PHA Plans

Streamlined Annual Version

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

OMB No. 2577-0226
(exp. 08/31/2009)

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

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

Streamlined Annual PHA Plan for Fiscal Year: 2007

PHA Name: St. Joseph Housing Commission

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

Streamlined Annual PHA Plan
Agency Identification

PHA Name: St. Joseph Housing Commission **PHA Number:** MI046

PHA Fiscal Year Beginning: (mm/yyyy) 04/2007

PHA Programs Administered:

☐ **Public Housing and Section 8**
Number of public housing units:
Number of S8 units:

☐ **Section 8 Only**
Number of S8 units:

☒ **Public Housing Only**
Number of public housing units: 107

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

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

PHA Plan Contact Information:

Name: Nancy E. Walker
Phone: (269) 983-2814
TDD:
Email (if available): sjhsgcom@sbcglobal.net

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. ☒ Yes ☐ No.
If yes, select all that apply:
☒ Main administrative office of the PHA
☐ PHA development management offices
☒ Main administrative office of the local, county or State government
☒ Public library ☐ PHA website ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)
☒ Main business office of the PHA ☐ PHA development management offices
☐ Other (list below)

Streamlined Annual PHA Plan
Fiscal Year 2007
[24 CFR Part 903.12(c)]

Table of Contents
[24 CFR 903.7(r)]

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

A. PHA PLAN COMPONENTS

☐ 1. Site-Based Waiting List Policies
903.7(b)(2) Policies on Eligibility, Selection, and Admissions
☒ 2. Capital Improvement Needs
903.7(g) Statement of Capital Improvements Needed
☐ 3. Section 8(y) Homeownership
903.7(k)(1)(i) Statement of Homeownership Programs
☐ 4. Project-Based Voucher Programs
☐ 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
☒ 6. Supporting Documents Available for Review
☒ 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
☒ 8. Capital Fund Program 5-Year Action Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

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

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

[24 CFR Part 903.12(c), 903.7(b)(2)]
Exemptions: Section 8 only PHAs are not required to complete this component.

NOT APPLICABLE

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

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

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

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

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

B. Site-Based Waiting Lists – Coming Year

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

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

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

If yes, how many lists?

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

2. Capital Improvement Needs

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

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

A. Capital Fund Program

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

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

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

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

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

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

HOPE VI Revitalization Grant Status

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

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

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

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

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

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

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

2. Program Description:

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

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

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

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

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

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

☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.

☐ Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.

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

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

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

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

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

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

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

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

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

1. Consolidated Plan jurisdiction: State of Michigan

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

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

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

The Annual Plan of the St. Joseph Housing Commission is consistent with the State of Michigan's Housing and Community Development Consolidated Plan by implementing strategies to improve and preserve the existing affordable housing stock and by continuing to establish a suitable living environment and expand economic opportunities for low and moderate income people through economic and infrastructure development and improvements. It is the desire of the St. Joseph Housing Commission to continue as a high performer in maintaining our current facility. Due to land constrictions, it is difficult to aim for expansion of assisted housing within our community.

It is also the desire of the Housing Commission to continue implement measures to promote income mixing and equal opportunity for all Americans, in access to assisted housing, regardless of race, color, religion, national origin, sex, familial status and disability.

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

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

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
X	*PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans*;	5 Year and Annual Plans
X	*PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan*	Streamlined Annual Plans
N/A	*Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.*	5 Year and standard Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. ☐ Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents. ☒ 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. ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. ☐ Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

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

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

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

PHA Name: St. Joseph Housing Commission	Grant Type and Number Capital Fund Program Grant No: MI33P04650107 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007

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

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	10,807			
3	1408 Management Improvements	3,000			
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	4,200			
8	1440 Site Acquisition				
9	1450 Site Improvement	2,738			
10	1460 Dwelling Structures	84,030			
11	1465.1 Dwelling Equipment—Nonexpendable	2,500			
12	1470 Nondwelling Structures	800			
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 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	108,075			
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				

