

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

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# PHA Plans

5 Year Plan for Fiscal Years **2005 - 2009**

Annual Plan for Fiscal Year **2005**

## *Oilton Housing Authority* *Oilton, Oklahoma*

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

**PHA Plan  
Agency Identification**

**PHA Name:** *Oklahoma Housing Authority*

**PHA Number:** *OK022*

**PHA Fiscal Year Beginning: (mm/yyyy)** *07/2005*

**Public Access to Information**

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

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

**Display Locations For PHA Plans and Supporting Documents**

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

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

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

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

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2006 - 2009**  
[24 CFR Part 903.5]

**A. Mission**

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)

**B. Goals**

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

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
  - Renovate or modernize public housing units:
  - Demolish or dispose of obsolete public housing:

- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

- PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other homeownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

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

- PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

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

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

Objectives:

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

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

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

**Other PHA Goals and Objectives: (list below)**

**Annual PHA Plan**  
**PHA Fiscal Year 2005**  
 [24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Streamlined Plan:**

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

**Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

***ATTACHMENT "D"***

**iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

**Table of Contents**

|  | <u>Page #</u> |
|--|---------------|
| <b>Annual Plan</b>                                   |               |
| i. Executive Summary                                 | 58            |
| ii. Table of Contents                                | 4             |
| 1. Housing Needs                                     | 8             |
| 2. Financial Resources                               | 14            |
| 3. Policies on Eligibility, Selection and Admissions | 16            |
| 4. Rent Determination Policies                       | 25            |
| 5. Operations and Management Policies                | 29            |
| 6. Grievance Procedures                              | 30            |
| 7. Capital Improvement Needs                         | 31            |
| 8. Demolition and Disposition                        | 33            |
| 9. Designation of Housing                            | 34            |
| 10. Conversions of Public Housing                    | 35            |
| 11. Homeownership                                    | 36            |
| 12. Community Service Programs                       | 38            |

|   |    |
|---|----|
| 13. Crime and Safety  | 41 |
| 14. Pets (Inactive for January 1 PHAs)                                  | 55 |
| 15. Civil Rights Certifications (included with PHA Plan Certifications) | 43 |
| 16. Audit   | 44 |
| 17. Asset Management  | 44 |
| 18. Other Information   | 45 |

**Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment’s name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

**Required Attachments:**

- Admissions Policy for Deconcentration
- FY **2005** Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled **ONLY**)

**Optional Attachments:**

- PHA Management Organizational Chart
- FY 2003 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)
  - Organizational Chart Attachment “E”*
  - Grievance Procedures Attachment “F”*
  - Resident Member on the PHA governing Board – Attachment “G”*
  - Membership of Resident Advisory Board Attachment “H”*
  - Performance and Evaluation Reports – Attachment “I”*

**Supporting Documents Available for Review**

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

| <b>List of Supporting Documents Available for Review</b> |  |                                  |
|--|--|----------------------------------|
| <b>Applicable &amp; On Display</b>                       | <b>Supporting Document</b>   | <b>Applicable Plan Component</b> |
| <i>X</i>   | PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations | 5 Year and Annual Plans          |
| <i>X</i>   | State/Local Government Certification of Consistency with the Consolidated Plan   | 5 Year and Annual Plans          |

| <b>List of Supporting Documents Available for Review</b> |   |  |
|--|---|--|
| <b>Applicable &amp; On Display</b>                       | <b>Supporting Document</b>  | <b>Applicable Plan Component</b>                             |
| X  | Fair Housing Documentation:<br>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  | Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction  | Annual Plan:<br>Housing Needs                                |
| X  | Most recent board-approved operating budget for the public housing program  | Annual Plan:<br>Financial Resources;                         |
| X  | Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]  | Annual Plan: Eligibility, Selection, and Admissions Policies |
| N/A  | Section 8 Administrative Plan   | Annual Plan: Eligibility, Selection, and Admissions Policies |
| X  | Public Housing Deconcentration and Income Mixing Documentation:<br>1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and<br>2. Documentation of the required deconcentration and income mixing analysis   | Annual Plan: Eligibility, Selection, and Admissions Policies |
| X  | Public housing rent determination policies, including the methodology for setting public housing flat rents<br><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<br><input checked="" type="checkbox"/> check here if included in the public housing A & O Policy  | Annual Plan: Rent Determination                              |
| N/A  | Section 8 rent determination (payment standard) policies<br><input type="checkbox"/> check here if included in Section 8 Administrative Plan  | Annual Plan: Rent Determination                              |
| X  | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)  | Annual Plan: Operations and Maintenance                      |

| <b>List of Supporting Documents Available for Review</b> |   |   |
|--|---|---|
| <b>Applicable &amp; On Display</b>                       | <b>Supporting Document</b>  | <b>Applicable Plan Component</b>                  |
| X  | Public housing grievance procedures<br><input checked="" type="checkbox"/> check here if included in the public housing A & O Policy  | Annual Plan: Grievance Procedures                 |
| N/A  | Section 8 informal review and hearing procedures<br><input type="checkbox"/> check here if included in Section 8 Administrative Plan  | Annual Plan: Grievance Procedures                 |
| X  | The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year  | Annual Plan: Capital Needs                        |
| X  | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant   | Annual Plan: Capital Needs                        |
| X  | Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)  | Annual Plan: Capital Needs                        |
| NA   | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing                               | Annual Plan: Capital Needs                        |
| N/A  | Approved or submitted applications for demolition and/or disposition of public housing  | Annual Plan: Demolition and Disposition           |
| 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     | 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<br><input type="checkbox"/> check here if included in the Section 8 Administrative Plan  | Annual Plan: Homeownership                        |
| NA   | Any cooperative agreement between the PHA and the TANF agency   | Annual Plan: Community Service & Self-Sufficiency |
| NA   | FSS Action Plan/s for public housing and/or Section 8   | 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 (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)                       | Annual Plan: Safety and Crime Prevention          |
| X  | The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings | Annual Plan: Annual Audit                         |
| X  | Troubled PHAs: MOA/Recovery Plan  | Troubled PHAs                                     |
|  | Other supporting documents (optional)<br>(list individually; use as many lines as necessary)  | (specify as needed)                               |

| List of Supporting Documents Available for Review |                     |                           |
|---|---------------------|---------------------------|
| Applicable & On Display                           | Supporting Document | Applicable Plan Component |
|   |                     |                           |

## **1. Statement of Housing Needs**

[24 CFR Part 903.7 9 (a)]

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

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

| Housing Needs of Families in the Jurisdiction<br>by Family Type |         |                |        |         |                |      |           |
|---|---------|----------------|--------|---------|----------------|------|-----------|
| Family Type   | Overall | Afford-ability | Supply | Quality | Access-ibility | Size | Loca-tion |
| Income <= 30% of AMI  | 40      | 4              | 3      | 3       | 3              | 3    | 3         |
| Income >30% but <=50% of AMI                                    | 26      | 4              | 3      | 3       | 3              | 3    | 3         |
| Income >50% but <80% of AMI                                     | 44      | 4              | 2      | 3       | 2              | 2    | 2         |
| Elderly   | 22      | 4              | 2      | 3       | 2              | 2    | 2         |
| Families with Disabilities                                      | N/A     | N/A            | N/A    | N/A     | N/A            | N/A  | N/A       |
| White   | 134     | 4              | 3      | 3       | 2              | 2    | 2         |
| Black   | 4       | 4              | 3      | 3       | 2              | 2    | 2         |
| Hispanic  | 0       | 0              | 0      | 0       | 0              | 0    | 0         |
| Race/Ethnicity  |         |                |        |         |                |      |           |

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

- Consolidated Plan of the Jurisdiction/s  
Indicate year:
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data  
Indicate year:
- Other housing market study

Indicate year:

Other sources: (list and indicate year of information)

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

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

| Housing Needs of Families on the Waiting List  |               |                     |                 |
|--|---------------|---------------------|-----------------|
| Waiting list type: (select one)  |               |                     |                 |
| <input type="checkbox"/> Section 8 tenant-based assistance                                       |               |                     |                 |
| <input checked="" type="checkbox"/> Public Housing   |               |                     |                 |
| <input type="checkbox"/> Combined Section 8 and Public Housing                                   |               |                     |                 |
| <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) |               |                     |                 |
| If used, identify which development/subjurisdiction:   |               |                     |                 |
|  | # of families | % of total families | Annual Turnover |
| Waiting list total   | 8             |                     | 10%             |
| Extremely low income <=30% AMI   | 2             | 25%                 |                 |
| Very low income (>30% but <=50% AMI)   | 2             | 25%                 |                 |
| Low income (>50% but <80% AMI)   |               |                     |                 |
| Families with children   | 1             | 13%                 |                 |
| Elderly families   | 0             | 0%                  |                 |
| Families with Disabilities   | -0-           | 0%                  |                 |
| White  | 8             | 100%                |                 |
| Black  | -0-           | 0%                  |                 |
| Hispanic   | -0-           | 0%                  |                 |
| Race/ethnicity   | -0-           | 0%                  |                 |

| Housing Needs of Families on the Waiting List   |   |     |  |
|---|---|-----|--|
| Characteristics by Bedroom Size (Public Housing Only)   |   |     |  |
| 1BR   | 1 | 13% |  |
| 2 BR  | 7 | 87% |  |
| 3 BR  |   |     |  |
| 4 BR  |   |     |  |
| 5 BR  |   |     |  |
| 5+ BR   |   |     |  |
| Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  |   |     |  |
| If yes:   |   |     |  |
| How long has it been closed (# of months)?  |   |     |  |
| Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes   |   |     |  |
| Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes |   |     |  |

### C. Strategy for Addressing Needs

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

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required

- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

**Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

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

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

**Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

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

*Preferences to assist elderly/disabled citizens to encourage independent self sufficiency*

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

**Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

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

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

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

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

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

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

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

Select if applicable

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

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

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

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

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

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

| <b>Financial Resources:<br/>Planned Sources and Uses</b>                              |                    |                        |
|---|--------------------|------------------------|
| <b>Sources</b>  | <b>Planned \$</b>  | <b>Planned Uses</b>    |
| <b>1. Federal Grants (FY 2005 grants)</b>   |                    |                        |
| a) Public Housing Operating Fund  | <i>\$25,881.00</i> |                        |
| b) Public Housing Capital Fund  | <i>\$31,172.00</i> | <i>Modernize units</i> |
| c) HOPE VI Revitalization   | <i>N/A</i>         |                        |
| d) HOPE VI Demolition   | <i>N/A</i>         |                        |
| e) Annual Contributions for Section 8 Tenant-Based Assistance                         | <i>N/A</i>         |                        |
| f) Public Housing Drug Elimination Program (including any Technical Assistance funds) | <i>N/A</i>         |                        |

| <b>Financial Resources:<br/>Planned Sources and Uses</b>                  |                     |                     |
|---|---------------------|---------------------|
| <b>Sources</b>  | <b>Planned \$</b>   | <b>Planned Uses</b> |
| g) Resident Opportunity and Self-Sufficiency Grants                       | <i>N/A</i>          |                     |
| h) Community Development Block Grant                                      | <i>N/A</i>          |                     |
| i) HOME   | <i>N/A</i>          |                     |
| Other Federal Grants (list below)   |                     |                     |
|   |                     |                     |
| <b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b> |                     |                     |
|   |                     |                     |
| <i>2003 CFP</i>   | <i>\$15,423.73</i>  |                     |
| <i>2003 Bonus</i>   | <i>\$5,626.00</i>   | <i>Landscaping</i>  |
| <i>2004 CFP</i>   | <i>\$31,172.00</i>  |                     |
| <b>3. Public Housing Dwelling Rental Income</b>                           |                     |                     |
|   | <i>\$23,460.00</i>  |                     |
|   |                     |                     |
| <b>4. Other income (list below)</b>                                       |                     |                     |
| <i>Non-dwelling rents/ daycare</i>  | <i>\$2,700.00</i>   | <i>Operations</i>   |
| <i>Other</i>  | <i>\$300.00</i>     |                     |
| <i>Interest</i>   | <i>\$700.00</i>     |                     |
| <b>5. Non-federal sources (list below)</b>                                |                     |                     |
|   |                     |                     |
| <b>Total resources</b>  | <i>\$136,434.73</i> |                     |
|   |                     |                     |
|   |                     |                     |

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.7 9 (c)]

#### **A. Public Housing**

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

##### **(1) Eligibility**

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

- When families are within a certain number of being offered a unit: (state number) **1**
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe).

