

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: Erie Metropolitan Housing Authority

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

Streamlined Annual PHA Plan Agency Identification

PHA Name: Erie Metropolitan Housing Authority

PHA Number: OH028

PHA Fiscal Year Beginning: (mm/yyyy) 07/2007

PHA Programs Administered:

Public Housing and Section 8

Number of public housing units: 247
Number of S8 units: 1,007

Section 8 Only

Number of S8 units:

Public Housing Only

Number of public housing units:

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

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

PHA Plan Contact Information:

Name: Ralph Chamberlain
TDD:

Phone: (419) 625-0262

Email (if available): emharalph@accsandusky.com

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. 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)]

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[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.

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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-LLL a, *Disclosure of Lobbying Activities.*

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

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

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

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? No.
 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:	
<input type="checkbox"/>	Revitalization Plan under development
<input type="checkbox"/>	Revitalization Plan submitted, pending approval
<input type="checkbox"/>	Revitalization Plan approved
<input type="checkbox"/>	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:

EMHA has submitted an application to HUD's Special Application Center for the disposition of a public housing unit located at 713 John Street; Sandusky, Ohio 44870 within development OH028012 – Western Reserve in exchange for a similar replacement property from the Firelands Regional Medical Center due to the hospital's expansion. This application is pending approval and is listed as application number DDA0002243.

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? 50

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)?

Continue to promote, advise, and work with FSS and HCV Program participants interested in the homeownership program. Continue relationships with Bay Area Neighborhood Development Corporation for additional counseling and the City of Sandusky for additional down payment assistance programs.

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): Bay Area Neighborhood Development Corporation (BANDC) to provide additional counseling to interested participants; BANDC has provided similar services to the City of Sandusky for the last two (2) years.
- Demonstrating that it has other relevant experience (list experience below): Erie Metropolitan Housing Authority has had twelve (12) homeownership closings since its inception of the program locally.

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: City of Sandusky

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. Homeownership, de-concentration, improvement of housing stock, affirmatively further fair housing
- Other: (list below)

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

- Improve existing housing stock
- Increase homeownership rates – down payment assistance
- Support efforts of EMHA to promote resident councils
- Partner with non-profit for new construction for new homeownership opportunities

1. Consolidated Plan jurisdiction: State of Ohio

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. Homeownership, de-concentration, improvement of housing stock, affirmatively further fair housing
- Other: (list below)

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

- Actions to Foster and Maintain Affordable Housing
- Actions to Address Underserved Needs
- Actions to Reduce Lead Paint Hazards

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
✓	<i>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;</i>	5 Year and Annual Plans
✓	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
✓	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan</i>	5 Year and standard Annual Plans
✓	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
✓	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
✓	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
✓	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
✓	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
✓	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Policies
✓	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
✓	Public housing rent determination policies, including the method for setting public housing flat rents. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
✓	Schedule of flat rents offered at each public housing development. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
✓	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. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
✓	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
✓	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
✓	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
✓	Any policies governing any Section 8 special housing types <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
✓	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
✓	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
✓	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
✓	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
✓	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
✓	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
✓	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
✓	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
✓	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
✓	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
✓	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
✓	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : 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: Erie Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH12P02850106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2)					
<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	0	0		
3	1408 Management Improvements	26159.00	26159.00	26159.00	5142.55
4	1410 Administration	36420.00	36420.00	36420.00	11391.71
5	1411 Audit	0	0		
6	1415 Liquidated Damages	0	0		
7	1430 Fees and Costs	7500.00	7500.00		
8	1440 Site Acquisition	0	0		
9	1450 Site Improvement	0	0		
10	1460 Dwelling Structures	314522.00	175262.00	86278.15	780.22
11	1465.1 Dwelling Equipment—Nonexpendable	0	0		
12	1470 Nondwelling Structures	0	0		
13	1475 Nondwelling Equipment	0	0		
14	1485 Demolition	0	0		
15	1490 Replacement Reserve	0	0		
16	1492 Moving to Work Demonstration	0	0		
17	1495.1 Relocation Costs	0	0		
18	1499 Development Activities	0	0		
19	9000 Debt Service Repayment	0	121556.00		
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	384601.00	366897.00	148857.15	17314.48
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				