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

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

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

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

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

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

PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650107 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MI046-HA Wide	Operations	1406		10,807				
	Management Impr.-Education	1408		3,000				
	A/E Cons. Fees	1430		4,200				
	Sealcoat/Stripe Rear Upper Lot	1450		1,938				
	Site Drain Improvements	1450		800				
	Replace Metal Bifold Closet Doors-Apts.	1460		54,000				
	Install Fluor. Fixtures in Apt. Baths	1460		20,200				
	Replace Carpet & Vinyl Wall Base-1st Fl. Community Rm.	1460		2,000				
	Replace Wall/Base Cabinets in Kitchen	1460		6,400				
	Replace Single Bowl Kitchen Sink	1460		500				
	Replace Triple Bowl Kitchen Sink	1460		930				
	General Shed Maintenance	1470		800				
	Purchase Refrigerators	1465.1		2,500				

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program No: MI33P04650107 Replacement Housing Factor No:	**Federal FY of Grant:** 2007

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
	07/18/09			07/18/11			

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

Capital Fund Program Five-Year Action Plan **Part I: Summary**					
PHA Name				☐**Original 5-Year Plan** ☒**Revision No:** 2	
Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2008 PHA FY: 2008	Work Statement for Year 3 FFY Grant: 2009 PHA FY: 2009	Work Statement for Year 4 FFY Grant: 2010 PHA FY: 2010	Work Statement for Year 5 FFY Grant: 2011 PHA FY: 2011
	Annual Statement				
MI046-HA Wide		108,075	108,075	108,075	108,075
CFP Funds Listed for 5-year planning		108,075	108,075	108,075	108,075
Replacement Housing Factor Funds					

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

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : 1 FFY Grant: 2008 PHA FY: 2008			Activities for Year: 2 FFY Grant: 2009 PHA FY: 2009		
	Development Name/Number	**Major Work Categories**	**Estimated Cost**	**Development Name/Number**	**Major Work Categories**	**Estimated Cost**
See	MI046-HA Wide	Operations	10,807	MI046-HA-Wide	Operations	10,807
Annual		Mgmt. Impr.-Education	3,000		A/E Cons Fees-Energy Audit	4,690
Statement		Mgmt. Impr.-New Copier	6,000		Mgmt. Impr.-Education	4,903
		A/E Consultant Fees	5,000		Elevator Modernization	85,000
		Mgmt. Impr.- New Computer	3,000		Clean Apt. Smoke Detectors	2,675
		Elevator Modernization	77,268			
		Refrigerators	3,000			
Total CFP Estimated Cost			$108,075			$108,075

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

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities					
Activities for Year : 3 FFY Grant: 2010 PHA FY: 2010			Activities for Year: 4 FFY Grant: 2011 PHA FY: 2011		
Development Name/Number	**Major Work Categories**	**Estimated Cost**	**Development Name/Number**	**Major Work Categories**	**Estimated Cost**
MI046-HA-Wide	Operations	10,807	MI046-HA-Wide	Operations	10,807
	Paint Railings Across Site	1,800		Mgmt. Impr.-Education	3,538
	A/E Cons Fees	6,000		Misc. Concrete Work	2,600
	Mgmt. Impr.-Education	4,500		Concrete Repair @ Retaining Walls	1,500
	Refurbish Corridors	18,000		A/E Cons. Fees	4,000
	Mgmt. Impr.-Computer Upgrades	3,000		Mgmt. Impr.-New Computer	3,000
	Replace Apt. Storm Doors	32,400		Replace Kitchen Stove	650
	Reapply Sealcoat & Restripe All Parking Areas	7,750		Repl. TV/VCR Comm. Room	1,000
	Office Renovations	15,818		Paint Apartments (20)	6,000
	Repl. Carpet-1st Floor Elevator Lobby	1,000		Repl. PA System Console	2,100
	Repl. Vinyl Base-1st Floor Elev. Lobby	500		Gen. Impr. Community Room	5,000
	Repaint Laundry Room	550		Repaint Walls-15th Floor Lounge	1,000
	Repl. VCT Flooring-Beauty Shop	1,000		Repaint Ceiling 15th Fl. Lounge	700
	Repl. Vinyl Wall Base-Beauty Shop	375		Repl. Carpet 15th Fl. Lounge	1,800