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

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

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

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

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

##### **(2) Waiting List Organization**

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

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

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

- PHA main administrative office
- PHA development site management office

Other (list below)

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

1. How many site-based waiting lists will the PHA operate in the coming year? 0

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)

### **(3) Assignment**

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- One
- Two
- Three or More

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

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

### **(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- Emergencies
- Overhoused
- Underhoused
- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)

c. Preferences

1.  Yes  No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

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

Other preferences: (select below)

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

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

## 2 Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

## **(5) Occupancy**

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

- The PHA-resident lease
- The PHA’s Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list)

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

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

**(6) Deconcentration and Income Mixing**

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

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

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

- Adoption of site based waiting lists  
If selected, list targeted developments below:
- Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- Other (list policies and developments targeted below)

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

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

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

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

## **B. Section 8 – *NOT APPLICABLE***

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

### **(1) Eligibility**

a. What is the extent of screening conducted by the PHA? (select all that apply)

- Criminal or drug-related activity only to the extent required by law or regulation
- Criminal and drug-related activity, more extensively than required by law or regulation
- More general screening than criminal and drug-related activity (list factors below)
- Other (list below)

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

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

- d.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
- Other (describe below)

**(2) Waiting List Organization**

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- PHA main administrative office
- Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

**(4) Admissions Preferences**

- a. Income targeting
- Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
- b. Preferences
1.  Yes  No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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

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

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

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

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

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

**(5) Special Purpose Section 8 Assistance Programs**

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

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

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

- Through published notices

Other (list below)

#### **4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

##### **A. Public Housing**

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

##### **(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

- \$0  
 \$1-\$25  
 \$26-\$50

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

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

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

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

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

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

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

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

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

e. Ceiling rents

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

- Yes for all developments  
 Yes but only for some developments  
 No

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

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

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

- Market comparability study  
 Fair market rents (FMR)  
 95<sup>th</sup> percentile rents

- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- Other (list below)

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

**(2) Flat Rents**

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

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below) *Landlords in city survey and surrounding PHAs*

**B. Section 8 Tenant-Based Assistance – *NOT APPLICABLE***

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

**(1) Payment Standards**

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

- Success rates of assisted families
- Rent burdens of assisted families
- Other (list below)

**(2) Minimum Rent**

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

- \$0

- \$1-\$25
- \$26-\$50

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

**5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

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

**A. PHA Management Structure**

Describe the PHA’s management structure and organization.

(select one)

- An organization chart showing the PHA’s management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:

**B. HUD Programs Under PHA Management**

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

| <b>Program Name</b>   | <b>Units or Families Served at Year Beginning</b> | <b>Expected Turnover</b> |
|---|---|--------------------------|
| Public Housing  | <i>19</i>   | <i>2</i>                 |
| Section 8 Vouchers  |   |                          |
| Section 8 Certificates  |   |                          |
| Section 8 Mod Rehab   |   |                          |
| Special Purpose Section 8 Certificates/Vouchers (list individually) |   |                          |
| Public Housing Drug Elimination Program (PHDEP)                     |   |                          |
|   |   |                          |
|   |   |                          |
| Other Federal Programs(list individually)                           |   |                          |
|   |   |                          |
|   |   |                          |

### C. Management and Maintenance Policies

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

- (1) Public Housing Maintenance and Management: (list below)  
*Admissions and Continued Occupancy Policy/  
Dwelling Lease*
- (2) Section 8 Management: (list below)

## 6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

### A. Public Housing

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

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
  - PHA main administrative office
  - PHA development management offices
  - Other (list below)

### B. Section 8 Tenant-Based Assistance – *NOT APPLICABLE*

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office  
 Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

### **A. Capital Fund Activities**

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

#### **(1) Capital Fund Program Annual Statement**

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

- The Capital Fund Program Annual Statement is provided below:  
***ATTACHMENT "A"***

#### **(2) Optional 5-Year Action Plan**

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

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

b. If yes to question a, select one:

- The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

- The Capital Fund Program 5-Year Action Plan is provided below:  
***ATTACHMENT "B"***

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

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

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

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development  
 Revitalization Plan submitted, pending approval  
 Revitalization Plan approved  
 Activities pursuant to an approved Revitalization Plan underway

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

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

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

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

1.  Yes  No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

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

| <b>Demolition/Disposition Activity Description</b>  |
|---|
| 1a. Development name:<br>1b. Development (project) number:  |
| 2. Activity type: Demolition <input type="checkbox"/><br>Disposition <input type="checkbox"/>   |
| 3. Application status (select one)<br>Approved <input type="checkbox"/><br>Submitted, pending approval <input type="checkbox"/><br>Planned application <input type="checkbox"/> |
| 4. Date application approved, submitted, or planned for submission:   |
| 5. Number of units affected:<br>6. Coverage of action (select one)<br><input type="checkbox"/> Part of the development<br><input type="checkbox"/> Total development            |
| 7. Timeline for activity:<br>a. Actual or projected start date of activity:<br>b. Projected end date of activity:   |

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

| <b>Designation of Public Housing Activity Description</b>                                  |  |
|--|--|
| 1a. Development name:  |  |
| 1b. Development (project) number:  |  |
| 2. Designation type:   |  |
| Occupancy by only the elderly <input type="checkbox"/>                                     |  |
| Occupancy by families with disabilities <input type="checkbox"/>                           |  |
| Occupancy by only elderly families and families with disabilities <input type="checkbox"/> |  |
| 3. Application status (select one)   |  |
| Approved; included in the PHA’s Designation Plan <input type="checkbox"/>                  |  |
| Submitted, pending approval <input type="checkbox"/>                                       |  |
| Planned application <input type="checkbox"/>   |  |
| 4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</u> |  |
| 5. If approved, will this designation constitute a (select one)                            |  |
| <input type="checkbox"/> New Designation Plan  |  |
| <input type="checkbox"/> Revision of a previously-approved Designation Plan?               |  |
| 6. Number of units affected:   |  |
| 7. Coverage of action (select one)   |  |
| <input type="checkbox"/> Part of the development   |  |
| <input type="checkbox"/> Total development   |  |

**10. Conversion of Public Housing to Tenant-Based Assistance**

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

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

2. Activity Description

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

| <b>Conversion of Public Housing Activity Description</b>  |  |
|---|--|
| 1a. Development name:   |  |
| 1b. Development (project) number:   |  |
| 2. What is the status of the required assessment?   |  |
| <input type="checkbox"/> Assessment underway<br><input type="checkbox"/> Assessment results submitted to HUD<br><input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question)<br><input type="checkbox"/> Other (explain below)   |  |
| 3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  |  |
| 4. Status of Conversion Plan (select the statement that best describes the current status)  |  |
| <input type="checkbox"/> Conversion Plan in development<br><input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY)<br><input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY)<br><input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway |  |

5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)

- Units addressed in a pending or approved demolition application (date submitted or approved: \_\_\_\_\_)
- Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: \_\_\_\_\_)
- Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: \_\_\_\_\_)
- Requirements no longer applicable: vacancy rates are less than 10 percent
- Requirements no longer applicable: site now has less than 300 units
- Other: (describe below)

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

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

## **11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9 (k)]

### **A. Public Housing**

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

1.  Yes  No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

### 2. Activity Description

- Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing

Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

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

**B. Section 8 Tenant Based Assistance**

1.  Yes  No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

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

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

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

b. PHA-established eligibility criteria

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

If yes, list criteria below:

## **12. PHA Community Service and Self-sufficiency Programs**

[24 CFR Part 903.7 9 (l)]

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

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

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

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

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

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

### **B. Services and programs offered to residents and participants**

#### **(1) General**

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

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

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**(2) Family Self Sufficiency program/s**

a. Participation Description

| Family Self Sufficiency (FSS) Participation |  |  |
|---|--|--|
| Program                                     | Required Number of Participants<br>(start of FY 2004 Estimate) | Actual Number of Participants<br>(As of: DD/MM/YY) |
| Public Housing                              |  |  |
| Section 8                                   |  |  |

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

**C. Welfare Benefit Reductions**

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
  - Informing residents of new policy on admission and reexamination
  - Actively notifying residents of new policy at times in addition to admission and reexamination.
  - Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
  - Establishing a protocol for exchange of information with all appropriate TANF agencies
  - Other: (list below)

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

*In order to be eligible for continued occupancy, each adult family member must either (1) contribute to eight hours community service per month (not including political activities) within the community in which the public housing development is located or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement. The following adult members are exempt from this requirement: Family members who are 62 or older, family members who are blind or disabled, family members who are primary caregiver for someone who is blind or disabled, family members engaged in work activity, family members who are exempt from work activity under Part A title IV of the Social Security Act or under any other state welfare program, including the welfare to work program, family members receiving assistance under a state program funded under Part A title IV of the Social Security Act or under any other state welfare program, including welfare to work and who are in compliance with that program.*

**13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.7 9 (m)]

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

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

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

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

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

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti

- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

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

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

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

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

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

**C. Coordination between PHA and the police**

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

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

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

**D. Additional information as required by PHDEP/PHDEP Plan**

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

**NOT APPLICABLE**

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

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

**ATTACHMENT "C"**

**15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

**16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

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

**17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

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

- 1.  Yes  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock ,

including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

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

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

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

### **18. Other Information**

[24 CFR Part 903.7 9 (r)]

#### **A. Resident Advisory Board Recommendations**

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

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

- Attached at Attachment (File name)
- Provided below:

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

- Considered comments, but determined that no changes to the PHA Plan were necessary.
- The PHA changed portions of the PHA Plan in response to comments  
List changes below:
- Other: (list below)

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

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

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

3. Description of Resident Election Process

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

- Candidates were nominated by resident and assisted family organizations  
 Candidates could be nominated by any adult recipient of PHA assistance  
 Self-nomination: Candidates registered with the PHA and requested a place on ballot  
 Other: (describe)

