

PHA Plans

Streamlined Annual Version

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

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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: Hocking 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.

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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B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

Form HUD-50070, *Certification for a Drug-Free Workplace*;

Form HUD-50071, *Certification of Payments to Influence Federal Transactions*; and

Form SF-LLL & SF-LLLa, *Disclosure of Lobbying Activities*.

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

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

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

A. Site-Based Waiting Lists-Previous Year

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

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?0
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously?
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
 - PHA main administrative office
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other (list below)

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:

Hocking Metropolitan Housing will be using the mixed finance development strategy in conjunction with the Capital Grant Forward Financing Program to develop 72 apartments. 15 of those apartments will be new public housing units. The CFFP program was approved in 2004. The Mixed financing Application is pending. The apartment community, known as Pine Ridge Apartments, will be placed in Service December of 2006.

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:

HMHA requires all participants to contribute a minimum of \$1000 to the purchase process. In some cases, this is more than the minimum of 1% participation from the family.

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

HMHA markets its home ownership programs through its not for profit subsidiary Hocking Housing Management, Inc. (HHM). HHM operates the home ownership training course that is marketed to the community at large and two surrounding counties. The Section 8 option is included in the class room instruction and the individual counseling sessions. In addition, HMHA has a homeownership FSS coordinator on staff. She works with existing Section 8 participants. She also markets the program to local realtors and banks.

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):

HMHA has operated a homeownership program since 1998. It added the Section 8 Homeownership option when it became available in 2000. HMHA's Executive Director Neighborworks Training Institute. HMHA FSS Homeownership Coordinator is enrolled in the Neighborworks Training Institute's program of study and has completed three of Athens County and currently has three transactions pending.

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: Hocking County is under the jurisdiction of the state of Ohio. The local community participates by preparing a local Community Housing Improvement Strategy.
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.

- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

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

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
HMHA Main Office	<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
HMHA Main Office	<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
HMHA Main Office	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
HMHA Main Office	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
HMHA Main Office	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
HMHA Main Office	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
HMHA MAIN OFFICE	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
N/A	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
HMHA Main Office	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
HMHA Main Office	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
HMHA Main Office	Public housing rent determination policies, including the method for setting public housing flat rents.	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	<input type="checkbox"/> Check here if included in the public housing A & O Policy.	
HMHA Main Office	Schedule of flat rents offered at each public housing development. <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
HMHA Main Office	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
HMHA Main Office	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
HMHA Main Office	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-Sufficiency
HMHA Main Office	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 <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
HMHA Main Office	Public housing grievance procedures <input 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
HMHA Main Office	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
HMHA Main Office	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
H/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
HMHA Main Office	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
HMHA Main Office	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
HMHA Main Office and site office	Public Housing Community Service Policy/Programs <input type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
HMHA main Office	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
HMHA Main Office	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
HMHA Main	Section 3 documentation required by 24 CFR Part 135, Subpart E for public	Annual Plan: Community

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
Office	housing.	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
HMHA Main office and site office	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
HMHA Main office	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)
NA	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: Hocking Metropolitan Housing Authority			Grant Type and Number Capital Fund Program Grant No: 501-04 Replacement Housing Factor Grant No:		Federal FY of Grant:
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	20000.00	20000	20000	20000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	81000.00	71000	71000	65574.08
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	21023.00	133906.00	133906.00	117450.00
11	1465.1 Dwelling Equipment—Nonexpendable	27200	27200	27200	27200.00
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	100000	0	0	
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	252106	252106	252106.00	230224.08
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					
PHA Name: Hocking Metropolitan Housing Authority			Grant Type and Number Capital Fund Program Grant No: 501-04 Replacement Housing Factor Grant No:		Federal FY of Grant:
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <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
	Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Hocking Metropolitan Housing Authority			Grant Type and Number Capital Fund Program Grant No: 501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Implementation of modernization activities	1410		20000	20000	20000	20000	
PHA Wide	A/E Services to plan for replacement of tub surrounds in project 3201	1430		14600	14600	14600	14600	
PHA Wide	A/E Services for inspection of new mixed finance housing project	1430		39000	39000	39000	39000	