	Repl. Ceiling Tile-Beauty Shop	800		Repl. Vinyl Wall Base-15th Floor Lounge	780
	Repaint Walls-Beauty Shop	625		Replace Furniture-15th Floor Lounge	5,000
	Install Drop Ceiling in Laundry Room	3,150		Repl. Cabinets/Book Shelves-15th Floor Lounge	6,000
				Replace Sink & Faucet-15th Floor Lounge	750
				Repl. Double Doors-15th Floor Lounge	2,200
				Repl. Balcony Doors-15th Floor Lounge	2,000
				Repl. Storm Doors-15th Floor Lounge	1,000
				Replace Range Hoods-Apartments	37,450
				Repaint Kitchen Walls	740
				Replace VCT Floor-Kitchen	1,300
				Repl. Vinyl Wall Base-Kitchen	225
				Repl. Ceiling Tile-Kitchen	1,100
				Replace Refrigerator-Kitchen	750
				Repl. Interior Entry Door-Kitchen	1,000

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

				Repaint 1st Floor Community Room	725
				Replace 1st Floor Community Room Ceiling Tile	1,360
				Replace Interior Double Entry Doors-1st Floor Community Room	2,000
Total CFP Estimated Cost		$108,075			$108,075

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

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
St. Joseph Housing Commission	Capital Fund Program Grant No: MI33P04650103 Replacement Housing Factor Grant No:	2003

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)** **Amended Original Budget**
☐ **Performance and Evaluation Report for Period Ending:** ☒ **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	0	0	0	0
3	1408 Management Improvements Soft Costs	4,004	2,000	2,000	2,000
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000	5,000	5,000	5,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	114,000	99,969	99,969	99,969
11	1465.1 Dwelling Equipment—Nonexpendable	5,000	2,465	2,465	2,465
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	1502 Contingency				

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

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
St. Joseph Housing Commission	Capital Fund Program Grant No: MI33P04650103 Replacement Housing Factor Grant No:	2003

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)** **Amended Original Budget**
☐ **Performance and Evaluation Report for Period Ending:** ☒ **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines 1-19)	133,004	109,434	109,434	109,434
	Amount of line XX Related to LBP Activities				
	Amount of line 10 Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security—Hard Costs				
	Amount of line 10 Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program Grant No: MI33P04650103 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2003

Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
MI046-01	Management Education – Soft		1408		4,004	2,000	2000	2000	Complete
MI046-01	A/E, Management Cons. Costs		1430		10,000	5,000	5,000	5,000	Complete
MI046-01	Maint. Exhaust System		1460		24,000	16,290	16,290	16,290	Complete
MI046-01	Rear Slider Entrance Doors		1460		20,000	8,157	8,157	8,157	Complete
MI046-01	Replace Intercom System		1460		35,000	0	0	0	
MI046-01	Hallway Improvements		1460		35,000	75,522	75,522	75,522	Complete
MI046-01	Replace Refrigerators		1465.1	6	5,000	2,465	2,465	2,465	Complete
MI046-01	Operations		1406		0	0	0	0	
MI046-01	Repair Balconies		1460		0	0	0	0	

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program Grant No: MI33P04650103 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2003

Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program No: MI33P04650103 Replacement Housing Factor No:	**Federal FY of Grant:** 2003

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MI046-01	5/31/05	9/16/05	3/31/05	5/31/07	9/16/07	3/31/05	Per HUD

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

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

PHA Name: St. Joseph Housing Commission	Grant Type and Number Capital Fund Program Grant No: MI33P04650203 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003A