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

**C. Statement of Consistency with the Consolidated Plan**

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

1. Consolidated Plan jurisdiction: (provide name here)

*State of Oklahoma*

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.  
 The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.  
 The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.  
 Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

Other: (list below)

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

*The PHA will continue to strive to meet the needs of the very low and low-income families in its jurisdiction consistent with the needs addressed in the Consolidated Plan.*

#### **D. Other Information Required by HUD**

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

#### **Criteria for Substantial Deviations 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 Mission Statement such as:*
- ✓ *50% deletion from or addition to the goals and objectives as a whole.*
- ✓ *50% or more decrease in the quantifiable measurement of any individual goal or objective*

##### **b. Significant Amendment or Modification to the Annual Plan**

- ✓ *50% variance in the funds projected in the Capital Fund Program Annual Statement*
- ✓ *Any increase or decrease over 50% in the funds 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*
- ✓ *Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs*
- ✓ *Any change inconsistent with the local, approved Consolidated Plan*

## **Attachments**

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

## PHA Plan Table Library

### ATTACHMENT "A" Component 7 Capital Fund Program Annual Statement Parts I, II, and III

| Annual Statement/Performance and Evaluation Report  |   |   |         |                   |                                     |
|---|---|---|---------|-------------------|-------------------------------------|
| Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary   |   |   |         |                   |                                     |
| PHA Name: <i>Oilton Housing Authority</i>   |   | Grant Type and Number<br>Capital Fund Program Grant No: <i>Ok56P022501-05</i><br>Replacement Housing Factor Grant No: |         |                   | Federal FY of Grant:<br><i>2005</i> |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )<br><input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report |   |   |         |                   |                                     |
| Line No.  | Summary by Development Account                | Total Estimated Cost  |         | Total Actual Cost |                                     |
|   |   | Original  | Revised | Obligated         | Expended                            |
| 1   | Total non-CFP Funds                           |   |         |                   |                                     |
| 2   | 1406 Operations                               |   |         |                   |                                     |
| 3   | 1408 Management Improvements                  |   |         |                   |                                     |
| 4   | 1410 Administration                           | <i>\$1,000.00</i>   |         |                   |                                     |
| 5   | 1411 Audit                                    |   |         |                   |                                     |
| 6   | 1415 Liquidated Damages                       |   |         |                   |                                     |
| 7   | 1430 Fees and Costs                           | <i>\$3,500.00</i>   |         |                   |                                     |
| 8   | 1440 Site Acquisition                         |   |         |                   |                                     |
| 9   | 1450 Site Improvement                         |   |         |                   |                                     |
| 10  | 1460 Dwelling Structures                      | <i>\$26,672.00</i>  |         |                   |                                     |
| 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                       |   |         |                   |                                     |
| 18  | 1499 Development Activities                   |   |         |                   |                                     |
| 19  | 1501 Collateralization or Debt Service        |   |         |                   |                                     |
| 20  | 1502 Contingency                              |   |         |                   |                                     |
| 21  | Amount of Annual Grant: (sum of lines 2 – 20) | <i>\$31,172.00</i>  |         |                   |                                     |

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

|   |   |                                     |
|---|---|-------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>Ok56P022501-05</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2005</i> |
|---|---|-------------------------------------|

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 |
| 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 |                      |         |                   |          |





## ATTACHMENT “B” 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.

### Capital Fund Program Five-Year Action Plan

#### Part I: Summary

| PHA Name: <i>Oilton Housing Authority</i> |                  | <input checked="" type="checkbox"/> Original 5-Year Plan<br><input type="checkbox"/> Revision No: |  |  |  |
|---|------------------|---|--|--|--|
| Development Number/Name/HA-Wide           | Year 1           | Work Statement for Year 2<br>FFY Grant: <i>2006</i><br>PHA FY: <i>2006</i>                        | Work Statement for Year 3<br>FFY Grant: <i>2007</i><br>PHA FY: <i>2007</i> | Work Statement for Year 4<br>FFY Grant: <i>2008</i><br>PHA FY: <i>2008</i> | Work Statement for Year 5<br>FFY Grant: <i>2009</i><br>PHA FY: <i>2009</i> |
|   | Annual Statement |   |  |  |  |
| <b><i>PHA WIDE</i></b>                    |                  | <i>\$5,500.00</i>   | <i>\$8,617.00</i>  | <i>\$14,617.00</i>   | <i>\$6,617.00</i>  |
| <i>Ok022-001</i>                          |                  | <i>\$25,672.00</i>  | <i>\$22,555.00</i>   | <i>\$16,555.00</i>   | <i>\$24,555.00</i>   |
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| CFP Funds Listed for 5-year planning      |                  | <i>\$31,172.00</i>  | <i>\$31,172.00</i>   | <i>\$31,172.00</i>   | <i>\$31,172.00</i>   |
| Replacement Housing Factor Funds          |                  |   |  |  |  |





**ATTACHMENT “C”:** **PET POLICY**  
**PET POLICY**

**A. PET OWNERSHIP:** A RESIDENT MAY OWN ONE OR MORE COMMON HOUSEHOLD PETS PRESENT IN THE DWELLING UNIT OF SUCH RESIDENT,  
SUBJECT TO THE FOLLOWING CONDITIONS:

1. EACH HEAD OF HOUSEHOLD MAY OWN UP TO TWO PETS. A SEPARATE FEE AND DEPOSIT ARE REQUIRED FOR EACH PET. IF ONE OF THE PETS IS A DOG OR CAT, THE SECOND PET MAY BE A TURTLE OR OTHER PET NORMALLY CONTAINED IN A SMALL CAGE OR AN AQUARIUM FOR FISH. A BIRD, OR OTHER ANIMALS OTHER THAN FISH, SHALL BE COUNTED AS ONE PET.
2. IF THE PET IS A DOG OR CAT, IT MUST BE NEUTERED/SPAYED, AND CATS MUST BE DECLAWED. EVIDENCE OF NEUTERING/SPAYING MUST BE PROVIDED BY A STATEMENT/INVOICE FROM A VETERINARIAN. THE TENANT MUST PROVIDE WATERPROOF AND LEAK PROOF LITTER BOXES FOR CAT WASTE, WHICH MUST BE KEPT INSIDE THE UNIT. CARDBOARD BOXES ARE NOT ACCEPTABLE AND WILL NOT BE APPROVED. THE RESIDENT SHALL NOT PERMIT REFUSE FROM LITTER BOXES TO ACCUMULATE NOR TO BECOME UNSIGHTLY OR UNSANITARY.
3. CATS CAN NOT EXCEED 10 POUNDS FULLY GROWN.
4. DOGS CAN NOT EXCEED 20 POUNDS FULLY GROWN.
5. BIRDS MUST BE HOUSED IN A CAGE AND NOT ALLOWED TO FLY FREE AROUND THE UNIT.
6. AN AQUARIUM FOR FISH MUST BE 20 GALLONS OR LESS, AND THE CONTAINER MUST BE INSTALLED IN A SAFE PLACE. THE TENANT IS LIMITED TO ONE CONTAINER FOR THE FISH, HOWEVER, THERE IS NO LIMIT ON THE NUMBER OF FISH THAT CAN BE MAINTAINED IN THE CONTAINER AS LONG AS THE CONTAINER IS WELL MAINTAINED IN A CLEAN, SAFE AND

*NON-HAZARDOUS MANNER.*

- 7. DOGS AND CATS OR ANY OTHER FOUR LEGGED ANIMAL MUST HAVE RABIES AND DISTEMPER INOCULATIONS OR BOOSTERS AS APPLICABLE AND EVIDENCE MUST BE PROVIDED AT ADMISSION AND AT RECERTIFICATION. DOGS AND CATS MUST HAVE COLLARS WITH CITY TAGS AFFIXED.*
- 8. ALL PETS MUST BE HOUSED WITHIN THE UNIT AND NO FACILITIES CAN BE CONSTRUCTED OUTSIDE OF THE UNIT FOR ANY PET. NO ANIMAL SHALL BE PERMITTED TO BE LOOSE AND IF THE PET IS TAKEN OUTSIDE IT MUST BE ON A LEASH AND KEPT OFF OTHER TENANTS LAWNS.*
- 9. ALL AUTHORIZED PET(S) MUST BE UNDER THE CONTROL OF AN ADULT. AN UNLEASHED PET OR ONE TIED TO A FIXED OBJECT IS NOT UNDER THE SUPERVISION OF AN ADULT. PETS WHICH ARE ALLOWED TO RUN AT LARGE WILL BE REPORTED TO THE CITY ANIMAL CONTROL OFFICER FOR ENFORCEMENT PER THE ANIMAL ORDINANCES OF THE CITY OF OILTON. IF A MEMBER OF THE OPHA STAFF HAS TO CAPTURE THE ANIMAL AND TAKE IT TO THE POUND A FEE OF \$50.00 WILL BE ASSESSED THE TENANT TO COVER THE EXPENSE.*
- 10. PET(S) MAY NOT BE LEFT UNATTENDED FOR MORE THAN 24 CONSECUTIVE HOURS. IF IT IS REPORTED TO THE STAFF THAT A PET(S) HAS BEEN LEFT UNATTENDED FOR MORE THAN 24 HOURS, OPHA STAFF MAY ENTER THE UNIT AND REMOVE THE PET AND TRANSFER THE PET TO THE CITY ANIMAL CONTROL OFFICER. FINES AND OTHER EXPENSES WILL BE THE RESPONSIBILITY OF THE TENANT.*
- 11. PET(S), AS APPLICABLE, MUST BE WEIGHED AND THE WEIGHT DOCUMENTED BY A VETERNARIAN OR CITY ANIMAL CONTROL OFFICER. PROOF MUST BE SUBMITTED AS*

*REQUESTED BY OPHA MANAGEMENT.*

***NOTE: ANY PET THAT IS NOT FULLY GROWN WILL BE WEIGHED EVERY SIX MONTHS. ALSO, ANY PET THAT EXCEEDS THE WEIGHT LIMIT AT ANY TIME DURING OCCUPANCY WILL NOT BE AN ELIGIBLE PET AND MUST BE REMOVED FROM THE OPHA PREMISES.***

***B. RESPONSIBLE PET OWNERSHIP: EACH PET MUST BE MAINTAINED RESPONSIBLY AND IN ACCORDANCE WITH ALL APPLICABLE ORDINANCES, STATE AND LOCAL PUBLIC HEALTH, ANIMAL CONTROL, AND ANIMAL ANTI-CRUELTY LAWS AND REGULATIONS GOVERNING PET OWNERSHIP. ANY WASTE GENERATED BY A PET MUST BE PROMPTLY DISPOSED OF TO AVOID ANY UNPLEASANT ODOR AND UNSANITARY CONDITIONS, BOTH INSIDE THE UNIT AND ON OPHA PREMISES.***