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: Hocking Metropolitan Housing Authority			Grant Type and Number Capital Fund Program Grant No: 501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Legal Services to complete Mixed Finance Documents	1430		20000	17400	17400	11974.08	
OH32001	Replace Tub Surrounds and fixtures	1460	63	23906	133906	133906	117450	
OH32001	Replace Refrigerators	1465.1	71	27200	27200	27200	27200	
New Project	Debt Service	9000			0			
New Project	Development of 15 new apartments	1499	15	100000	0	0		

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Hocking Metropolitan Housing Authority			Grant Type and Number Capital Fund Program No: 501-04 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	
PHA Wide	9/1/2006		9/1/06	9/1/2008			
OH32001	9/1/2006		9/1/06	9/1/2008			
New Project	9/1/2006		9/1/06	9/1/2008			

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant: 501-08 PHA FY: 2009	FFY Grant: 501-09 PHA FY: 2010	FFY Grant: 501-10 PHA FY: 2011	FFY Grant: 501-11 PHA FY: 2012
OH32 001	Annual Statement	No Activity This Period	1460 Upgrade and Rebuild Elevator	1460 Re-sleeve and purchase new thru wall heat pumps	
OH32 002		No activity this period	No activity this period	No activity	1465.1 Purchase 48 New Stoves
OH32 003		No Activity	No Activity	No Activity	
New Project		1406 operation and maintenance	1406 operation and maintenance	1406 operation and maintenance	1406 operation and maintenance
New Project		9000 Debt Service	9000 Debt Service	9000 Debt Service	9000 Debt Service
PHA Wide		1470 phase three of new administration building	1470 phase four of new administration building	1470 Phase five of new administration building	No activity
PHA Wide		1410 Administration of Grant	1410 Administration of Grant	1410 Administration of grant	1410 Administration of Grant
PHA Wide		No activity	1430 A/E Services for elevator upgrade	1430 A/E services to re-sleeve the building	1430 A/E services for roof and gutters
OH32 003		No activity	No activity	No activity	1460 Replace roof a gutters

8. Capital Fund Program Five-Year Action Plan

					1408 Management Improvements purchase new computers and software
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year :__2__ FFY Grant: 2008 PHA FY: 2009			Activities for Year: _3__ FFY Grant: 2009 PHA FY: 2010		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	PHA Wide	1406	25000	OH32001	1460	80000
Annual	PHA WIDE	1410	18424	New Project	1406	25000
Statement	PHA WIDE	1470	100000	New Project	9000	83376
	CFFP	9000	83376	OH32001	1430	20000
				PHA wide	1410	18424

8. Capital Fund Program Five-Year Action Plan

CAPITAL FUND PROGRAM TABLES CONTINUE HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Hocking Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH16P03250105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005
<input checked="" 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	10744	10744.00	10744.00	
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	22882	22882.00	22882.00	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15000	9586.80	0	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	95609	0	0	94586.80
11	1465.1 Dwelling Equipment— Nonexpendable	19200	17340.00	17340	17340.00
12	1470 Nondwelling Structures				

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report

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

PHA Name: Hocking Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH16P03250105 Replacement Housing Factor Grant No:	Federal FY of Grant: 2005
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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	
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	0	100000.00		
19	1502 Contingency				
20	1501	80494	83376.20		
	Amount of Annual Grant: (sum of lines.....)	243929.00	243929.00		
	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				

8. Capital Fund Program Five-Year Action Plan

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

PHA Name: Hocking Metropolitan Housing Authrotiy		Grant Type and Number Capital Fund Program Grant No: OH16P03250105 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
PHA Wide	Administration and Implementation of program		1410		22882.00				
New Project	Maintenance and operations		1406		10744.00				
PHA Wide	Legal Fees to Complete CFFP		1430		9586.80				
OH16P032-02	Replace Refrigerators		1465.1	48	17340.00				
New Project	Construction of 15 new Public Housing Units		1499		100000				
New Project	Debt Service		1501		83376.20				

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Hocking Metropolitan Housing Authrotiy		Grant Type and Number Capital Fund Program Grant No: OH16P03250105 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

8. Capital Fund Program Five-Year Action Plan

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

PHA Name: Hocking Metropolitan Housing Authority		Grant Type and Number Capital Fund Program No: OH16P03250105 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		
PHA Wide	9/1/2007			9/1/2009				
OH16P032002	9/1/2007			9/1/2009				
New Project	9/1/2007			9/1/2009				
OH16P032001	9/1/2007			9/1/2009				