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: Erie Metropolitan Housing Authority			Grant Type and Number Capital Fund Program Grant No: OH12P02850106 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	
PHA Wide	Mgmt. Improvements	1408		26159.00	26159.00	26159.00	5142.55	On-going
	Admin	1410		36420.00	36420.00	36420.00	11391.71	On-going
	A&E Fees	1430		7500.00	7500.00			On-going
	Debt Service	9000			121556.00			Pending
OH28-01	Dwelling Structure	1460						
	Cameras				60000.00	36588.00		On-going
	Roof				60000.00			On-going
	Lobby				55262.00	49690.15	780.22	On-going
	Reconfigurations			314522.00				On-going
				384601.00	366897.00	148857.15	17314.48	

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: Erie Metropolitan Housing Authority			Grant Type and Number Capital Fund Program No: OH12P02850106 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	
PHA-Wide							
Mgmt. Improve	9/30/06			09/30/07			
Admin	9/30/06			09/30/07			
A&E	6/30/06			12/31/06			
OH28-01	12/31/06	06/30/07		06/30/07	12/31/07		

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name Erie Metropolitan Housing Authority				<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2008 PHA FY: 06/30/2008	Work Statement for Year 3 FFY Grant: 2009 PHA FY: 06/30/2009	Work Statement for Year 4 FFY Grant: 2010 PHA FY: 06/30/2010	Work Statement for Year 5 FFY Grant: 2011 PHA FY: 06/30/2011
	Annual Statement				
PHA-Wide: Debt Service to Bond		121,556.00	121,556.00	121,556.00	121,556.00
PHA-Wide: Operations					
PHA-Wide: Management Improve		26,159.00	26,159.00	26,159.00	26,159.00
PHA-Wide: Administration		36,420.00	36,420.00	36,420.00	36,420.00
PHA-Wide: Audit		-	-	-	-
PHA-Wide: Fees & Costs		7,500.00	7,500.00	7,500.00	7,500.00
PHA-Wide: Site Improvement		-	-	-	-
PHA-Wide: Dwelling Structures		150,262.00	150,262.00	150,262.00	175,262.00
PHA-Wide: Non-dwelling Structures					
PHA-Wide: Non-dwelling Equipment		25,000.00	25,000.00	25,000.00	
PHA-Wide: Relocation Costs					
PHA-Wide: Contingency					
CFP Funds Listed for 5-year planning		366,897.00	366,897.00	366,897.00	366,897.00
Replacement Housing Factor Funds					

**Annual Statement /
Performance and Evaluation Report**

Part I: Summary
Capital Funds Program (CFP)

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

HA Name		Capital Funds Project Number		FFY of Approval	
ERIE METROPOLITAN HOUSING AUTHORITY		OH12P02850107		2007	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement/Revision Number <input type="checkbox"/> Performance and Evaluation Report for Program Year Ending----- <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original Revision #	Revised	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations (May not exceed 20% of line 20 for PHAs with 250 or more Units)	\$78,550	\$0	\$0	\$0
3	1408 Management Improvements (May not exceed 20% of line 20)	\$0	\$0	\$0	\$0
4	1410 Administration (May not exceed 10% of line 20)	\$37,700	\$0	\$0	\$0
5	1411 Audit	\$0	\$0	\$0	\$0
6	1415 Liquidated Damages	\$0	\$0	\$0	\$0
7	1430 Fees and Costs	\$25,000	\$0	\$0	\$0
8	1440 Site Acquisition	\$0	\$0	\$0	\$0
9	1450 Site Improvement	\$0	\$0	\$0	\$0
10	1460 Dwelling Structures	\$114,931	\$0	\$0	\$0
11	1465.1 Dwelling Equipment - Nonexpendable	\$0	\$0	\$0	\$0
12	1470 Nondwelling Structures	\$0	\$0	\$0	\$0
13	1475 Nondwelling Equipment	\$0	\$0	\$0	\$0
14	1485 Demolition	\$0	\$0	\$0	\$0
15	1490 Replacement Reserve	\$0	\$0	\$0	\$0
16	1492 Moving to Work Demonstration	\$0	\$0	\$0	\$0
17	1495.1 Relocation Costs	\$0	\$0	\$0	\$0
18	1499 Mod Used for Development Activities	\$0	\$0	\$0	\$0
19	9000 Debt Service Repayment	\$121,556	\$0	\$0	\$0
20	1502 Contingency (may not exceed 8% of line 20)		\$0	\$0	\$0
21	Amount of CFFP Proceeds (Sum of lines 2 - 19)	\$377,737.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to LBP Activities				
23	Amount of line 20 Related to Section 504 Compliance				
24	Amount of line 20 Related to Security				
25	Amount of line 20 Related to Energy Conservation Measures				
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.		(2) To be completed for the Performance and Evaluation Report.			
Signature of Executive Director and Date 5/31/2007		Signature of Public Housing Director/Office of Native American Programs Administrator and Date 			