***C. PROHIBITED ANIMALS: ANIMALS THAT ARE CONSIDERED VICIOUS AND/OR INTIMIDATING WILL NOT BE ALLOWED. SOME EXAMPLES OF THESE ANIMALS THAT HAVE A REPUTATION OF A VICIOUS NATURE ARE, BUT NOT LIMITED TO: ROTTWEILER, DOBERMAN PINSHER, PIT BULLDOG, REPTILES AND/OR ANY ANIMAL THAT DISPLAYS VICIOUS BEHAVIOR. THIS DETERMINATION IS AT THE DISCRETION OF THE DIRECTOR PRIOR TO EXECUTION OF THIS ADDENDUM. SNAKES, POTBELLY PIGS, FERRETS, AND ANY RODENT TYPE OF ANIMALS ARE PROHIBITED.***

***D. PET(S) SHALL NOT DISTURB, INTERFERE, OR DIMINISH THE PEACEFUL ENJOYMENT OF OTHER RESIDENTS. THE TERMS "DISTURB, INTERFERE, OR DIMINISH" SHALL INCLUDE BUT NOT BE LIMITED TO BARKING, HOWLING, CHIRPING, BITING, SCRATCHING, AND OTHER ACTIVITIES. THE HOUSING MANAGER WILL TERMINATE THE PET AUTHORIZATION IF THE PET DISTURBS OTHER RESIDENTS UNDER THIS SECTION OF THE LEASE ADDENDUM. THE RESIDENT WILL BE GIVEN ONE WEEK TO MAKE OTHER ARRANGEMENTS FOR THE CARE OF THE PET(S).***

***E. IF THE ANIMAL SHOULD BECOME DESTRUCTIVE, BECOME A NUISANCE,***

REPRESENT A THREAT TO THE SAFETY AND SECURITY OF OTHER RESIDENTS , OR CREATE A PROBLEM IN THE AREA OF CLEANLINESS AND SANITAITON, THE HOUSING MANAGER WILL NOTIFY THE RESIDENT IN WRITING, THAT THE ANIMAL MUST BE REMOVED FROM THE PUBLIC HOUSING DEVELOPMENT. THE WRITTEN NOTICE WILL CONTAIN THE DATE BY WHICH THE PET MUST BE REMOVED AND THE HEAD OF HOUSEHOLD MUST COMPLY WITH THIS DATE. THIS DATE WILL BE IMMEDIATE IF THE PET IS DETERMINED TO BE A DANGER OR A THREAT TO THE SAFETY AND SECURITY OF OTHER RESIDENTS. THE RESIDENT MAY REQUEST A HEARING WHICH WILL BE HANDLED ACCORDING TO THE OPHA'S ESTABLISHED GRIEVANCE PROCEDURE. PROVIDED, HOWEVER THE PET MUST BE IMMEDIATELY REMOVED FROM THE UNIT UPON NOTICE BEFORE HE HEARING PROCESS IF THE CAUSE IS OF SAFETY AND SECURITY ISSUE.

F. THE RESIDENT IS SOLELY RESPONSIBLE FOR CLEANING UP THE WASTE OF THE PET WITHIN THE DWELLING AND ON THE GROUNDS OF THE PUBLIC HOUSING DEVELOPMENT. IF THE PET IS TAKEN OUTSIDE IT MUST BE ON A LEASH AT ALL TIMES. IF THERE IS ANY VISIBLE WASTE BY THE PET IT MUST BE DISPOSED OF IN A PLASTIC BAG SECURELY TIED AND PLACED IN THE GARBAGE. IF THE OPHA STAFF IS REQUIRED TO CLEAN ANY WASTE LEFT BY A PET, THE RESIDENT WILL BE CHARGED \$25.00 FOR THE REMOVAL OF THE WASTE.

G. THE RESIDENT SHALL HAVE PETS RESTRAINED SO THAT MAINTENANCE CAN BE PERFORMED IN THE DWELLING UNIT. THE RESIDENT SHALL, WHENEVER AN INSPECTION OR MAINTENANCE IS SCHEDULED, EITHER BE AT HOME OR HAVE PETS CAGED OR RESTRAINED. IF A MAINTENANCE PERSON ENTERS UNIT WHERE A PET IS NOT RESTRAINED, MAINTENANCE SHALL NOT BE PERFORMED, AND THE RESIDENT SHALL BE CHARGED A FEE OF \$25.00. IF THIS SAME SITUATION OCCURS AGAIN, THE PET WILL BE IMPOUNDED BY THE CITY ANIMAL OFFICER. THE RESIDENT WILL BE RESPONSIBLE TO RECLAIM THE ANIMAL AND PAY THE CITY IMPOUND FEES. THE OPHA WILL CHARGE AN ADDITONAL FEE OF \$25.00 TO COVER THE EXPENSE OF THE EMPLOYEES TIME TO ALLEVIATE THE PROBLEM. THE HOUSING AUTHORITY SHALL NOT BE RESPONSIBLE IF ANY PET ESCAPES FROM THE RESIDENCE DUE TO MAINTENANCE, INSPECTIONS, OR OTHER ACTIVITIES OF THE LANDLORD.

**SECTION II. SCHEDULES**

***FEE AND ADDITIONAL SECURITY DEPOSIT.(EACH PET)***

| <b><i>TYPE OF PET</i></b>              | <b><i>FEE</i></b>      | <b><i>DEPOSIT</i></b>   |
|--|------------------------|-------------------------|
| <b><i>DOG</i></b>                      | <b><i>\$100.00</i></b> | <b><i>\$250.00</i></b>  |
| <b><i>CAT</i></b>                      | <b><i>\$100.00</i></b> | <b><i>\$ 250.00</i></b> |
| <b><i>CAGED ANIMALS</i></b>            | <b><i>\$50.00</i></b>  | <b><i>\$100.00</i></b>  |
| <b><i>FISH AQUARIUM</i></b>            | <b><i>0</i></b>        | <b><i>\$ 100.00</i></b> |
| <b><i>FISH BOWL(2 GAL OR LESS)</i></b> | <b><i>0</i></b>        | <b><i>\$ 25.00</i></b>  |

***THE ENTIRE FEE AND DEPOSIT(SUBJECT TO THE EXCEPTION LISTED BELOW) MUST BE PAID PRIOR TO THE EXECUTION OF THE LEASE ADDENDUM. NO PET SHALL BE ALLOWED IN THE UNIT PRIOR TO THE COMPLETION OF THE TERMS OF THIS PET POLICY. IT SHALL BE A SERIOUS VIOLATION OF THE LEASE FOR ANY RESIDENT TO HAVE A PET WITHOUT PROPER APPROVAL AND WITHOUT HAVING COMPLIED WITH THE TERMS OF THIS POLICY. SUCH VIOLATION SHALL BE CONSIDERED A VIOLATION OF THE LEASE.***

***IF THE DEPOSIT IS MORE THAN \$100.00, THE HEAD OF HOUSEHOLD MAY ELECT TO PAY \$100.00 AT THE TIME OF SIGNING THE LEASE AND \$50.00 FOR EACH CONSEQUETIVE MONTH UNTIL PAID IN FULL. THE FEE SHALL NOT BE REFUNDED, AND THE DEPOSIT WILL BE UTILIZED TO OFFSET DAMAGES CAUSED BY THE PET. ANY BALANCE, IF ANY, FROM THE DEPOSIT WILL BE REFUNDED TO THE TENANT.***

***TENANTS RESIDING AT OPHA PRIOR TO MAY 1, 2004 WILL NOT BE SUBJECT TO FEES AND DEPOSITS UNLESS PET VIOLATIONS ARE DISCOVERED BY AN INSPECTION OF THE UNIT BY MANAGEMENT. IF UNSANITARY OR UNSAFE CONDITIONS EXIST THEN THE TENANT WILL BE GIVEN NOTICE OF THE AMOUNT OF FEES AND DEPOSITS TO PAY. THIRTY DAYS NOTICE WILL BE GIVEN BEFORE ACTION TO TERMINATE THE LEASE CONTRACT. TENANTS HAVE THE RIGHT TO A HEARING AS STATED IN THE OPHA GRIEVANCE POLICY AND PROCEDURE.***

I, \_\_\_\_\_ HEREBY ATTEST AND AGREE TO THE TERMS OF THIS LEASE ADDENDUM AS FOLLOWS:

TO ABIDE BY THE REQUIREMENTS OUTLINED IN THIS LEASE ADDENDUM FOR PET OWNERSHIP AND TO KEEP THE PET(S) IN ACCORDANCE WITH THE PROVISIONS OF THE AGREEMENT.

I AGREE AND UNDERSTAND THAT I AM LIABLE FOR ANY DAMAGE OR INJURY WHATSOEVER CAUSED BY MY PET(S) AND SHALL PAY OPHA FOR ANY DAMAGES OR INJURY CAUSED BY MY PET. I SHOULD CONSIDER ACQUIRING A LIABILITY INSURANCE POLICY TO COVER THE PET(S) ACTIONS AT MY EXPENSE.

I AGREE TO ACCEPT FULL RESPONSIBILITY AND WILL NOT HOLD (INDEMNIFY) OPHA OR HUD LIABLE FOR ANY CLAIMS BY OR INJURIES TO THIRD PARTIES OR THEIR PROPERTY CAUSED BY MY PET(S).

I AGREE TO PAY A NON-REFUNDABLE FEE OF \$ \_\_\_\_\_ TO COVER ANY ADDITIONAL OPERATING EXPENSE INCURRED BY THE OPHA. I ALSO UNDERSTAND THAT THIS FEE IS DUE AND PAYABLE PRIOR TO THE EXECUTION OF THE LEASE AGREEMENT.

I AGREE TO PAY A REFUNDABLE ADDITIONAL PET SECURITY DEPOSIT OF \$ \_\_\_\_\_ TO OPHA. IF THE ADDITIONAL SECURITY DEPOSIT EXCEEDS \$100.00, THE DEPOSIT MAY BE PAID WITH AN INITIAL PAYMENT OF OF \$100.00, AND THE ADDITIONAL AMOUNT DUE IN PAYMENTS OF AT LEAST \$50.00 PER MONTH FOR \_\_\_\_\_ CONSECUTIVE MONTHS.

THE \$50.00 IS DUE AND PAYABLE WITH MY RENT AND OTHER CHARGES. IF I FAIL TO MAKE THE TOTAL PAYMENT DUE, WHICH SHALL INCLUDE THE ADDITIONAL SECURITY DEPOSIT PAYMENT, RENT AND OTHER CHARGES, I UNDERSTAND THAT MY LEASE WILL BE TERMINATED IN ACCORDANCE WITH THE PROVISIONS OF THE DWELLING LEASE AND COLLECTION POLICY. THE FEE AND INITIAL ADDITIONAL SECURITY DEPOSIT MUST BE PAID PRIOR TO THE EXECUTION OF THIS LEASE ADDENDUM. THE ADDITIONAL SECURITY DEPOSIT MAY BE USED BY THE OPHA AT THE TERMINATION OF THE LEASE TOWARD PAYMENT OF ANY RENT OR TOWARD PAYMENT OF ANY OTHER COST MADE NECESSARY BECAUSE OF RESIDENT'S OCCUPANCY OF THE PREMISES. OTHERWISE, THE ADDITIONAL SECURITY DEPOSIT OR ANY BALANCE REMAINING AFTER FINAL INSPECTION WILL BE RETURNED TO THE RESIDENT AFTER THE PREMISES ARE VACATED AND ALL KEYS HAVE BEEN RETURNED.