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

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	2,181	2,181	2,181	2,181
3	1408 Management Improvements Soft Costs	0	1,500	1,500	1,500
	Management Improvements Hard Costs	0	3,000	3,000	3,000
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	0	2,500	2,500	2,500
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	19,629	12,629	12,629	12,629
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				

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

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

PHA Name: St. Joseph Housing Commission	Grant Type and Number Capital Fund Program Grant No: MI33P04650203 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003A

☐ 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	
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines 2-10)	21,810	21,810	21,810	21,810
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program Grant No: MI33P04650203 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2003 A

Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Original	Revised	
MI046-01	Operations		1406		2,181	2,181	2,181	2,181	Complete
MI046-01	Refurbish 1st Floor Back Door Entrance		1460		19,629	12,629	12,629	12,629	Complete
MI046-01	Office Computer Wiring Upgrade		1408		0	3,000	3,000	3,000	Complete
MI046-01	Management Education		1408		0	1,500	1,500	1,500	Complete
MI046-01	A/E/Consultant Fees		1430		0	2,500	2,500	2,500	Complete

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program No: MI33P04650203 Replacement Housing Factor No:	**Federal FY of Grant:** 2003A

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MI046-01	2/13/06			2/13/08		6/29/06	

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

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

PHA Name:	**Grant Type and Number**	**Federal FY of Grant:**
St. Joseph Housing Commission	Capital Fund Program Grant No: MI33P04650104 Replacement Housing Factor Grant No:	2004

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

Line No.	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost**	
		Original	**Revised**	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations	10,000	12,600	12,600	12,600
3	1408 Management Improvements	3,884	3,884	3,884	3,884
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	11,000	11,000	11,000	11,000
8	1440 Site Acquisition				
9	1450 Site Improvement	41,300	0		
10	1460 Dwelling Structures	34,750	99,253	99,253	99,253
11	1465.1 Dwelling Equipment—Nonexpendable	4,500	0		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	4,000	0		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	109,434	126,737	126,737	126,737
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				

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

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

PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650104 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
MI046-01				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations	1406		10,000	12,600	12,600	12,600	Complete
HA-Wide	Mgmt. Education	1408		3,884	3,884	3,884	3,884	Complete
HA-Wide	A/E & Consultant Fees	1430		11,000	11,000	11,000	11,000.00	Complete
HA-Wide	Landscape Rear Porch Area	1450		10,000	0			
HA-Wide	Misc. Concrete Work	1450		2,600	0			
HA-Wide	Concrete Repair @ Retaining Walls	1450		1,200	0			
HA-Wide	Landscape Improvement	1450		10,000	0			
HA-Wide	Mature Tree Trimming	1450		7,500	0			
HA-Wide	Remove/Replace Gas Lamps	1450		6,000	0			
HA-Wide	Install Decorative Light Fixtures Outside	1450		4,000	0			
HA-Wide	Tuckpoint/Repair Brick & Pilasters	1460		14,000	99,253	99,253	99,253	Complete
HA-Wide	Repair Concrete @ Balconies	1460		1,700	0			
HA-Wide	Clean Concrete Areas of Rust	1460		800	0			
HA-Wide	Paint All Railings Across Site	1460		1,800	0			
HA-Wide	Paint Concrete @ Balconies	1460		3,300	0			
HA-Wide	Paint Railings @ Balconies	1460		4,675	0			

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

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

PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650104 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
MI046-01				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Paint Concrete Floor Surface @Balaconies	1460		6,875	0			
HA-Wide	Paint Concrete Areas on Building	1460		1,500	0			
HA-Wide	Sand, Prime, Paint Flagpole	1460		100	0			
HA-Wide	Replace Furniture @ Elevator Lobbies	1465.1		4,500	0			
HA-Wide	Replace Picnic Tables	1475		1,600	0			
HA-Wide	Replace Benches Across the Site	1475		2,400	0			

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program No: MI33P0450104 Replacement Housing Factor No:	**Federal FY of Grant:** 2004

