

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

PHA Plans

5 Year Plan for Fiscal Years 2007 - 2011
Annual Plan for Fiscal Year 2007

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

**PHA Plan
Agency Identification**

PHA Name: Housing Authority of Salt Lake City

PHA Number: UT004

PHA Fiscal Year Beginning: (01/2007)

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

5-YEAR PLAN
PHA FISCAL YEARS 2007 - 2011
[24 CFR Part 903.5]

A. Mission

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)
To provide safe, decent, affordable housing opportunities for lower income families, the elderly, people with disabilities, and the homeless. This is accomplished in an environment of equal opportunity that maintains the client's and employee's dignity, maintains the public's trust and is an asset to the community.

B. Goals

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

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

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
The HASLC will submit a Disposition Application to HUD prior to the end of December 2006. Upon HUD's approval of the HASLC's Disposition Application we will apply for replacement vouchers for all occupied public housing units. We have an expectation that replacement Vouchers will be available at the time HUD approves our Disposition Application. We will also apply for any and all vouchers should HUD make them available.

- Reduce public housing vacancies:
We will continue to maintain occupancy rate of 98%. This will be accomplished by regular monitoring of properties, good coordination with eligibility for adequate number of screened applications, and coordination with maintenance for speedy unit turnover.
- Leverage private or other public funds to create additional housing opportunities:
Expansion of affordable housing is in the best interest of the HASLC and Salt Lake City Corporation. By selling public housing and using proceeds to leverage with other programs and in combination with vouchers, the HASLC can augment the affordable housing stock. We will pursue affordable purchase of existing buildings and/or land for the creation of mixed income housing developments that is affordable and expands the number of available units in our community. We will work to develop other funding sources through partnerships with State and local government agencies, use of tax credits, Bonds, Faith based organizations, foundations and others.
- Acquire or build units or developments
As stated above, by selling public housing and using proceeds to leverage with other programs and in combination with replacement vouchers, the HASLC can augment the affordable housing stock.
We have an existing partnership with the Housing Authority of the County of Salt Lake and Crusade for the Homeless for the sole purpose of creating permanent housing for homeless individuals. It is the long range goal to produce 500 units within 10 years beginning with 100 units within the first 3 years. The HASLC is already under construction of a 100 unit complex with an expected completion date of February 2007.
- Other (list below)
When financially feasible we will go above ADA/504 requirements in providing handicap accessible units. When possible we will also provide reasonable accommodations to people with disabilities.

We will project base 60 of our current vouchers to be used by chronic homeless individuals for permanent housing.

- PHA Goal: Improve the quality of assisted housing
Objectives:
 - Improve public housing management: (PHAS score)
In 2005 we received a PHAS score of 93 making our designation status a high performer. It is our goal to maintain our high performer status.
 - Improve voucher management: (SEMAP score)
In 2005 we received a SEMAP score of 100 making our designation a high performer. It is our goal to maintain our high performer status.

- ☒ Increase customer satisfaction:
We utilize our Resident Advisory Board, the HOME Resident Council, resident surveys, resident meetings and resident notices to communicate with our program participants on their needs. In 2005 we received a score of 9 out of 10 possible points in customer satisfaction. Customer satisfaction remains a top priority for our agency.

- ☒ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
 - A direct deposit for HAP payments to landlords has been developed in order to reduce program costs. We expect it will take approximately one year to have all landlords on board with this process.

 - Operate within budget amounts serving as many households possible within the federal program budgets.

 - Maintain our operating reserves at no less than 35%.

 - Create site based waiting lists. This will reduce eligibility processing time for applicants that want specific locations.

- ☒ Renovate or modernize public housing units:
The HASLC will continue annual planning and strategy meetings to assess the needs of each structure and prepare a modernization schedule in order to meet the needs. Planning, assessment, and implementation are ongoing.

- ☒ Demolish or dispose of obsolete public housing:
The HASLC is preparing and will submit to HUD a Disposition Application for the sale of up to 313 public housing units and a Voluntary Conversion Application to convert a 100 unit elderly building from public housing to vouchers. It is our intent to submit the Conversion Application to HUD in 2007. This action will leave the HASLC with approximately 220 units of public housing. We are not doing this because our public housing is obsolete, it isn't, we are doing this for cost saving measures, more efficient management of public housing, and for augmenting the affordable housing stock.