*I AGREE AND UNDERSTAND THAT VIOLATING THIS LEASE ADDENDUM WILL RESULT  
IN THE REMOVAL OF MY PET(S) FROM OPHA PROPERTY AND THAT I WILL BE PROHIBITTED FROM OWNING ANY TYPE OF PET IN THE FUTURE  
WHILE A RESIDENT OF OPHA.*

\_\_\_\_\_  
*RESIDENT/HEAD OF HOUSEHOLD/SIGNATURE*

*DATE*\_\_\_\_\_

\_\_\_\_\_  
*EXECUTIVE DIRECTOR/ SIGNATURE*

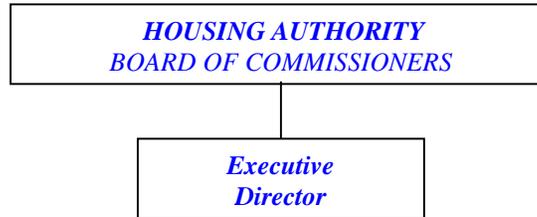
*DATE*\_\_\_\_\_

**ATTACHMENT “D”: EXECUTIVE SUMMARY**

*Tenants have expressed interest in the physical changes being made by OPHA since 9/2003. Tenants are involved in suggesting improvements and especially like the new appliances and on-site assistance. Work orders are being completed and tracked more efficiently due to HUD assistance & training. The units will be winterized with new updated energy efficient windows; the current windows will not function and are very inefficient allowing cold air in. The city’s gas rates are extremely high and this will help reduce tenant expense. The overall premises are cleaner and well maintained with equipment from the grants. The MASS report improved from a 50 to a 90; which to me was the greatest accomplishment of all. Two Capital fund grants have been closed out. The OPHA seems to be improving more and more each day and will continue to do so over the next year.*

**ATTACHMENT “ E ”**  
*Oilton Housing Authority*

**ORGANIZATIONAL CHART**



**HOUSING AUTHORITY**  
**Attachment “F” GRIEVANCE PROCEDURES**  
**OILTON PUBLIC HOUSING GRIEVANCE PROCEDURE**

**1. Definitions applicable to the grievance procedure (~966.53)**

- A. *Grievance: Any dispute a Tenant may have with respect to PHA action or failure to act in accordance with the individual Tenant’s lease or PHA regulation that adversely affects the individual Tenant’s rights, duties, welfare or status.*
- B. *Complaint: Any Tenant (as defined below) whose grievance is presented to the PHA (at the central office) in accordance with the requirements presented in this procedure.*
- C. *Elements of due process: An eviction or a termination of tenancy in a State or local court in which the following procedural safeguards are required:*
- (1) Adequate notice to the tenant of the grounds for terminating the tenancy and for eviction;*
  - (2) Right of the Tenant to be represented by counsel;*
  - (3) Opportunity for the Tenant to refute the evidence presented by the PHA, including the right to confront and cross examine witnesses and to present any affirmative legal or equitable defense which the Tenant may have;*
  - (4) A decision on the merits of the case.*
- D. *Hearing Officer: A person selected in accordance with 24 CFR ~966.550 and this procedure to hear grievances and render a decision with respect thereto.*
- E. *Hearing Panel: A three member panel selected in accordance with 24 CFR ~966.55 and this procedure to hear grievances and render a decision with respect thereto.*

F. *Tenant: The adult person (or person other than a Live-in aide): (1) Who resides in the unit, and who executed the lease with the PHA as lessee of the dwelling unit, or, if no such person resides in the unit, (2) Who resides in the unit, and who is the remaining head of the household of the Tenant family residing in the dwelling unit.*

G. *Resident Organization: An organization of residents, which also may include a resident management corporation*

## **II. *Applicability of this grievance procedure (966.51)***

*In accordance with the applicable Federal regulations (24 CFR ~966.50) this grievance procedure shall be applicable to all individual grievances (as defined in Section I above) between Tenant and the PHA with the following two exceptions:*

A. *Because HUD has issued a due process determination that the law of the State that requires that a Tenant be given the opportunity for a hearing in court which provides the basic elements of due process (as defined above) before eviction from the dwelling unit, the grievance procedure shall not be applicable to any termination of tenancy or eviction that involves:*

- (1) *Any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises of other residents or employees of the PHA, or*
- (2) *Any violent or drug-related criminal activity on or off such premises; or*
- (3) *Any criminal activity that resulted in felony conviction of a household member.*  
**[966.51 (2)(i) (A) (B) and (C)]**

B. *The PHA grievance procedure shall not be applicable to disputes between Tenants not involving the PHA or to class grievances. The grievance procedure is not intended as a forum for initiating or negotiating policy changes between a group or groups of tenants and the PHA'S Board of Commissioners.* **[966.51 (b)]**

*This grievance procedure is incorporated by reference in all Tenant dwelling leases and will be furnished to each Tenant and all resident organizations.* **[966.52 (b) and (d)]**

*Any changes proposed in this grievance procedure must provide for at least 30 days notice to Tenants and Resident Organizations, setting forth the proposed changes and providing an opportunity to present written comments. Comments submitted shall be considered by the PHA before any revisions are made to the grievance procedure.* **[966.52 (c)]**

### **III. Informal settlement of a grievance [966.54]**

*Any grievance must be personally presented, either orally or in writing, to the PHA'S central office or the management office of the development in which the complainant resides **within ten days after the grievable event.***

*Grievances related to complaints about operational matters that are received by the PHA'S central office will be referred to the person responsible for the management of the development in which the complainant resides. Grievances involving complaints related to discrimination, harassment, or disability rights will be referred to the Civil Rights Administrator or Director of Operations.*

*As soon as the grievance is received, it will be reviewed by the management office of the development or the Civil Rights Administrator (if applicable) to be certain that neither of the exclusions in paragraphs II.A or II.B above applies to the grievance. Should one of the exclusions apply, the complainant will be notified in writing that the matter raised is not subject to the PHA'S grievance procedure, with the reason therefor.*

*If neither of the exclusions cited above apply, the complainant will be contacted to arrange a mutually convenient time **within ten working days** to meet so the grievance may be discussed informally and settled without a hearing. At the informal hearing the complainant will present the grievance and the person in charge of the management office or the Civil Rights Administrator will attempt to settle the grievance to the satisfaction of both parties.*

***Within five working days** following the informal discussion, the PIHA shall prepare and either hand deliver or mail to Tenant a summary of the discussion that must specify the names of the participants, the dates of meeting, the nature of the proposed disposition of the complaint and the specific reasons therefor, and shall specify the procedures by which a formal hearing under this procedure may be obtained if the complainant is not satisfied. A copy of this summary shall also be placed in Tenant's file. A receipt signed by the complainant or a return receipt for delivery of certified mail, whether or not signed, will be sufficient proof of time of delivery for the summary of the informal discussion. [966.55 (a)]*

#### **IV. Formal Grievance Hearing**

*If the complainant is dissatisfied with the settlement arrived at in the informal hearing, the complainant must submit a written request for a hearing to the management office of the development where Tenant resides **no later than five working days after the summary of the informal hearing is received.***

*The written request shall specify:*

*The reasons for the grievance;*

*The action of relief sought from the PHA; and*

*Several dates and times **in the following ten working days** when the complainant can attend a grievance hearing.*

*If the complainant requests a hearing in a timely manner the PHA shall schedule a hearing on the grievance at the earliest time possible for the complainant, PHA and the hearing officer or hearing panel, **but in no case later than ten working days** after the PHA received the complainant's request.*

*If the complainant fails to request a hearing within five working days after receiving the summary of the informal hearing, the PHA's decision rendered at the informal hearing becomes final and the PHA is not obligated to offer the complainant a formal hearing unless the complainant can show good cause why he failed to proceed in accordance with this Procedure **[966.55 (c) and (d)]***

*Failure to request a grievance hearing does not affect the complainant's right to contest the PHA'S decision in a court hearing. **[966.54 (c)]***

#### **V. Selecting the Hearing Officer or Hearing Panel [966.55 (b) (2)(ii)]**

*A grievance hearing shall be conducted by an impartial person or persons appointed by the PHA after consultation with resident organizations, as described below:*

- A. *The PHA shall nominate a slate of impartial Persons to sit as hearing officers or hearing panel members such persons may include PHA Board members, PHA staff members,*

*residents, professional arbitrators' or others. The initial slate of nominees should be at least nine persons.*

*The PHA will check with each nominee to determine whether there is an interest in serving as a hearing officer or panel member, whether the nominee feels fully capable of impartiality, whether the nominee can serve without compensation, and what limitations on the nominee's time would affect such service.*

*Nominees will be informed that they will be expected to disqualify themselves from hearing grievances that involve personal friends, other residents of developments in which they work or reside, or grievances in which they have some personal interest.*

*Nominees who are not interested in serving as hearing officers or whose time is too limited to make service practical will be withdrawn and other names will be substituted.*

- B. A slate of potential hearing officers or hearing panel members nominated by the PHA shall be submitted to the PHA'S Resident Organizations. Written comments from the organizations shall be considered by the PHA before the nominees are appointed as hearing officers or panel members.*
- C. When the comments from Resident Organization have been received and considered, the nominees will be informed that they are the PHA'S official grievance hearing committee. The PHA will subsequently contact committee members in random order to request their participation as hearing panel members or hearing officers.*

#### **VI. Escrow deposit required for a hearing involving rent [966.55 (e)]**

*Before a hearing is scheduled in any grievance involving the amount of rent which the PHA claims is due under this lease, the complainant shall pay to the PHA an amount equal to the rent due and payable as of the first of the month preceding the month in which the act or failure to act took place. The complainant shall, thereafter, deposit the same amount of the monthly rent in an escrow account monthly until the complaint is resolved by decision of the hearing officer or hearing panel.*

*This requirement will not be waived by the PHA unless the complainant is paying minimum rent and the grievance is based on a request for a hardship exemption or the tenant's welfare benefits have been reduced for welfare fraud or failure to comply with economic self sufficiency requirements. **In these***

*cases only, rent need not be escrowed.*

### **VII. Scheduling hearings [966.55 (f)]**

*When a complainant submits a timely request for a grievance hearing, the PHA will immediately contact three members of the hearing committee to schedule the hearing within the following ten working days on one of the dates and times indicated by the complainant. If three committee members can agree on a date and time for the hearing, the complainant will be so notified.*

*If two of the panel members can meet on a date convenient for the complainant, the PHA will approach another member of the hearing committee to find a third member to complete the panel.*

*If only one member of the hearing committee can meet on a date named by the complainant, that single committee member shall serve as the hearing officer.*

*Once the hearing panel or hearing officer have agreed upon the hearing date and time, the complainant, the manager of the development in which the complainant resides, and hearing panel members or officer shall be notified in writing. Notice to the complainant shall be in writing, either personally delivered to complainant or sent by mail, return receipt requested.*

*The written notice will specify the time, place and procedures governing the hearing.*