**Annual Statement /
Performance and Evaluation Report**

Part II: Supporting Pages

Capital Funds Program: OH12P02850107

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised	Funds Obligated (2)	Funds Expended (2)	
PHA Wide	1406 Operations	1406		\$78,550.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1408 Management Improvements	1408		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1410 Administration	1410		\$37,700.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1411 Audits	1411		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1415 Liquidated Damages	1415		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1430 Fees and Cost	1430						
	A & E Fees			\$25,000.00	\$0.00	\$0.00	\$0.00	
	Total 1430			\$25,000.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1440 SITE ACQUISITION	1440		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1490 REPLACEMENT RESERVE	1490		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1499 MOD USED FOR DEVELOPMENT	1499		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	9000 Debt Service	9000						
	Capitalized Interest							
	Debt Service Repayment			\$121,556.00	\$0.00			
	Total 9000			\$121,556.00	\$0.00	\$0.00	\$0.00	
	SUBTOTAL			\$262,806	\$0	\$0	\$0	
OH28-1								
	1450 Site Improvements	1450		\$0.00	\$0.00	\$0.00	\$0.00	
	1460 Dwelling Structure (AMP #2)	1460						
	Bayshore Towers--Roof			\$45,000.00	\$0.00	\$0.00	\$0.00	
	1460 Dwelling Structure (AMP #1)	1460						
	Scattered Site Improvements			\$69,931.00	\$0.00	\$0.00	\$0.00	
	Total 1460			\$114,931.00	\$0.00	\$0.00	\$0.00	
	1465 Dwelling Equipment	1465		\$0.00	\$0.00	\$0.00	\$0.00	
	1470 Non-Dwelling Structures	1470		\$0.00	\$0.00	\$0.00	\$0.00	

**Annual Statement /
Performance and Evaluation Report**

Part II: Supporting Pages

Capital Funds Program: OH12P02850107

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised	Funds Obligated (2)	Funds Expended (2)	
	1475 Non-Dwelling Equipment	1475		\$0.00	\$0.00	\$0.00	\$0.00	
	1485 DEMOLITION COSTS	1485		\$0.00	\$0.00	\$0.00	\$0.00	
	1495 RELOCATION COST	1495		\$0.00	\$0.00	\$0.00	\$0.00	
	Total Cost for Development			\$114,931.00	\$0.00	\$0.00	\$0.00	

**Annual Statement /
Performance and Evaluation Report**

Part III: Implementation Schedule
Capital Fund Program: OH12P02850107

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

OMB Approval No. 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (3)	Actual (2)	Original	Revised (1)	Actual (2)	
PHA-Wide							
Operations	09/30/07			09/30/07			
Administration	09/30/07			09/30/07			
A & E Fees	12/31/07			03/31/08			
OH28-01	06/30/08			06/30/08			
Debt Service	9/30/2007			9/30/2007			

