Period Ending 12/31/03 ☐ Final Progress Report

Line No.	Summary by Development Account		Total Funds Approved Original	Revised	Total Funds Obligated	Expended
1	1406	Operating	$14,178		$14,178	$14,178
2	1408	Management Improvements	$3,125		$3,125	$3,125
3	1410	Administration	$14,178		$14,178	$14,178
4	1415	Liquidated Damages				
5	1430	Fees and Costs	$505		$505	$505
6	1440	Site Acquisition				
7	1450	Site Improvement	$10,070		$10,070	$10,070
8	1460	Dwelling Structures	$99,727		$99,727	$99,727
9	1465.1	Dwelling Equipment - Nonexpendable				
10	1470	Nondwelling Structures				
11	1475	Nondwelling Equipment				
12	1495.1	Relocation Cost				
13	Amount of CIAP Grant (Sum of lines 2-12)		$141,783		$141,783	$141,783
14	Amount of line 13 Related to LBP Testing		0		0	0
15	Amount of line 13 Related to LBP Abatement		0		0	0
16	Amount of line 13 Related to Section 504 Compliance		0		0	0

Signature of Executive Director and Date

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HUD Certification: In approving this budget and providing assistance to a specific housing development(s), I hereby certify that the assistance will not be more than is necessary to make the assisted activity feasible after taking into account assistance from other government sources (24 CFR 12.50).

Signature of Field Office Manager (or Regional Public Housing Director in co-located office)/OIP Director and Date

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CIAP Budget/Progress Report
Part II: Supporting Pages

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

Comprehensive Improvement Assistance Program (CIAP)

Development Number	Description of Work Items	Development Account Number	Funds Approved			Funds Obligated	Funds Expended
			Original	Revised	Difference		
NC30-1	Replace sanitary sewer trunk lines to each dwelling unit (23 units x $2982) (contract/force account)	1450	$10,070			$10,070	$10,070
	Furr-out block walls, insulate perimeter walls and install new sheetrock. Repair interiors including kitchens, baths & electrical trim. (5 units x $4865) (force account)	1460	$99,727			$99,727	$99,727
	SUBTOTAL SITEWORK, DWELLING STRUCTURES		**$109,797**			**$109,797**	**$109,797**
PHA-Wide	Housing Authority will hire a Construction Management Consultant to assist in hiring personnel, scheduling, estimating, purchasing, and management of all phases of the construction process.	1430	0			0	0
	PHA will have an audit conducted.	1430	$505			$505	$505
	Administrative costs associated with implementing this program.	1410	$14,178			$14,178	$14,178
	Purchase computer software to update tenant account program.	1408	$3,125			$3,125	$3,125
	Operations	1406	$14,178			$14,178	$14,178
	SUBTOTAL PHA WIDE		**$31,986**			**$31,986**	**$31,986**
	GRAND TOTAL FOR ALL ACCOUNTS		**$141,783**			**$141,783**	**$141,783**

ref Handbook 7485.1

CIAP Budget/Progress Report
Part III: Implementation Schedule
Comprehensive Improvement Assistance Program (CIAP)

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

Development Number	First Architect/Engineer Contract Awarded			All Funds Obligated			All Funds Expended		
	Original	Revised (Attach explanation)	Actual	Original	Revised (Attach explanation)	Actual	Original	Revised (Attach explanation)	Actual
NC30-1	12/31/00		12/31/00	03/31/02		12/31/00	03/31/03		04/30/03

form HUD-52837 (01/05/95)
ref Handbook 7485.3

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
MURPHY HOUSING AUTHORITY	Capital Fund Program: NC19P03050101 Capital Fund Program Replacement Housing Factor Grant No:	2001

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
■ **Performance and Evaluation Report for Period Ending: 12/31/03** ☐ **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	$14,862		$14,862	$9,039
3	1408 Management Improvements	$3,200		$3,200	0
4	1410 Administration	$14,200		$14,200	$13,127
5	1411 Audit	$500		$500	0
6	1415 liquidated Damages				
7	1430 Fees and Costs	$4,474		$4,474	$2,224
8	1440 Site Acquisition				
9	1450 Site Improvement	$5,500		$5,500	$4,164
10	1460 Dwelling Structures	$97,680		$97,680	$63,296
11	1465.1 Dwelling Equipment—Nonexpendable	$4,250		$4,250	$1,888
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)	$144,666		$144,666	$93,738
21	Amount of line 20 Related to LBP Activities	0		0	0
22	Amount of line 20 Related to Section 504 Compliance	0		0	0
23	Amount of line 20 Related to Security	0		0	0

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
MURPHY HOUSING AUTHORITY	Capital Fund Program: NC19P03050101 Capital Fund Program Replacement Housing Factor Grant No:	2001

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
■ **Performance and Evaluation Report for Period Ending: 12/31/03** ☐ **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	$4,500		$4,500	$4,500