### **VIII. Procedures governing the hearing [966.56]**

*The hearing shall be held before a hearing panel or hearing officer as described above in Section VII. The complainant shall be afforded a fair hearing, which shall include:*

- A. *The opportunity to examine before the hearing any PHA documents, including records and regulations, that are directly relevant to the hearing.*

*The Tenant shall be allowed to copy any such document at the Tenant's expense. If the PHA does not make the document available for examination upon request by the complainant, the PHA may not rely on such document at the grievance hearing.*

- B. *The right to be represented by counsel or other person chosen as the Tenant's representative and to have such person make statements on the Tenant's behalf.*

- C. *The right to a private hearing unless the complainant requests a public hearing. The right to present evidence and arguments in support of the Tenant's complaint to controvert evidence relied on by the PHA or project management, and to confront and cross examine all witnesses upon whose testimony or information the PHA or project management relies; and*
- D. *A decision based solely and exclusively upon the fact presented at the hearing. [966.56 (b)]*

*The hearing panel or officer may render a decision without proceeding with the hearing if they determine that the issue has been previously decided in another Proceeding. [966.56 (c)]*

*At the hearing, the complainant must first make a showing of an entitlement to the relief sought and, thereafter, the PHA must sustain the burden of justifying the PIIA action or failure to act against which the complaint is directed. [966.56 (e)]*

*The hearing shall be conducted informally by the hearing panel or officer. Oral or documentary evidence pertinent to the facts and issues raised by the complaint may be received without regard to admissibility under the rules of evidence applicable to judicial proceedings. [966.56 (f)]*

*The hearing panel or officer shall require the PHA, the complainant, counsel and other participants or spectators to conduct themselves in an orderly fashion. Failure to comply with the directions of the hearing panel or officer to obtain order may result in exclusion from the proceedings or in a decision adverse to the interests of the disorderly party and granting or denial of the relief sought, as appropriate. [966.s6 (f)]*

*The complainant or the PHA may arrange in advance, at expense of the party making the arrangement, for a transcript of the hearing. Any interested party may purchase a copy of such transcript. [966.56 (g)]*

*The PHA must provide reasonable accommodation for persons with disabilities to participate in the hearing. Reasonable accommodation may include qualified sign language interpreters, readers, accessible locations, or attendants. If the Tenant is visually impaired, any notice to the Tenant which is required under this procedure must be in an accessible format. [966.56 (h)]*

*If a hearing panel member or officer fails to disqualify himself/herself as required in Section V.A., the PHA will remove the panel member or officer from the hearing committee, invalidate the results of the*

hearing and schedule a new hearing with a new hearing panel or officer.

**IX. Failure to appear at the hearing**

If the complainant or the PHA fails to appear at the scheduled hearing, the hearing panel or officer may make a determination to postpone the hearing **for not to exceed five business days**, or may make a determination that the party has waived his right to a hearing [966.56 (d)]

Both the complainant and the PHA shall be notified of the determination by the hearing panel or officer; provided, that a determination that the complainant has waived his right to a hearing shall not constitute a waiver of any right the complainant may have to contest the PHA'S disposition of the grievance in court [966.56 (d)]

**X. Decision of the hearing panel or officer [966.57]**

The hearing panel or officer shall prepare a written decision, together with the reasons for the decision **within ten working days** after the hearing. A copy of the decision shall be sent to the complainant and the PHA.

The PHA shall retain a copy of the decision in the Tenant's folder. A copy of the decision with all names and identifying references deleted, shall also be maintained on file by the PHA and made available for inspection by a prospective complainant, his representative, or the hearing panel or officer.

The decision of the hearing panel or officer shall be binding on the PHA, which shall take all actions, or refrain from any actions, necessary to carry out the decision unless the PHA'S Board of Commissioners determines within ten working days, and promptly notifies the complainant of its determination that:

- A. The grievance does not concern PHA action or failure to act in accordance with or involving the complainant's lease or PHA regulations, which adversely affect the complainant's rights, duties, welfare or status.
- B. The decision of the hearing panel or officer is contrary to applicable Federal, State or local law, HUD regulations, or requirements of the annual contributions contract between HUD and the PHA.
- C. A decision by the hearing panel or officer or Board of Commissioners in favor of the

*PHA or which denies the relief requested by the complainant in whole or in part shall not constitute a waiver of, nor affect in any way, the rights of the complainant to a trial or judicial review in any court proceedings which may be brought in the matter later. [966.57]*

## **Required Attachment G: 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: *Jim Ross*

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

Elected

Appointed

C. The term of appointment is (include the date term expires): *08/01/2003 – 08/01/2006*

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: *8/01/2006*

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): *Mayor, Clyde Humble*

**Required Attachment *H*: 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.)

*Deborah Green   Betty Smith   Jim Ross   Darrell Smith ( Non Resident)*

**ATTACHMENT "I"**

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

|   |   |                                     |
|---|---|-------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022501-00</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2000</i> |
|---|---|-------------------------------------|

Original Annual Statement  
  Reserve for Disasters/ Emergencies  
  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: *12/31/04*  
  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                | Total Estimated Cost |                    | Total Actual Cost  |                    |
|----------|---|----------------------|--------------------|--------------------|--------------------|
|          |   | Original             | Revised            | Obligated          | Expended           |
| 1        | Total non-CFP Funds                           |                      |                    |                    |                    |
| 2        | 1406 Operations                               |                      |                    |                    |                    |
| 3        | 1408 Management Improvements                  |                      |                    |                    |                    |
| 4        | 1410 Administration                           | <i>\$1,000.00</i>    | <i>-0-</i>         | <i>-0-</i>         | <i>-0-</i>         |
| 5        | 1411 Audit                                    |                      |                    |                    |                    |
| 6        | 1415 Liquidated Damages                       |                      |                    |                    |                    |
| 7        | 1430 Fees and Costs                           | <i>\$3,500.00</i>    | <i>\$12,824.91</i> | <i>\$12,824.91</i> | <i>\$12,824.91</i> |
| 8        | 1440 Site Acquisition                         |                      |                    |                    |                    |
| 9        | 1450 Site Improvement                         |                      |                    |                    |                    |
| 10       | 1460 Dwelling Structures                      |                      |                    |                    |                    |
| 11       | 1465.1 Dwelling Equipment—Nonexpendable       |                      |                    |                    |                    |
| 12       | 1470 Nondwelling Structures                   | <i>\$33,177.00</i>   | <i>\$24,852.09</i> | <i>\$24,852.09</i> | <i>\$24,852.09</i> |
| 13       | 1475 Nondwelling Equipment                    |                      |                    |                    |                    |
| 14       | 1485 Demolition                               |                      |                    |                    |                    |
| 15       | 1490 Replacement Reserve                      |                      |                    |                    |                    |
| 16       | 1492 Moving to Work Demonstration             |                      |                    |                    |                    |
| 17       | 1495.1 Relocation Costs                       |                      |                    |                    |                    |
| 18       | 1499 Development Activities                   |                      |                    |                    |                    |
| 19       | 1501 Collateralization or Debt Service        |                      |                    |                    |                    |
| 20       | 1502 Contingency                              |                      |                    |                    |                    |
| 21       | Amount of Annual Grant: (sum of lines 2 – 20) | <i>\$37,677.00</i>   | <i>\$37,677.00</i> | <i>\$37,677.00</i> | <i>\$37,677.00</i> |
| 22       | Amount of line 21 Related to LBP Activities   |                      |                    |                    |                    |

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

|   |   |                                     |
|---|---|-------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022501-00</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2000</i> |
|---|---|-------------------------------------|

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: *12/31/04*  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                            | Total Estimated Cost |         | Total Actual Cost |          |
|----------|---|----------------------|---------|-------------------|----------|
|          |   | Original             | Revised | Obligated         | Expended |
| 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 |                      |         |                   |          |





PHA Name: *Oilton Housing Authority*

**Grant Type and Number**

Capital Fund Program Grant No: *OK56P022501-01*

Replacement Housing Factor Grant No:

**Federal FY of Grant:**

*2001*

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: *12/31/04*  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                            | Total Estimated Cost |                    | Total Actual Cost  |                    |
|----------|---|----------------------|--------------------|--------------------|--------------------|
|          |   | Original             | Revised            | Obligated          | Expended           |
| 1        | Total non-CFP Funds                                       |                      |                    |                    |                    |
| 2        | 1406 Operations   |                      |                    |                    |                    |
| 3        | 1408 Management Improvements                              |                      |                    |                    |                    |
| 4        | 1410 Administration                                       | <i>\$1,000.00</i>    | <i>\$500.00</i>    | <i>\$500.00</i>    | <i>\$500.00</i>    |
| 5        | 1411 Audit  |                      |                    |                    |                    |
| 6        | 1415 Liquidated Damages                                   |                      |                    |                    |                    |
| 7        | 1430 Fees and Costs                                       | <i>\$3,500.00</i>    | <i>\$94.85</i>     | <i>\$94.85</i>     | <i>\$94.85</i>     |
| 8        | 1440 Site Acquisition                                     |                      |                    |                    |                    |
| 9        | 1450 Site Improvement                                     |                      | <i>\$8,117.10</i>  | <i>\$8,117.10</i>  | <i>\$8,117.10</i>  |
| 10       | 1460 Dwelling Structures                                  |                      | <i>\$3,964.95</i>  | <i>\$3,964.95</i>  | <i>\$3,964.95</i>  |
| 11       | 1465.1 Dwelling Equipment—Nonexpendable                   |                      | <i>\$5,460.00</i>  | <i>\$5,460.00</i>  | <i>\$5,460.00</i>  |
| 12       | 1470 Nondwelling Structures                               | <i>\$33,925.00</i>   | <i>\$18,900.00</i> | <i>\$18,900.00</i> | <i>\$18,900.00</i> |
| 13       | 1475 Nondwelling Equipment                                |                      | <i>\$1,388.10</i>  | <i>\$1,388.10</i>  | <i>\$1,388.10</i>  |
| 14       | 1485 Demolition   |                      |                    |                    |                    |
| 15       | 1490 Replacement Reserve                                  |                      |                    |                    |                    |
| 16       | 1492 Moving to Work Demonstration                         |                      |                    |                    |                    |
| 17       | 1495.1 Relocation Costs                                   |                      |                    |                    |                    |
| 18       | 1499 Development Activities                               |                      |                    |                    |                    |
| 19       | 1501 Collateralization or Debt Service                    |                      |                    |                    |                    |
| 20       | 1502 Contingency  |                      |                    |                    |                    |
| 21       | Amount of Annual Grant: (sum of lines 2 – 20)             | <i>\$38,425.00</i>   | <i>\$38,425.00</i> | <i>\$38,425.00</i> | <i>\$38,425.00</i> |
| 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 |                      |                    |                    |                    |