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

R. J. Chubb

5/31/2007

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Erie Metropolitan Housing Authority		<input checked="" type="checkbox"/> Original 5-Year <input type="checkbox"/> Revision No.			
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: 2008 PHA FY: 6/30/2008	Work Statement for Year 3 FFY Grant: 2009 PHA FY: 6/30/2009	Work Statement for Year 4 FFY Grant: 2010 PHA FY: 6/30/2010	Work Statement for Year 5 FFY Grant: 2011 PHA FY: 6/30/2011
	Annual Statement				
PHA-WIDE Debt Service to Bond		121,556.00	121,556.00	121,556.00	121,556.00
PHA-WIDE Operations					
PHA-WIDE Management Improve		26,159.00	26,159.00	26,159.00	26,159.00
PHA-WIDE Administration		36,420.00	36,420.00	36,420.00	36,420.00
PHA-WIDE Audit		-	-	-	-
PHA-WIDE Fees & Costs		7,500.00	7,500.00	7,500.00	7,500.00
PHA-WIDE Site Improvement		-	-	-	-
PHA-WIDE Dwelling Structures		150,262.00	150,262.00	150,262.00	175,262.00
PHA-WIDE Non-Dwelling Structures					
PHA-WIDE Non-Dwelling Equipment		25,000.00	25,000.00	25,000.00	-
PHA-WIDE Relocation Costs					
PHA-WIDE Contingency					
CFP Funds Listed for 5-year planning		366,897.00	366,897.00	366,897.00	366,897.00
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages--Work Activities

Activities for Year 1	Activities for Year: <u>2008</u> FFY Grant: <u>2008</u> PHA FY: <u>6/30/2008</u>			Activities for Year: <u>2009</u> FFY Grant: <u>2009</u> PHA FY: <u>6/30/2009</u>			
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost	
See Annual Statement							
		Total CFP Estimated Cost		\$ -			\$ -

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages--Work Activities

Activities for Year 1	Activities for Year: <u>2008</u> FFY Grant: <u>2008</u> PHA FY: <u>6/30/2008</u>			Activities for Year: <u>2009</u> FFY Grant: <u>2009</u> PHA FY: <u>6/30/2009</u>			
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost	
See Annual Statement							
		Total CFP Estimated Cost		\$ -			\$ -

**Annual Statement /
Performance and Evaluation Report**

Part I: Summary
Capital Funds Program (CFP)

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

HA Name		Capital Funds Project Number		FFY of Approval	
ERIE METROPOLITAN HOUSING AUTHORITY		OH12P02850105		2005	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement/Revision Number <input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending: <u>12/31/06</u> -					
<input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original Original	Revised (2)	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations (May not exceed 20% of line 20 for PHAs with 250 or more Units)	\$0	\$0	\$0	\$0
3	1408 Management Improvements (May not exceed 20% of line 20)	\$26,159	\$39,119	\$38,929	\$38,929
4	1410 Administration (May not exceed 10% of line 20)	\$36,420	\$38,460	\$38,166	\$38,166
5	1411 Audit	\$0	\$0	\$0	\$0
6	1415 Liquidated Damages	\$0	\$0	\$0	\$0
7	1430 Fees and Costs	\$7,500	\$25,540	\$25,539	\$25,539
8	1440 Site Acquisition	\$0	\$0	\$0	\$0
9	1450 Site Improvement	\$0	\$0	\$0	\$0
10	1460 Dwelling Structures	\$289,522	\$253,635	\$244,655	\$231,655
11	1465.1 Dwelling Equipment - Nonexpendable	\$0	\$24,877	\$22,179	\$22,179
12	1470 Nondwelling Structures	\$25,000	\$2,970	\$2,970	\$2,970
13	1475 Nondwelling Equipment	\$0	\$0	\$0	\$0
14	1485 Demolition	\$0	\$0	\$0	\$0
15	1490 Replacement Reserve	\$0	\$0	\$0	\$0
16	1492 Moving to Work Demonstration	\$0	\$0	\$0	\$0
17	1495.1 Relocation Costs	\$0	\$0	\$0	\$0
18	1499 Mod Used for Development Activities	\$0	\$0	\$0	\$0
19	1501 Collateralization or Debt Service	\$0	\$0	\$0	\$0
20	1502 Contingency (may not exceed 8% of line 20)		\$0	\$0	\$0
21	Amount of CFFP Proceeds (Sum of lines 2 - 19)	\$384,601.00	\$384,601.00	\$372,438.00	\$359,438.12
22	Amount of line 20 Related to LBP Activities				
23	Amount of line 20 Related to Section 504 Compliance				
24	Amount of line 20 Related to Security				
25	Amount of line 20 Related to Energy Conservation Measures				
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.		(2) To be completed for the Performance and Evaluation Report.			
Signature of Executive Director and Date 5/30/2007		Signature of Public Housing Director/Office of Native American Programs Administrator and Date 			