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MI046-HA Wide	5/31/06	9/14/06		5/31/07	9/14/08		HUD Change
						12/2/05	Complete

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program Grant No: MI33P04650105 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2005

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☒ **Revised Annual Statement (revision no: 3)**
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	**Revised**	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations	10,000	10,000	10,000	10,000
3	1408 Management Improvements	5,029	5,029	4,764	3,790
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000	9,200	4,840	4,840
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	84,405	86,642	50,693	37,830
11	1465.1 Dwelling Equipment—Nonexpendable	0	4,729	-	-
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	0	6,578	-	-
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	109,434	122,178	70,297	56,460
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				

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

Annual Statement/Performance and Evaluation Report **Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary**					
PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650105 Replacement Housing Factor Grant No:			**Federal FY of Grant:** 2005
☐**Original Annual Statement** ☐**Reserve for Disasters/ Emergencies** ☒**Revised Annual Statement (revision no: 3)** ☐**Performance and Evaluation Report for Period Ending:** ☐**Final Performance and Evaluation Report**					
Line	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost**	
		Original	**Revised**	**Obligated**	**Expended**
	Measures				

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

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

PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650105 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MI046-HA Wide	Operations	1406		10,000	10,000	10,000	10,000	Complete
	Management Improvements: Education	1408		3,000	3,000	3,000	2,026	Partial
	A/E Consultant Fees	1430		10,000	9,200	4,840	4,840	Partial
	Replace Apt. Metal Bifold Doors	1460		54,000	0			
	Refurbish 1st Floor Men's Bathroom	1460		8,000	0			
	Refurbish 1st Floor Women's Bathroom	1460		8,000	0			
	Refurbish 15th Floor Men's and Women's Bathrooms	1460		8,000	0			
	Install Dryer Exhaust System	1460		2,500	1,210	1,210	1,210	Complete
	Repaint Concrete Walls-Laundry Room	1460		550	550	0	0	
	Repaint Beauty Shop Walls	1460		325	325	0	0	
	Repaint Kitchen Walls	1460		540	540	0	0	
	Repaint Recreation Room Walls-1st	1460		540	540	0	0	
	Repaint Community Room Walls-15th Floor	1460		675	675	0	0	
	Repaint Community Room Ceiling-15th Floor	1460		600	600	0	0	
	Repaint Concrete Floors-Maint. Room	1460		675	675	0	0	

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

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

PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650105 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Management Improvements: Computer Upgrades	1408		2,029	2,029	1,764	1,764	Complete
	Tuckpoint/Repair Brick & Pilasters	1460		0	48,077	48,077	35,214	Partial
	Paint All Railings Across Site	1460		0	1,800	0	0	
	Replace Benches Across the Site	1475		0	3,400	0	0	
	Replace Picnic Tables	1475		0	3,178	0	0	
	Paint Railings @ Balconies	1460		0	4,675	0	0	
	Paint Concrete @ Balconies	1460		0	3,300	0	0	
	Paint Concrete Floor Surfaces @Balconies	1460		0	6,875	0	0	
	Replace Door Closures	1465.1		0	1,406	1,406	1,406	Complete
	Refurbish Grd. Fl. Men's Bathroom	1460		0	8,000			
	Refurbish Grd. Fl. Women's Bathroom	1460		0	8,000			
	Replace Water Coolers	1465.1		0	2,348			
	Replace Carpet-1st Fl. Elevator Lobby	1460		0	600			
	Replace Vinyl Wall Base-1st Fl. Elevator Lobby	1460		0	200			
	Replace Hot Water Holding Tank	1465.1		0	975			

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program No: MI33P04650105 Replacement Housing Factor No:	**Federal FY of Grant:** 2005

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MI046-HA Wide	5/31/07	8/18/07		5/31/09	8/18/09		HUD Change

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

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

PHA Name:	**Grant Type and Number**	**Federal FY of Grant:**
St. Joseph Housing Commission	Capital Fund Program Grant No: MI33P04650106 Replacement Housing Factor Grant No:	2006