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

| PHA Name: <i>Oilton Housing Authority</i>     |   | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022501-01</i><br>Replacement Housing Factor Grant No: |               |                      |                    | Federal FY of Grant: <i>2001</i> |                    |                 |
|---|---|---|---------------|----------------------|--------------------|----------------------------------|--------------------|-----------------|
| Development Number<br>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     |                 |
| <i>PHA Wide</i>                               | <i>Bidding and Advertising</i>  | <i>1410</i>   |               | <i>\$1,000.00</i>    | <i>-0-</i>         | <i>-0-</i>                       | <i>-0-</i>         |                 |
| <i>PHA Wide</i>                               | <i>Jerry Green</i>  | <i>1410</i>   |               | <i>\$500.00</i>      | <i>\$500.00</i>    | <i>\$500.00</i>                  | <i>\$500.00</i>    | <i>Complete</i> |
| <i>PHA Wide</i>                               | <i>John Graham -Fees and Costs</i>  | <i>1430</i>   |               | <i>\$3,500.00</i>    | <i>\$94.85</i>     | <i>\$94.85</i>                   | <i>\$94.85</i>     | <i>Complete</i> |
| <i>PHA Wide</i>                               | <i>Redo parking areas</i>   | <i>1450</i>   |               | <i>-0-</i>           | <i>\$5,117.10</i>  | <i>\$5,117.10</i>                | <i>\$5,117.10</i>  | <i>Complete</i> |
| <i>PHA Wide</i>                               | <i>Tree trimming/ removal</i>   | <i>1450</i>   |               | <i>-0-</i>           | <i>\$3,000.00</i>  | <i>\$3,000.00</i>                | <i>\$3,000.00</i>  | <i>Complete</i> |
| <i>OK022-001</i>                              | <i>Plumbing service</i>   | <i>1460</i>   |               | <i>-0-</i>           | <i>\$100.00</i>    | <i>\$100.00</i>                  | <i>\$100.00</i>    | <i>Complete</i> |
| <i>PHA Wide</i>                               | <i>One year storage rental for storing supplies.</i>  | <i>1460</i>   |               | <i>-0-</i>           | <i>\$572.00</i>    | <i>\$572.00</i>                  | <i>\$572.00</i>    | <i>Complete</i> |
| <i>OK022-001</i>                              | <i>Purchased 10 – 40 Gal. water heaters</i>   | <i>1460</i>   | <i>10</i>     | <i>-0-</i>           | <i>\$2,290.00</i>  | <i>\$2,290.00</i>                | <i>\$2,290.00</i>  | <i>Complete</i> |
| <i>OK022-001</i>                              | <i>Maint. Materials for units; including, paint, floor cleaner, wax etc.</i>                  | <i>1460</i>   |               | <i>-0-</i>           | <i>\$1,002.95</i>  | <i>\$1,002.95</i>                | <i>\$1,002.95</i>  | <i>Complete</i> |
| <i>OK022-001</i>                              | <i>Purchase of new refrigerators &amp; ranges</i>   | <i>1465</i>   | <i>10 ea.</i> | <i>-0-</i>           | <i>\$5,460.00</i>  | <i>\$5,460.00</i>                | <i>\$5,460.00</i>  | <i>Complete</i> |
| <i>PHA Wide</i>                               | <i>Purchase fax machine</i>   | <i>1475</i>   | <i>1</i>      | <i>-0-</i>           | <i>\$230.00</i>    | <i>\$230.00</i>                  | <i>\$230.00</i>    | <i>Complete</i> |
| <i>PHA Wide</i>                               | <i>Purchase copy machine</i>  | <i>1475</i>   | <i>1</i>      | <i>-0-</i>           | <i>\$1,158.10</i>  | <i>\$1,158.10</i>                | <i>\$1,158.10</i>  | <i>Complete</i> |
| <i>PHA Wide</i>                               | <i>Provide individual above ground safe rooms for 7 units \$2,700.00 ea., 13 still remain</i> | <i>1470</i>   | <i>7</i>      | <i>\$33,925.00</i>   | <i>\$18,900.00</i> | <i>\$18,900.00</i>               | <i>\$18,900.00</i> | <i>Complete</i> |
|   |   |   |               |                      |                    |                                  |                    |                 |
|   |   |   |               |                      |                    |                                  |                    |                 |
|   |   |   |               |                      |                    |                                  |                    |                 |



# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

|   |   |                                     |
|---|---|-------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022501-02</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2002</i> |
|---|---|-------------------------------------|

Original Annual Statement 
  Reserve for Disasters/ Emergencies 
  Revised Annual Statement (revision no: 2 )  
 Performance and Evaluation Report for Period Ending: *12/31/2004*
 Final Performance and Evaluation Report

| Line No. | Summary by Development Account                            | Total Estimated Cost |                    | Total Actual Cost  |                    |
|----------|---|----------------------|--------------------|--------------------|--------------------|
|          |   | Original             | Revised            | Obligated          | Expended           |
| 1        | Total non-CFP Funds                                       |                      |                    |                    |                    |
| 2        | 1406 Operations   |                      |                    |                    |                    |
| 3        | 1408 Management Improvements Soft Costs                   | <i>\$1,000.00</i>    | <i>\$1,000.00</i>  | <i>\$1,000.00</i>  |                    |
|          | Management Improvements Hard Costs                        |                      |                    |                    |                    |
| 4        | 1410 Administration                                       |                      | <i>\$460.08</i>    | <i>\$460.08</i>    |                    |
| 5        | 1411 Audit  |                      |                    |                    |                    |
| 6        | 1415 Liquidated Damages                                   |                      |                    |                    |                    |
| 7        | 1430 Fees and Costs                                       | <i>\$2,500.00</i>    | <i>\$2,500.00</i>  | <i>\$2,500.00</i>  |                    |
| 8        | 1440 Site Acquisition                                     |                      |                    |                    |                    |
| 9        | 1450 Site Improvement                                     | <i>\$30,812.00</i>   | <i>\$5,772.12</i>  | <i>\$5,772.12</i>  | <i>\$280.00</i>    |
| 10       | 1460 Dwelling Structures                                  |                      | <i>\$2,499.46</i>  | <i>\$2,499.46</i>  | <i>\$1,749.56</i>  |
| 11       | 1465.1 Dwelling Equipment—Nonexpendable                   |                      |                    |                    |                    |
| 12       | 1470 Nondwelling Structures                               |                      | <i>\$16,200.00</i> | <i>\$16,200.00</i> | <i>\$16,200.00</i> |
| 13       | 1475 Nondwelling Equipment                                |                      | <i>\$5880.34</i>   | <i>\$5880.34</i>   | <i>\$5880.34</i>   |
| 14       | 1485 Demolition   |                      |                    |                    |                    |
| 15       | 1490 Replacement Reserve                                  |                      |                    |                    |                    |
| 16       | 1492 Moving to Work Demonstration                         |                      |                    |                    |                    |
| 17       | 1495.1 Relocation Costs                                   |                      |                    |                    |                    |
| 18       | 1499 Development Activities                               |                      |                    |                    |                    |
| 19       | 1502 Contingency  |                      |                    |                    |                    |
| 20       | Amount of Annual Grant: (sum of lines.....)               | <i>\$34,312.00</i>   | <i>\$34,312.00</i> | <i>\$34,312.00</i> | <i>\$24,109.90</i> |
| 21       | Amount of line XX Related to LBP Activities               |                      |                    |                    |                    |
| 22       | Amount of line XX Related to Section 504 compliance       |                      |                    |                    |                    |
| 23       | Amount of line XX Related to Security –Soft Costs         |                      |                    |                    |                    |
| 24       | Amount of Line XX related to Security-- Hard Costs        |                      |                    |                    |                    |
| 25       | Amount of line XX Related to Energy Conservation Measures |                      |                    |                    |                    |
| 26       | Collateralization Expenses or Debt Service                |                      |                    |                    |                    |

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

| PHA Name: <i>Oilton Housing Authority</i>        |   | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022501-02</i><br>Replacement Housing Factor Grant No: |                     |               |                      | Federal FY of Grant: <i>2002</i> |                    |                    |                    |
|--|---|---|---------------------|---------------|----------------------|----------------------------------|--------------------|--------------------|--------------------|
| Development Number<br>Name/HA-Wide<br>Activities | General Description of Major Work<br>Categories |   | Dev.<br>Acct<br>No. | Quantity      | Total Estimated Cost |                                  | Total Actual Cost  |                    | Status of<br>Work  |
|  |   |   |                     |               | Original             | Revised                          | Obligated          | Expended           |                    |
| <i>PHA Wide</i>                                  | <i>Management Improvements</i>                  | <i>1408</i>   |                     |               | <i>\$1,000.00</i>    | <i>\$1,000.00</i>                | <i>\$1,000.00</i>  |                    | <i>In Progress</i> |
| <i>PHA Wide</i>                                  | <i>Jerry Green</i>                              | <i>1410</i>   |                     |               | <i>-0-</i>           | <i>\$450.00</i>                  | <i>\$450.00</i>    |                    | <i>In Progress</i> |
| <i>PHA Wide</i>                                  | <i>Advertisement</i>                            | <i>1410</i>   |                     |               | <i>-0-</i>           | <i>\$10.08</i>                   | <i>\$10.08</i>     |                    | <i>In Progress</i> |
| <i>PHA Wide</i>                                  | <i>Fees and Costs</i>                           | <i>1430</i>   |                     |               | <i>\$2,500.00</i>    | <i>\$2,500.00</i>                | <i>\$2,500.00</i>  |                    | <i>In Progress</i> |
| <i>PHA Wide</i>                                  | <i>Provide 2 new parking lots</i>               | <i>1450</i>   |                     |               | <i>\$30,532.00</i>   | <i>\$5,492.12</i>                | <i>\$5,492.12</i>  |                    | <i>In Progress</i> |
| <i>Ok022-001</i>                                 | <i>Landscaping</i>                              | <i>1450</i>   |                     |               | <i>\$280.00</i>      | <i>\$280.00</i>                  | <i>\$280.00</i>    | <i>\$280.00</i>    | <i>Complete</i>    |
| <i>Ok022-001</i>                                 | <i>Supplies for repair of units</i>             | <i>1460</i>   |                     |               | <i>-0-</i>           | <i>\$254.87</i>                  | <i>\$254.87</i>    |                    | <i>In Progress</i> |
| <i>Ok022-001</i>                                 | <i>Plumbing</i>                                 | <i>1460</i>   |                     |               | <i>-0-</i>           | <i>\$250.00</i>                  | <i>\$250.00</i>    | <i>\$250.00</i>    | <i>Complete</i>    |
| <i>Ok022-001</i>                                 | <i>Sheetrock replacement</i>                    | <i>1460</i>   |                     |               | <i>-0-</i>           | <i>\$653.08</i>                  | <i>\$653.08</i>    | <i>\$613.05</i>    | <i>In Progress</i> |
| <i>Ok022-001</i>                                 | <i>Electrical test meter</i>                    | <i>1460</i>   |                     | <i>1</i>      | <i>-0-</i>           | <i>\$126.49</i>                  | <i>\$126.49</i>    | <i>\$126.49</i>    | <i>Complete</i>    |
| <i>Ok022-001</i>                                 | <i>Washing machine box repair</i>               | <i>1460</i>   |                     | <i>1</i>      | <i>-0-</i>           | <i>\$250.00</i>                  | <i>\$250.00</i>    | <i>\$250.00</i>    | <i>Complete</i>    |
| <i>Ok022-001</i>                                 | <i>2 sets window units</i>                      | <i>1460</i>   |                     | <i>2 sets</i> | <i>-0-</i>           | <i>\$510.02</i>                  | <i>\$510.02</i>    | <i>\$510.02</i>    | <i>Complete</i>    |
| <i>Ok022-001</i>                                 | <i>2 window units</i>                           | <i>1460</i>   |                     | <i>2</i>      | <i>-0-</i>           | <i>\$260.00</i>                  | <i>\$260.00</i>    |                    | <i>In Progress</i> |
| <i>Ok022-001</i>                                 | <i>Replace worn out shower</i>                  | <i>1460</i>   |                     | <i>1</i>      | <i>-0-</i>           | <i>\$195.00</i>                  | <i>\$195.00</i>    |                    | <i>In Progress</i> |
| <i>Ok022-001</i>                                 | <i>Install 6 above ground storm shelters</i>    | <i>1470</i>   |                     | <i>6</i>      | <i>-0-</i>           | <i>\$16,200.00</i>               | <i>\$16,200.00</i> | <i>\$16,200.00</i> | <i>Complete</i>    |
| <i>PHA Wide</i>                                  | <i>Purchase a digital camera</i>                | <i>1475</i>   |                     | <i>1</i>      | <i>-0-</i>           | <i>\$234.88</i>                  | <i>\$234.88</i>    | <i>\$234.88</i>    | <i>Complete</i>    |
| <i>PHA Wide</i>                                  | <i>Purchase a commercial mower</i>              | <i>1475</i>   |                     | <i>1</i>      | <i>-0-</i>           | <i>\$5645.46</i>                 | <i>\$5645.46</i>   | <i>\$5645.46</i>   | <i>Complete</i>    |
|  |   |   |                     |               |                      |                                  |                    |                    |                    |
|  |   |   |                     |               |                      |                                  |                    |                    |                    |