**Annual Statement /
Performance and Evaluation Report**

Part II: Supporting Pages

Capital Funds Program: OH12P02850105

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (2)	Funds Obligated (2)	Funds Expended (2)	
PHA Wide	1408 Management Improvements	1408						
	Administrative Salaries			\$16,284.00	\$11,002.00	\$11,002.00	\$11,002.00	
	Benefits			\$4,875.00	\$2,501.00	\$2,312.00	\$2,312.00	
	Miscellaneous Adm. Expenses			\$0.00	\$7,500.00	\$7,500.00	\$7,500.00	
	Training			\$5,000.00	\$2,054.00	\$2,053.00	\$2,053.00	
	Computers & Server			\$0.00	\$16,062.00	\$16,062.00	\$16,062.00	
	Total 1408			\$26,159.00	\$39,119.00	\$38,929.00	\$38,929.00	
PHA Wide	1410 Administration	1410						
	Technical Salaries			\$34,035.00	\$34,035.00	\$32,013.00	\$32,013.00	
	Benefits			\$2,385.00	\$4,425.00	\$6,153.00	\$6,153.00	
	Total 1410			\$36,420.00	\$38,460.00	\$38,166.00	\$38,166.00	
PHA Wide	1430 Fees and Cost	1430						
	A & E Fees			\$7,500.00	\$25,540.00	\$25,539.00	\$25,539.00	
	Total 1430			\$7,500.00	\$25,540.00	\$25,539.00	\$25,539.00	
PHA Wide	1470 Non Dwelling Structures							
	Parking Lot Improvement--Management Facility	1470		\$25,000.00	\$2,970.00	\$2,970.00	\$2,970.00	
	Total 1470			\$25,000.00	\$2,970.00	\$2,970.00	\$2,970.00	
	SUBTOTAL			\$95,079	\$106,089	\$105,604	\$105,604	
OH028-4	Development #1							
	1460 Dwelling Structure	1460						
	BST Renovations (Reconfiguration)			\$289,522.00	\$223,066.00	\$213,101.00	\$200,101.00	
	Total 1460			\$289,522.00	\$223,066.00	\$213,101.00	\$200,101.00	
	1465 Dwelling Equipment	1465						
	Lobby Furniture			\$0.00	\$6,120.00	\$6,120.00	\$6,120.00	
Stoves & Refrigerators			\$0.00	\$4,757.00	\$4,756.00	\$4,756.00		
Washers & Dryers			\$0.00	\$14,000.00	\$11,303.00	\$11,303.00		
	Total 1465			\$0.00	\$24,877.00	\$22,179.00	\$22,179.00	
	Total Cost for Development #1			\$289,522.00	\$247,943.00	\$235,280.00	\$222,280.00	
OH28-7,8,9,12,13	Development #2							
	1460 Dwelling Structure	1460						
	1323 Stone Street Renovations			\$0.00	\$9,357.00	\$9,357.00	\$9,357.00	
	2235 Olds Street Renovations			\$0.00	\$1,750.00	\$1,750.00	\$1,750.00	
	529 Pearl Street Renovations			\$0.00	\$17,785.00	\$18,770.00	\$18,770.00	
	Oldgate Apartment House Check Valve			\$0.00	\$1,677.00	\$1,677.00	\$1,677.00	
	Total 1460			\$0.00	\$30,569.00	\$31,554.00	\$31,554.00	
	Total Cost for Development #2			\$0.00	\$30,569.00	\$31,554.00	\$31,554.00	