Provide replacement public housing:
The resources that will be provided from the sale of the public housing will enable the HASLC to build at least 365 new affordable housing units. These units will serve homeless, elderly and families. The family units will be mixed income and will enable the agency to include some market rate units. The mix of incomes will ensure the projects financial viability for years to come. The families will be protected by the replacement vouchers assuming the vouchers will be provided. The estimated time table for this plan from start to finish is approximately 5 years.

Provide replacement vouchers:
It is our intent to apply for Section 8 Housing Choice Vouchers as replacement subsidy for those in occupancy at the time our Disposition Application is approved.

Other: (list below)

PHAGoal: Increase assisted housing choices

Objectives:

Provide voucher mobility counseling:
The needs of the client are reviewed with them at the time of program orientation and again at their annual review. Information on voucher mobility and lists of affordable housing and participating landlords in other areas are provided. However, due to program budget cuts, we have implemented a policy restricting mobility unless the rent/payment standard is equal or less to what we currently pay on their behalf.

Conduct outreach efforts to potential voucher landlords
On an annual basis the HASLC conducts program information training to prospective and participating landlords and the community. We encourage landlords to attend the program orientation with their client.

Increase voucher payment standards
We monitor our payment standard on a monthly basis evaluating whether or not there is difficulty locating an affordable housing unit within 60 days. Due to federal funding cuts and our desire to assist as many families possible within our awarded vouchers, we are trying to keep the payment standard as low as possible. We will consider raising the payment standard if our client has a difficult time locating an affordable unit within 60 days.

Implement voucher homeownership program:
It is our intent that if our Disposition Application is approved by HUD and we receive replacement vouchers, we will utilize up to 30 of the replacement vouchers for homeownership. This concept has been discussed with the HASLC Board of Commissioners and they have approved this action.

- Implement public housing or other homeownership programs:
The HASLC is a partner with Salt Lake City Corporation and the Community Development Corporation with their Home Ownership Programs. Both agencies provide a preference to our program participants. If our Disposition Application is approved and we receive replacement vouchers, residents currently residing in public housing scattered sites will have first option to utilize their replacement voucher for homeownership.
- Implement public housing site-based waiting lists:
We are currently in the process of evaluating how we can effectively and efficiently implement site based waiting lists. We believe this will be completed within the next 6 to 12 months.
- Convert public housing to vouchers:
We plan to submit a Voluntary Conversion Application to HUD in 2007 for our 100 unit elderly public housing complex (Phillips Plaza). We believe we can demonstrate in this Application that it is more cost effective for HUD to convert this building from public housing to vouchers.
- Other: (list below)

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

- PHA Goal: Provide an improved living environment
Objectives: We improve the community, quality of life and economic vitality through strict lease enforcement, responding quickly to needed repairs, graffiti removal, working closely with the Police Department, taking an active role in the community and creating mixed income properties when possible.
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
The HASLC may offer one or more incentives to encourage families whose income would help meet the deconcentration goals of a particular development. Incentives will be created once there becomes a problem meeting our deconcentration requirements.
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
The HASLC will skip families on the waiting list to reach a family with a lower or higher income, which ever is needed to promote income mixing. We will accomplish this in a uniform and non-discriminating manner. We will continue to affirmatively market our housing to all eligible income groups without steering.

- Implement public housing security improvements:
The HASLC will continue the following:
 - Work with the Police Department with environmental design.
 - Have a police officer live at each public housing complex.
 - Remove gang graffiti from our property within 24 hours.
 - Use off-duty police officers to conduct security patrols above and beyond what the city allows.

With the decrease in administrative funds we have been forced to scale back on our security patrols. At one time we had 7 off-duty officers conducting security patrols. Last year we found the need to reduce our officers to 4. Now with the severe cuts we will need to cut back to one officer. We believe this will have a negative impact not only for our properties, but to the community as well.
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
The HASLC has a HUD approved Elderly Only Designation Plan for three of our public housing sites. They are: City Plaza located at 1992 South 200 East, Phillips Plaza, 660 South 300 East and Romney Plaza, 475 East 900 South.
- Other: (list below)

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

- PHA Goal: Promote self-sufficiency and asset development of assisted households
Objectives:
 - Increase the number and percentage of employed persons in assisted families:
The HASLC continues to provide resources to assist families in addressing barriers such as lack of child care, transportation, employment skills or education to increase the number of employed persons. We have renewed many partnerships with agencies to assist families in obtaining employment at a living wage. We continue to develop new partnerships to enhance self-sufficiency services to our residents. When funding for self-sufficiency related programs are available, the HASLC applies. Available funding and established partnerships expand the number of families we are able to serve.
 - Provide or attract supportive services to improve assistance recipients' employability:
We coordinate supportive services with community agencies for assisted families to access services such as resume writing, budgeting, and education. Provide a resident library at the Housing Authority's main office equipped with computer with internet access, fax machine, copy machine, and resources to obtain employment and supportive services.

- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
 The HASLC is partnered with Salt Lake Aging Services with their Senior Companion Program that offers clients assistance with light housekeeping, grocery shopping, cooking, and transportation to doctor appointments and pharmacies as well as companionship. Aging Services also provide our clients with weekly transportation for grocery shopping. We also partner with Aging Services through our ROSS grant where Aging Services provide case management which assists the elderly in the prevention of early institutionalization.
- Other: (list below)
 The HASLC encourages program participants to participate in our Family Self-Sufficiency (FSS) and Resident Opportunity and Support Services (ROSS) Programs. The HASLC is a member of the Utah Individual Account Network (IDA). IDA accounts are designed to assist participants in obtaining assets, specifically home ownership, education or entrepreneurship. Eligible families are referred to the network. We also provide resource information to all housing program participants to assist them in reaching their fullest potential. We have many community partners who provide services such as employment skills and job search, budgeting, education and training, parenting classes, housekeeping, life skills, GED/High School diploma, home ownership, etc.

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

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives:
 - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 The HASLC provides and will continue to provide the following:
 - Reasonable accommodations to people with disabilities in order for them to take full advantage of offered programs and services.
 - Open the Housing Choice Voucher Program to disabled individuals receiving Medicaid Waiver through the use of shared housing, or group home. This allows these individuals to move out of institutions and into the community.
 - Provide information and resources to applicants and program participants who believe they may be victims of discrimination.
 - Provide discrimination complaint forms and assist any family that believes they have suffered discrimination in completing the forms.

- Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
The HASLC shall mix its public housing development populations as much as possible with respect to ethnicity, race and income. We will also encourage Section 8 voucher recipients to move to areas of low poverty and low minority density.
- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
Larger unit sizes will be offered to people with disabilities in order to accommodate medical equipment, live-in aide and/or other special needs.
- Other: (list below)
 - The HASLC will actively support other agencies and legislation that further fair housing.
 - The HASLC will be responsive to active and open communication with local and Federal fair housing offices
 - We will continue to participate in fair housing training and presentations.
 - The HASLC will maintain good working relationships with HUD's FHEO staff.The above listed goals are in place and are on-going.

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2007
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

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

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

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

Our Plan is based on the premise that if we accomplish our goals and objectives we will be working towards the achievement of our mission and the betterment of the clientele we serve.

The plans, policies, etc. set forth in the Agency Plan all lead towards the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach towards our goals and objectives and are consistent with Salt Lake City's Consolidated Plan. Here are just a few highlights of our Annual Plan:

- **Disposition Application Submission:** The HASLC will submit to HUD a Disposition Application requesting approval for the sale of up to 313 public housing units. It is not that our public housing is obsolete, it isn't, and we are doing this for cost saving measures, more efficient management of public housing and for augmenting the affordable housing stock. The resources that will be provided from the sale of public housing will enable the HASLC to build at least 365 new affordable housing units. These units will serve homeless, elderly and families. The family units will be mixed income and will enable the agency to include some market rate units. The mix of incomes will ensure the projects financial viability for years to come. The families will be protected by the replacement vouchers assuming the vouchers will be provided. It is our intent to apply for Section 8 Vouchers as replacement subsidy for those in occupancy at the time our Disposition Application is approved.

- **Voluntary Conversion Submission:** In 2007, the HASLC will submit to HUD for approval a Voluntary Conversion Application to convert our 100 unit elderly building (Phillips Plaza) from a public housing program to a voucher program. We believe we can demonstrate in this application that it is more cost effective for HUD and the HASLC to convert this project.
- **Asset Based Management:** The HASLC have identified our public housing projects into 4 projects which HUD has approved. We are now working at separating our budgets and staffing into the 4 approved projects.
- **Project Based Waiting List:** We will develop a system for accepting applications and maintaining the waiting list on-site at the individual projects.
- **Project Base Vouchers:** The HASLC will project 60 of our existing vouchers to be used by chronically homeless individuals.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