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

PHA Name: MURPHY HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program #: NC19P03050101 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	
PHA-WIDE	Yearly Plan/Fee Accountant	1430	LS	$4,474		$4,474	$2,224	
	PHA Planning/Salaries	1406	LS	$14,862		$14,862	$9,039	
	Copier/printer	1408	LS	$3,200		$3,200	0	
	Administration	1410	LS	$14,200		$14,200	$13,127	
	Audit	1411	LS	$500		$500	0	
NC 30-1	Sewer Line Upgrade	1450	LS	$5,500		$5,500	$4,164	
	Complete Upgrade Interiors	1460	11	$85,348		$85,348	$63,296	
	Ranges/refrigerators	1465	11	$4,250		$4,250	$1,888	
	Closet Doors	1460	6	$4,250		$4,250	$4,250	
	TOTAL			$144,666		$144,666	$93,738	

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

PHA Name: MURPHY HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program #: NC19P03050101 Capital Fund Program Replacement Housing Factor #:	**Federal FY of Grant:** 2001

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA-WIDE	9/03		12/02	9/04			
NC 30-1	9/03		12/02	9/04			

Capital Fund Program 5-Year Action Plan

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

CFP 5-Year Action Plan ☐ **Original statement** ☐ **Revised statement**		
Development Number	**Development Name (or indicate PHA wide)**	
Description of Needed Physical Improvements or Management Improvements	**Estimated Cost**	**Planned Start D (HA Fiscal Year**
Total estimated cost over next 5 years		

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
MURPHY HOUSING AUTHORITY	Capital Fund Program: NC19P03050102 Capital Fund Program Replacement Housing Factor Grant No:	2002

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
■ **Performance and Evaluation Report for Period Ending: 12/31/03** ☐ **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	$14,112		$14,112	0
3	1408 Management Improvements	$3,200		$3,200	0
4	1410 Administration	$14,112		$14,112	0
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	$500		$500	0
8	1440 Site Acquisition				
9	1450 Site Improvement	$4,000		$4,000	0
10	1460 Dwelling Structures	$100,948		$100,948	0
11	1465.1 Dwelling Equipment—Nonexpendable	$4,250		$4,250	0
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)	$141,122		$141,122	0
21	Amount of line 20 Related to LBP Activities	0		0	0
22	Amount of line 20 Related to Section 504 Compliance	0		0	0
23	Amount of line 20 Related to Security	0		0	0

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
MURPHY HOUSING AUTHORITY	Capital Fund Program: NC19P03050102 Capital Fund Program Replacement Housing Factor Grant No:	2002

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
■ **Performance and Evaluation Report for Period Ending: 12/31/03** ☐ **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	$4,500		$4,500	0

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

PHA Name: MURPHY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program #: NC19P03050102 Capital Fund Program Replacement Housing Factor #:	Federal FY of Grant: 2002

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	Fees & Costs	1430	LS	0		0	0	
	Financial Audit	1430	LS	$500		$500	0	
	Planning, Sundry, Salaries	1410	LS	$14,112		$14,112	0	
	Computer Software	1408	LS	$3,200		$3,200	0	
	PHA operations	1406	LS	$14,112		$14,112	0	
NC 30-1	Kitchen Upgrades	1460	5	$14,100		$14,100	0	
	Appliances	1465	5	$4,250		$4,250	0	
	Interior Plumbing	1460	5	$1,750		$1,750	0	
	Interior Painting	1460	5	$7,250		$7,250	0	
	Electrical Upgrades	1460	5	$12,500		$12,500	0	
	Porch Rails	1460	5	$5,250		$5,250	0	
NC 30-2	Interior Plumbing	1460	10	$4,500		$4,500	0	
	Flooring	1460	10	$12,000		$12,000	0	
	Air Conditioning	1460	10	$17,000		$17,000	0	
	Porch Rails	1460	20	$5,000		$5,000	0	
	Security Window Screens	1460	10	$15,000		$15,000	0	
	Prune Trees	1450	LS	$2,000		$2,000	0	
	Security Sight Lighting	1450	LS	$2,000		$2,000	0	
	Building Exteriors	1460	LS	$6,598		$6,598	0	
	TOTAL			$141,122		$141,122	0	

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

PHA Name: MURPHY HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program #: NC19P03050102 Capital Fund Program Replacement Housing Factor #:	**Federal FY of Grant:** 2002

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA-WIDE	12/03		12/02	6/05			
NC 30-1	12/03		12/02	6/05			

Capital Fund Program 5-Year Action Plan

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

CFP 5-Year Action Plan ☐ **Original statement** ☐ **Revised statement**		
Development Number	**Development Name (or indicate PHA wide)**	
Description of Needed Physical Improvements or Management Improvements	**Estimated Cost**	**Planned Start D (HA Fiscal Year**
Total estimated cost over next 5 years		