**Annual Statement /
Performance and Evaluation Report**

Part III: Implementation Schedule
Capital Fund Program: OH12P02850105

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

OMB Approval No. 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (2)	Actual (2)	Original	Revised (1)	Actual (2)	
PHA-Wide	06/30/06	12/31/06	12/31/06	12/31/06		12/31/2006	
Development #1	09/30/06	12/31/06	06/30/07	12/31/06	6/30/2007	6/30/2007	
Development #2	03/31/06	9/31/06	06/30/07	12/31/06	6/30/2007	6/30/2007	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

5/30/2007



Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement /
Performance and Evaluation Report**

Part I: Summary
Capital Funds Program (CFP)

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

HA Name		Capital Funds Project Number		FFY of Approval	
ERIE METROPOLITAN HOUSING AUTHORITY		CFPP Financing Proceeds			
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement/Revision Number # <input type="checkbox"/> Performance and Evaluation Report for Program Year Ending----- <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original Revision #	Revised (2)	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations (May not exceed 20% of line 20 for PHAs with 250 or more Units)	\$0	\$0	\$0	\$0
3	1408 Management Improvements (May not exceed 20% of line 20)	\$0	\$0	\$0	\$0
4	1410 Administration (May not exceed 10% of line 20)	\$0	\$0	\$0	\$0
5	1411 Audit	\$0	\$0	\$0	\$0
6	1415 Liquidated Damages	\$0	\$0	\$0	\$0
7	1430 Fees and Costs	\$120,603	\$0	\$0	\$0
8	1440 Site Acquisition	\$0	\$0	\$0	\$0
9	1450 Site Improvement	\$0	\$0	\$0	\$0
10	1460 Dwelling Structures	\$997,206	\$0	\$0	\$0
11	1465.1 Dwelling Equipment - Nonexpendable	\$0	\$0	\$0	\$0
12	1470 Nondwelling Structures	\$0	\$0	\$0	\$0
13	1475 Nondwelling Equipment	\$0	\$0	\$0	\$0
14	1485 Demolition	\$0	\$0	\$0	\$0
15	1490 Replacement Reserve	\$0	\$0	\$0	\$0
16	1492 Moving to Work Demonstration	\$0	\$0	\$0	\$0
17	1495.1 Relocation Costs	\$0	\$0	\$0	\$0
18	1499 Mod Used for Development Activities	\$0	\$0	\$0	\$0
19	9000 Collateralization or Debt Service (Debt Service Reserve)	\$92,191	\$0	\$0	\$0
20	1502 Contingency (may not exceed 8% of line 20)		\$0	\$0	\$0
21	Amount of CFFP Proceeds (Sum of lines 2 - 19)	\$1,210,000.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to LBP Activities				
23	Amount of line 20 Related to Section 504 Compliance				
24	Amount of line 20 Related to Security				
25	Amount of line 20 Related to Energy Conservation Measures				
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.		(2) To be completed for the Performance and Evaluation Report.			
Signature of Executive Director and Date 5/22/2007		Signature of Public Housing Director/Office of Native American Programs Administrator and Date <i>Raffa Chandra</i>			

**Annual Statement /
Performance and Evaluation Report**

Part II: Supporting Pages

Capital Funds Program: Proposed Loan Funds

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHA Wide	1406 Operations	1406		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1408 Management Improvements	1408		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1410 Administration	1410		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1411 Audits	1411		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1415 Liquidated Damages	1415		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1430 Fees and Cost	1430						
	A & E Fees			\$30,000.00	\$0.00	\$0.00	\$0.00	
	Financing Fees			\$90,603.00				
	Total 1430			\$120,603.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1440 SITE ACQUISITION	1440		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1490 REPLACEMENT RESERVE	1490		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	1499 MOD USED FOR DEVELOPMENT	1499		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	9000 Collateralization or Debt Service	9000						
	Debt Service Fees			\$92,191.00				
	Total 9000			\$92,191.00	\$0.00	\$0.00	\$0.00	
	SUBTOTAL			\$212,794	#REF!	#REF!	#REF!	
Development #1								
	1450 Site Improvements	1450		\$0.00	\$0.00	\$0.00	\$0.00	
	1460 Dwelling Structure	1460						
	Reconfiguration of Bayshore Towers--converting efficiency apartments to one bedrooms			\$997,206.00	\$0.00	\$0.00	\$0.00	
	Total 1460			\$997,206.00	\$0.00	\$0.00	\$0.00	
	1465 Dwelling Equipment	1465		\$0.00	\$0.00	\$0.00	\$0.00	
	1470 Non-Dwelling Structures	1470		\$0.00	\$0.00	\$0.00	\$0.00	