## Annual Statement/Performance and Evaluation Report

### Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

|   |   |                                     |
|---|---|-------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022501-03</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2003</i> |
|---|---|-------------------------------------|

Original Annual Statement  
  Reserve for Disasters/ Emergencies  
  Revised Annual Statement (revision no: 1 )  
 Performance and Evaluation Report for Period Ending: *12/31/04*  
  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                      | Total Estimated Cost |                    | Total Actual Cost |            |
|----------|---|----------------------|--------------------|-------------------|------------|
|          |   | Original             | Revised            | Obligated         | Expended   |
| 1        | Total non-CFP Funds                                 |                      |                    |                   |            |
| 2        | 1406 Operations                                     |                      | <i>\$2,663.00</i>  |                   |            |
| 3        | 1408 Management Improvements                        |                      |                    |                   |            |
| 4        | 1410 Administration                                 | <i>\$1,000.00</i>    | <i>\$1,000.00</i>  | <i>-0-</i>        | <i>-0-</i> |
| 5        | 1411 Audit  |                      |                    |                   |            |
| 6        | 1415 Liquidated Damages                             |                      |                    |                   |            |
| 7        | 1430 Fees and Costs                                 | <i>\$3,000.00</i>    | <i>\$1,200.00</i>  | <i>-0-</i>        | <i>-0-</i> |
| 8        | 1440 Site Acquisition                               |                      |                    |                   |            |
| 9        | 1450 Site Improvement                               | <i>\$22,639.00</i>   | <i>\$2,876.00</i>  | <i>-0-</i>        | <i>-0-</i> |
| 10       | 1460 Dwelling Structures                            |                      |                    |                   |            |
| 11       | 1465.1 Dwelling Equipment—Nonexpendable             |                      |                    |                   |            |
| 12       | 1470 Nondwelling Structures                         |                      | <i>\$18,900.00</i> |                   |            |
| 13       | 1475 Nondwelling Equipment                          |                      |                    |                   |            |
| 14       | 1485 Demolition                                     |                      |                    |                   |            |
| 15       | 1490 Replacement Reserve                            |                      |                    |                   |            |
| 16       | 1492 Moving to Work Demonstration                   |                      |                    |                   |            |
| 17       | 1495.1 Relocation Costs                             |                      |                    |                   |            |
| 18       | 1499 Development Activities                         |                      |                    |                   |            |
| 19       | 1501 Collateralization or Debt Service              |                      |                    |                   |            |
| 20       | 1502 Contingency                                    |                      |                    |                   |            |
| 21       | Amount of Annual Grant: (sum of lines 2 – 20)       | <i>\$26,639.00</i>   | <i>\$26,639.00</i> | <i>-0-</i>        | <i>-0-</i> |
| 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  |                      |                    |                   |            |

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

|   |   |                                     |
|---|---|-------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022501-03</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2003</i> |
|---|---|-------------------------------------|

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: 1 )  
 Performance and Evaluation Report for Period Ending: *12/31/04*  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                            | Total Estimated Cost |         | Total Actual Cost |          |
|----------|---|----------------------|---------|-------------------|----------|
|          |   | Original             | Revised | Obligated         | Expended |
| 25       | Amount of Line 21 Related to Security – Hard Costs        |                      |         |                   |          |
| 26       | Amount of line 21 Related to Energy Conservation Measures |                      |         |                   |          |





## Annual Statement/Performance and Evaluation Report

### Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

|   |   |                                       |
|---|---|---------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022502-03</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2-2003</i> |
|---|---|---------------------------------------|

Original Annual Statement  
  Reserve for Disasters/ Emergencies  
  Revised Annual Statement (revision no:    )

Performance and Evaluation Report for Period Ending: *12/31/04*  
  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                      | Total Estimated Cost |         | Total Actual Cost |            |
|----------|---|----------------------|---------|-------------------|------------|
|          |   | Original             | Revised | Obligated         | Expended   |
| 1        | Total non-CFP Funds                                 |                      |         |                   |            |
| 2        | 1406 Operations                                     | <i>\$550.00</i>      |         |                   |            |
| 3        | 1408 Management Improvements                        |                      |         |                   |            |
| 4        | 1410 Administration                                 | <i>\$500.00</i>      |         |                   |            |
| 5        | 1411 Audit  |                      |         |                   |            |
| 6        | 1415 Liquidated Damages                             |                      |         |                   |            |
| 7        | 1430 Fees and Costs                                 |                      |         |                   |            |
| 8        | 1440 Site Acquisition                               |                      |         |                   |            |
| 9        | 1450 Site Improvement                               | <i>\$4,576.00</i>    |         |                   |            |
| 10       | 1460 Dwelling Structures                            |                      |         |                   |            |
| 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                             |                      |         |                   |            |
| 18       | 1499 Development Activities                         |                      |         |                   |            |
| 19       | 1501 Collateralization or Debt Service              |                      |         |                   |            |
| 20       | 1502 Contingency                                    |                      |         |                   |            |
| 21       | Amount of Annual Grant: (sum of lines 2 – 20)       | <i>\$5,626.00</i>    |         | <i>-0-</i>        | <i>-0-</i> |
| 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  |                      |         |                   |            |

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

|   |   |                                       |
|---|---|---------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>OK56P022502-03</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2-2003</i> |
|---|---|---------------------------------------|

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: *12/31/04*  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                            | Total Estimated Cost |         | Total Actual Cost |          |
|----------|---|----------------------|---------|-------------------|----------|
|          |   | Original             | Revised | Obligated         | Expended |
| 25       | Amount of Line 21 Related to Security – Hard Costs        |                      |         |                   |          |
| 26       | Amount of line 21 Related to Energy Conservation Measures |                      |         |                   |          |





## Annual Statement/Performance and Evaluation Report

### Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

|   |   |                                     |
|---|---|-------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>Ok56P022501-04</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2004</i> |
|---|---|-------------------------------------|

Original Annual Statement  
  Reserve for Disasters/ Emergencies  
  Revised Annual Statement (revision no: *1* )  
 Performance and Evaluation Report for Period Ending: *12/31/04*  
  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                      | Total Estimated Cost |                    | Total Actual Cost |            |
|----------|---|----------------------|--------------------|-------------------|------------|
|          |   | Original             | Revised            | Obligated         | Expended   |
| 1        | Total non-CFP Funds                                 |                      |                    |                   |            |
| 2        | 1406 Operations                                     |                      |                    |                   |            |
| 3        | 1408 Management Improvements                        |                      |                    |                   |            |
| 4        | 1410 Administration                                 | <i>\$1,000.00</i>    | <i>\$800.00</i>    | <i>-0-</i>        | <i>-0-</i> |
| 5        | 1411 Audit  |                      |                    |                   |            |
| 6        | 1415 Liquidated Damages                             |                      |                    |                   |            |
| 7        | 1430 Fees and Costs                                 | <i>\$2,500.00</i>    | <i>-0-</i>         | <i>-0-</i>        | <i>-0-</i> |
| 8        | 1440 Site Acquisition                               |                      |                    |                   |            |
| 9        | 1450 Site Improvement                               |                      |                    |                   |            |
| 10       | 1460 Dwelling Structures                            | <i>\$22,672.00</i>   | <i>\$25,372.00</i> | <i>-0-</i>        | <i>-0-</i> |
| 11       | 1465.1 Dwelling Equipment—Nonexpendable             | <i>\$5,000.00</i>    | <i>\$5,000.00</i>  | <i>-0-</i>        | <i>-0-</i> |
| 12       | 1470 Nondwelling Structures                         |                      |                    |                   |            |
| 13       | 1475 Nondwelling Equipment                          |                      |                    |                   |            |
| 14       | 1485 Demolition                                     |                      |                    |                   |            |
| 15       | 1490 Replacement Reserve                            |                      |                    |                   |            |
| 16       | 1492 Moving to Work Demonstration                   |                      |                    |                   |            |
| 17       | 1495.1 Relocation Costs                             |                      |                    |                   |            |
| 18       | 1499 Development Activities                         |                      |                    |                   |            |
| 19       | 1501 Collateralization or Debt Service              |                      |                    |                   |            |
| 20       | 1502 Contingency                                    |                      |                    |                   |            |
| 21       | Amount of Annual Grant: (sum of lines 2 – 20)       | <i>\$31,172.00</i>   | <i>\$31,172.00</i> | <i>-0-</i>        | <i>-0-</i> |
| 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  |                      |                    |                   |            |

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

|   |   |                                     |
|---|---|-------------------------------------|
| PHA Name: <i>Oilton Housing Authority</i> | Grant Type and Number<br>Capital Fund Program Grant No: <i>Ok56P022501-04</i><br>Replacement Housing Factor Grant No: | Federal FY of Grant:<br><i>2004</i> |
|---|---|-------------------------------------|

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: *1* )  
 Performance and Evaluation Report for Period Ending: *12/31/04*  Final Performance and Evaluation Report

| Line No. | Summary by Development Account                            | Total Estimated Cost |                    | Total Actual Cost |          |
|----------|---|----------------------|--------------------|-------------------|----------|
|          |   | Original             | Revised            | Obligated         | Expended |
| 25       | Amount of Line 21 Related to Security – Hard Costs        |                      |                    |                   |          |
| 26       | Amount of line 21 Related to Energy Conservation Measures | <i>\$22,672.00</i>   | <i>\$11,872.00</i> |                   |          |