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

Line No.	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost**	
		Original	**Revised**	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations	12,217	10,807	10,807	10,807
3	1408 Management Improvements	10,000	6,000	3,000	0
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,661	7,661		
8	1440 Site Acquisition				
9	1450 Site Improvement	41,400	28,707		
10	1460 Dwelling Structures	48,400	32,235		
11	1465.1 Dwelling Equipment—Nonexpendable	2,500	13,500	1,832	1,832
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	0	9,165	4,000	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	122,178	108,075	19,639	12,639
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				

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

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program Grant No: MI33P04650106 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2006

☐**Original Annual Statement** ☐**Reserve for Disasters/ Emergencies** ☒**Revised Annual Statement (revision no:** 2)
☐**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**
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				

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

PHA Name: St. Joseph Housing Commission	**Grant Type and Number** Capital Fund Program Grant No: MI33P04650106 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2006

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MI046 HA Wide	Operations	1406		12,217	10,807	10,807	10,807	Complete
	Clean concrete areas of rust	1460		1,800	1,800	0	0	
	Misc Concrete Work	1450		2,600	2,600	0	0	
	Concrete Repair-Ret. Walls	1450		1,200	1,200	0	0	

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

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

PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650106 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Repair Concrete-Balconies	1460		1,700	1,700	0	0	
	Landscape Rear Porch Area & West of Bldg.	1450		10,000	7,307	0	0	
	Landscape Improvements	1450		10,000	10,000	0	0	
	Mature Tree Trimming	1450		7,500	7,500	0	0	
	Furniture by Elevators	1475		4,700	4,700	0	0	
	Install Flour. Fixtures at Apt. Bathrooms	1460		20,200	0			
	Paint Concrete Areas on Bldg	1460		4,000	4,000	0		
	Sand,Prime,Paint Flagpole	1450		100	100	0		
	Mgmt. Impr.-Education	1408		3,000	3,000	3,000	0	Partial
	Mgmt. Impr.-New Computer	1408		3,000	3,000	0	0	
	Mgmt. Impr.-New Office Furniture/Files	1475		4,000	4,465	4,465	0	Partial
	Refrigerators	1465.1		2,500	2,500	1,832	1,832	Partial
	Install Decorative Light Fixtures	1450		4,000	0			

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

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

PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650106 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Refurbish 15th Floor Men's & Women's Bath.	1460		8,000	8,000			
	Refurbish 15th Floor Lounge (Paint/Carpet..)	1460		8,000	0			
	Remove/Replace Gas Lamp Fixtures	1450		6,000	0			
	A/E Consultant Fees	1430		7,661	7,661			
	Replace Carpet-15th Fl. Lounge	1460		0	1,300			
	Replace Vinyl Wall Base-15th Fl. Lounge	1460		0	555			
	Replace Furniture-15th Fl. Lounge	1465.1		0	5,000			
	Replace Cabinets/Bookshelves-15th Fl. Lounge	1465.1		0	6,000			
	Replace Sink & Faucet-15th Fl. Lounge	1460		0	880			
	Replace Double Doors-15th Fl. Lounge	1460		0	2,000			

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

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

PHA Name: St. Joseph Housing Commission		**Grant Type and Number** Capital Fund Program Grant No: MI33P04650106 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Replace Balcony Doors-15th Fl. Lounge	1460		0	2,000			
	Replace Storm Doors-15th Fl. Lounge	1460		0	1,000			
	Replace 2 Doors-1st Floor Comm. Rm.	1460		0	4,000			
	Replace 3 Hollow Metal Doors/Frame-1st Fl. Comm. Room	1460		0	5,000			

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

Annual Statement/Performance and Evaluation Report **Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)** **Part III: Implementation Schedule**							
PHA Name: St. Joseph Housing Commission			**Grant Type and Number** Capital Fund Program No: MI33P04650106 Replacement Housing Factor No:				**Federal FY of Grant:** 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
	7/18/08			7/18/10			