**Annual Statement /
Performance and Evaluation Report**

Part II: Supporting Pages

Capital Funds Program: Proposed Loan Funds

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
	1475 Non-Dwelling Equipment	1475		\$0.00	\$0.00	\$0.00	\$0.00	
	1485 DEMOLITION COSTS	1485		\$0.00	\$0.00	\$0.00	\$0.00	
	1495 RELOCATION COST	1495		\$0.00	\$0.00	\$0.00	\$0.00	
	Total Cost for Development #1			\$997,206.00	\$0.00	\$0.00	\$0.00	

**Annual Statement /
Performance and Evaluation Report**

Part III: Implementation Schedule
Capital Fund Program: Proposed Loan Funds

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

OMB Approval No. 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
PHA-Wide	03/31/07			06/30/07			
Development #1	03/31/07			09/30/07			

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

5/22/2007



Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Physical Needs Assessment
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157
 (exp. 11/30/2008)

HA Name Erie Metropolitan Housing Authority			<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number OH28-04		Development Name Bayshore Towers		DOFA Date or Construction Date 1969
Development Type	Occupancy Type	Structure Type	Number of Buildings	Number of Vacant Units
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input type="checkbox"/>	1	0 make ready/36-mod.
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution	0%/23% %
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-Up <input type="checkbox"/>	0 87 1 61 2 3	Total Current Units 151
Mutual Help <input type="checkbox"/>		Elevator <input checked="" type="checkbox"/>	3 _____ 4 _____ 5 _____	
Section 23, Bond Financed <input type="checkbox"/>			5+ _____	
General Description of Needed Physical Improvements				Urgency of Need (1-5)
To delete all -0- bedroom unit (103) to a mix that will result in the addition of 52 -1- bedroom units and 13 -2- bedroom units. Additionally, updating and renovating the existing structure. Updates will address the needs of the physical, hearing impaired, and sight impaired handicapped. Update fire alarm system. See attached.				1

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 4,775,000
Per Unit Hard Cost	\$ 40,126
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	2/28/06

Source(s) of Information
 EMHA records; HUD approved records ; modernization coordinator

Physical Needs Assessment
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157
(exp. 11/30/2008)

HA Name Erie Metropolitan Housing Authority				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number OH28-7		Development Name Harbor Towne		DOFA Date or Construction Date 1979	
Development Type	Occupancy Type	Structure Type	Number of Buildings		Number of Vacant Units
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	24		2
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution		
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-Up <input type="checkbox"/>	0 _____	1 _____	2 <u>16</u>
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 <u>5</u>	4 <u>3</u>	5 _____
Section 23, Bond Financed <input type="checkbox"/>			5+ _____		
General Description of Needed Physical Improvements					Total Current Units
<p>General upkeep and maintenance that will include roofing, siding (painting), and energy efficiencies update (water heaters, insulation, etc.)</p>					24
					Urgency of Need (1-5)
					5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 120,000
Per Unit Hard Cost	\$ 5,000
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	2/28/06
Source(s) of Information	

EMHA records: HUD approved records, modernization coordinator

Physical Needs Assessment
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157
(exp. 11/30/2008)

HA Name Erie Metropolitan Housing Authority			<input type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number OH28-08		Development Name Erie Estates		DOFA Date or Construction Date 1931
Development Type	Occupancy Type	Structure Type	Number of Buildings	Number of Vacant Units
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	28	3
Turnkey III - Vacant	Elderly	Row	Current Bedroom Distribution	
Turnkey III - Occupied	Mixed	Walk-Up	0 <u>17</u>	1 <u>5</u> 2 <u>6</u>
Mutual Help		Elevator	3 _____	4 _____ 5 _____
Section 23, Bond Financed			5+ _____	Total Current Units 28
General Description of Needed Physical Improvements				Urgency of Need (1-5)

General upkeep and maintenance that will include roofing, siding, furnace and water heater replacement, additional energy efficiencies (insulations, windows, etc.)