8. Capital Fund Program Five-Year Action Plan

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Hocking Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH16P03250106 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Lin e No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	25,000.00			
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	80,000.00			
4	1410 Administration	14523.80			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12872.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment— Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report

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

PHA Name: Hocking Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH16P03250106 Replacement Housing Factor Grant No:	Federal FY of Grant: 2006
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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	
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
20	1501	83376.20			
	Amount of Annual Grant: (sum of lines.....)	215772.00			
	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				

8. Capital Fund Program Five-Year Action Plan

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

PHA Name: Hocking Metropolitan Housing Authrotiy		Grant Type and Number Capital Fund Program Grant No: OH16P03250106 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
PHA Wide	Maintenance and operations		1406	25,000.00					
PHA Wide	Management Improvements: New computers and software to implement project based management		1408	80,000.00					
PHA Wide	Administration to implement Capital Grant		1410	14523.80					
PHA Wide	A/E to start design of new administration building		1430	12872.00					
New Project	Debt Service		1501	83376.20					

8. Capital Fund Program Five-Year Action Plan

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

PHA Name: Hocking Metropolitan Housing Authrotiy		Grant Type and Number Capital Fund Program Grant No: OH16P03250106 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

8. Capital Fund Program Five-Year Action Plan

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

PHA Name: Hocking Metropolitan Housing Authority		Grant Type and Number Capital Fund Program No: OH16P03250106 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	9/1/2008			9/1/2010				
PHA Wide	9/1/2008			9/1/2010				
New Project	9/1/2008			9/1/2010				
New Project	9/1/2008			9/1/2010				

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Hocking Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH16P03250107 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	25000.00			
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	15000.80			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	92395.00			
11	1465.1 Dwelling Equipment— Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				

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

PHA Name: Hocking Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH16P03250107 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007
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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	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
20	1501	83376.20			
	Amount of Annual Grant: (sum of lines.....)	215772.00			
	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				

**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	
Hocking Metropolitan Housing Authority		CFFP Financing Proceeds		2005	
<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	\$0	\$0	\$0	\$0
8	1440 Site Acquisition	\$0	\$0	\$0	\$0
9	1450 Site Improvement	\$0	\$0	\$0	\$0
10	1460 Dwelling Structures	\$0	\$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	\$1,000,000	\$0	\$1,000,000	\$1,000,000
19	1502 Contingency (may not exceed 8% of line 20)	\$0	\$0	\$0	\$0
20	Amount of CFFP Proceeds (Sum of lines 2 - 19)	\$1,000,000.00	\$0.00	\$1,000,000.00	\$1,000,000.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	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 Craig Garrelts		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: 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	<u>1406 Operations</u>	1406		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	<u>1408 Management Improvements</u>	1408		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	<u>1410 Administration</u>	1410		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	<u>1411 Audits</u>	1411		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	<u>1415 Liquidated Damages</u>	1415		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	<u>1430 Fees and Cost</u>	1430						
	CLERK OF WORKS				\$0.00	\$0.00	\$0.00	
	A & E Fees				\$0.00	\$0.00	\$0.00	
	Total 1430			\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	<u>1440 SITE ACQUISITION</u>	1440			\$0.00	\$0.00	\$0.00	
PHA Wide	<u>1490 REPLACEMENT RESERVE</u>	1490		\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	<u>1499 MOD USED FOR DEVELOPMENT construction of 15 public housing units</u>	1499		\$0.00	\$0.00	\$0.00	\$0.00	
				\$1,000,000.00		\$1,000,000.00		
	SUBTOTAL			\$1,000,000	\$0	\$1,000,000	\$0	
FL29P016-001	Development #1							
	<u>1450 Site Improvements</u>	1450		\$0.00	\$0.00	\$0.00	\$0.00	
	<u>1460 Dwelling Structure Construction of 15 Public Housing units</u>	1460				0.00		
						0.00		
	Total 1460			\$0.00	\$0.00	\$0.00	\$0.00	
	<u>1465 Dwelling Equipment</u>	1465		\$0.00	\$0.00	\$0.00	\$0.00	
	<u>1470 Non-Dwelling Structures</u>	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 Pine Ridge			\$1,000,000.00	\$0.00	\$1,000,000.00	\$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)	
Pine Ridge Development	09/16/05			09/16/07			

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

Craig Garrelts

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