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
MURPHY HOUSING AUTHORITY	Capital Fund Program: NC19P03050103 Capital Fund Program Replacement Housing Factor Grant No:	2003

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
■ **Performance and Evaluation Report for Period Ending: 12/31/03** ☐ **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	$11,031		$11,031	0
3	1408 Management Improvements	$3,300		$3,300	0
4	1410 Administration	$11,611		$11,611	0
5	1411 Audit	$1,000		$1,000	0
6	1415 liquidated Damages				
7	1430 Fees and Costs	$1,500		$1,500	0
8	1440 Site Acquisition				
9	1450 Site Improvement	$4,500		$4,500	0
10	1460 Dwelling Structures	$78,922		$78,922	0
11	1465.1 Dwelling Equipment—Nonexpendable	$4,250		$4,250	0
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)	$116,114		$116,114	0
21	Amount of line 20 Related to LBP Activities	0		0	0
22	Amount of line 20 Related to Section 504 Compliance	0		0	0
23	Amount of line 20 Related to Security	$4,250		$4,250	0

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
MURPHY HOUSING AUTHORITY	Capital Fund Program: NC19P03050103 Capital Fund Program Replacement Housing Factor Grant No:	2003

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
■ **Performance and Evaluation Report for Period Ending: 12/31/03** ☐ **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	$4,250		$4,250	0

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

PHA Name: MURPHY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program #: NC19P03050103 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	Fees & Costs	1430	LS	$1,500		$1,500	0	
	Financial Audit	1411	LS	$1,000		$1,000	0	
	Planning, Sundry, Salaries	1410	LS	$11,611		$11,611	0	
	Computer Software	1408	LS	$3,300		$3,300	0	
	PHA operations	1406	LS	$11,031		$11,031	0	
NC 30-1	Kitchen Upgrades	1460	5	$10,574		$10,574	0	
	Appliances	1465	5	$4,250		$4,250	0	
	Interior Plumbing	1460	5	$3,500		$3,500	0	
	Interior Painting	1460	5	$4,250		$4,250	0	
	Electrical Upgrades	1460	5	$8,500		$8,500	0	
	Porch Rails/Building Exteriors	1460	5	$6,348		$6,348	0	
	Door Frames/weatherstripping	1460	10	$4,500		$4,500	0	
	Air Conditioning	1460	5	$9,500		$9,500	0	
	Insulation/Sheetrock Walls	1460	5	$27,500		$27,500	0	
	Closet Doors	1460	5	$4,250		$4,250	0	
	Security Site Lighting	1450	LS	$2,500		$2,500	0	
	Sidewalks	1450	200 LF	$2,000		$2,000	0	
	TOTAL			$116,114		$116,114	0	

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

PHA Name: MURPHY HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program #: NC19P03050103 Capital Fund Program Replacement Housing Factor #:	**Federal FY of Grant:** 2003

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA-WIDE	9/05		9/03	9/07			
NC 30-1	9/05		9/03	9/07			

Capital Fund Program 5-Year Action Plan

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

CFP 5-Year Action Plan ☐ **Original statement** ☐ **Revised statement**		
Development Number	**Development Name (or indicate PHA wide)**	
Description of Needed Physical Improvements or Management Improvements	**Estimated Cost**	**Planned Start D (HA Fiscal Year**
Total estimated cost over next 5 years		

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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

PHA Name: Murphy Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: NC19P03050203 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2003

☐ι**Original Annual Statement** ☐**Reserve for Disasters/ Emergencies** ☐**Revised Annual Statement (revision no:)**
■**Performance and Evaluation Report for Period Ending: 12/31/03** ☐**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	$2,314		0	0
3	1408 Management Improvements	$500		0	0
4	1410 Administration	$2,314		0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	$325		0	0
10	1460 Dwelling Structures	$16,113		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
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	$1,575		0	0
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	$23,141		0	0
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	$3,775		0	0

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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

PHA Name: Murphy Housing Authority		**Grant Type and Number** Capital Fund Program Grant No: NC19P03050203 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Management Cost			$2,314		0	0	
HA Wide	Computer Printer			$500		0	0	
HA Wide	Housing Program			$2,314		0	0	
NC 1&2	Rain Block Splashes		30	$325		0	0	
NC 1	Block Wall Coverage		8	$15,908		0	0	
NC 2	Hard Wire Smoke Det.		22	$205		0	0	
NC 1	Relocation Elderly		7	$1,575		0	0	
	TOTAL			**$23,141**		**0**	**0**	

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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

PHA Name: Murphy Housing Authority	**Grant Type and Number** Capital Fund Program No: NC19P03050203 Replacement Housing Factor No:	**Federal FY of Grant:** 2003

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NC 030-1&2	02/13/06			02/13/08			
Pha-Wide	02/13/06			02/13/08			

8. Capital Fund Program Five-Year Action Plan