3

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 170,000
Per Unit Hard Cost	\$ 6,075
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	2/28/06

Source(s) of Information

EMHA records: HUD approved records, modernization coordinator

Physical Needs Assessment
 Comprehensive Grant Program (CGP)

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OMB Approval No. 2577-0157
 (exp. 11/30/2008)

HA Name Erie Metropolitan Housing Authority				<input type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number OH28-09		Development Name Foxborough		DOFA Date or Construction Date 1981	
Development Type	Occupancy Type	Structure Type	Number of Buildings		Number of Vacant Units
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	5		4
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input checked="" type="checkbox"/>	Current Bedroom Distribution		16 %
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-Up <input checked="" type="checkbox"/>	0 _____ 1 _____ 2 <u>20</u>		
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 <u>5</u> 4 _____ 5 _____	Total Current Units 25	
Section 23, Bond Financed <input type="checkbox"/>			5+ _____		
General Description of Needed Physical Improvements					Urgency of Need (1-5)
General upkeep and maintenance that will include roofing, furnace and water heater replacement. Energy efficiencies (window replaced, exterior upgrade)					4

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 130,000
Per Unit Hard Cost	\$ 5,400
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	
Source(s) of Information	

EMHA records: HUD approved records, modernization coordinator

Physical Needs Assessment
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OMB Approval No. 2577-0157
(exp. 11/30/2008)

HA Name Erie Metropolitan Housing Authority		<input type="checkbox"/> Original	
		<input type="checkbox"/> Revision Number _____	
Development Number OH28-12	Development Name Western Reserve	DOFA Date or Construction Date 1953	
Development Type	Occupancy Type	Structure Type	Number of Buildings
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	21
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input checked="" type="checkbox"/>	Number of Vacant Units
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-Up <input type="checkbox"/>	0
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	Current Bedroom Distribution
Section 23, Bond Financed <input type="checkbox"/>			0 _____ 1 _____ 2 <u>3</u>
			3 <u>20</u> 4 <u>1</u> 5 _____
			5+ _____
Total Current Units 24			%
General Description of Needed Physical Improvements			Urgency of Need (1-5)

General upkeep and maintenance that will include roofing, siding (paint), furnace and water heater replacement, energy efficiencies (window replacement and insulation)

4

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 150,000
Per Unit Hard Cost	\$ 6,250
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	2/28/06

Source(s) of Information

EMHA records: HUD approved records, modernization coordinator

Physical Needs Assessment
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OMB Approval No. 2577-0157
(exp. 11/30/2008)

HA Name Erie Metropolitan Housing Authority		<input type="checkbox"/> Original	
		<input type="checkbox"/> Revision Number _____	
Development Number OH28-13	Development Name Ogontz	DOFA Date or Construction Date 1944	
Development Type	Occupancy Type	Structure Type	Number of Buildings
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-Up <input checked="" type="checkbox"/>	0 _____ 1 _____ 2 <u>2</u>
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 <u>12</u> 4 _____ 5 _____
Section 23, Bond Financed <input type="checkbox"/>			5+ _____
			Number of Vacant Units 1
			Total Current Units 14
General Description of Needed Physical Improvements			Urgency of Need (1-5)

General upkeep and maintenance that will include siding (paint), roofing, furnace and water heater replacement, energy efficiencies (insulation and window replacement).

2

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 90,000
Per Unit Hard Cost	\$ 6,500
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	2/28/06
Source(s) of Information	

EMHA records: HUD approved records, modernization coordinator