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

Table of Contents

	<u>Page #</u>
Annual Plan	
i. Executive Summary	01
ii. Table of Contents	03
1. Housing Needs	07
2. Financial Resources	14
3. Policies on Eligibility, Selection and Admissions	15
4. Rent Determination Policies	25
5. Operations and Management Policies	30
6. Grievance Procedures	31
7. Capital Improvement Needs	32
8. Demolition and Disposition	34
9. Designation of Housing	35
10. Conversions of Public Housing	36
11. Homeownership	37
12. Community Service Programs	39
13. Crime and Safety	42
14. Pets (Inactive for January 1 PHAs)	44
15. Civil Rights Certifications (included with PHA Plan Certifications)	44
16. Audit	44
17. Asset Management	44
18. Other Information	45

Attachments

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

Required Attachments:

- E** Admissions Policy for Deconcentration
- A – ut004a07** FY 2006 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2005 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan

- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)
- D Voluntary Conversions – PIH Notice 2001-26
- F Certifications
- B Section 8 Administrative Plan
- C Performance and Evaluation Report(s) HUD 52837

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	Public housing rent determination policies, including the methodology 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
X	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
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
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
To be submitted in 10/07	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
X	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	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	1900	3	4	5	4	5	N/A
Income >30% but <=50% of AMI	4975	3	4	3	3	3	N/A
Income >50% but <80% of AMI	5025	2	2	3	3	3	N/A
Elderly	935	3	2	3	4	3	N/A
Families with Disabilities	2045	3	3	3	4	4	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A

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

- Consolidated Plan of the Jurisdiction/s
Indicate year: 2005/06
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:

Other sources: (list and indicate year of information)

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input checked="" type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	6377		
Extremely low income <=30% AMI	5070	80%	
Very low income (>30% but <=50% AMI)	1154	18%	
Low income (>50% but <80% AMI)	153	2%	
Families with children	3653	57%	
Elderly families	248	4%	
Families with Disabilities	1361	21%	
Race/ethnicity W	5233	82%	
Race/ethnicity B	384	6%	
Race/ethnicity H	553	9%	
Race/ethnicity O	207	3%	

Housing Needs of Families on the Waiting List			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	646	10%	
2 BR	1104	17%	
3 BR	241	4%	
4 BR	130	2%	
5 BR	15	.23%	
5+ BR	N/A	N/A	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

C. Strategy for Addressing Needs

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

The HASLC's strategy for addressing the housing needs of families in our jurisdiction and on our waiting list is to provide as much safe, decent, affordable and accessible housing as possible. We will submit to HUD a Disposition Application asking to sell 313 public housing units. The HASLC has determined the disposition of the identified public housing units to be appropriate and in the best interest of our residents, the community and our agency. The resources that will be provided from the sale of the housing should enable us to build at least 420 new affordable housing units. These units will serve homeless, elderly and families. The family units will be mixed income and will enable the agency to include some market rate rents. The mix of incomes will ensure the projects financial viability for years to come. Once our Disposition Application is approved we will apply for vouchers. Assuming the vouchers will be provided, the families will be protected from rent burdens. The HASLC will not proceed without an adequate commitment of vouchers.

The reason for choosing this strategy is cost driven. All of our public housing for families are either scattered sites (houses and duplexes) or very small apartment complexes the largest being 48 units. It is difficult and expensive to appropriately manage under the new requirements, small complexes and scattered sites as public housing. It would be more cost effective to manage a larger building, anywhere from

85 units to 300 units than it is to manage 313 units spread throughout the City. The HASLC has considerable experience in developing such housing projects and have been extremely successful in serving the low income population in Salt Lake City.

We will respond to any and all HUD notices of funding availability that increases affordable housing, housing subsidy, and/or support services. We conduct annual landlord briefings to encourage participation in the Section 8 Voucher program and we are currently under construction of a 100 unit permanent housing complex for chronically homeless individuals.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

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

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing

- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)

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

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

Select all that apply

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

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

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

Select all that apply

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

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)
 - Rehabilitate existing units to handicap accessible when funds are available.
 - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.
 - Allow for shared housing and group home settings with use of Section 8 Vouchers.

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

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

Select if applicable

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

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)
 - Actively support legislation and other agencies in furthering fair housing.

- Responsive with active and open communication with local and federal fair housing offices.
- Participate in Fair Housing presentations and training.
- Work closely with HUD FHEO staff.

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

(2) Reasons for Selecting Strategies

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

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

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

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

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2005 grants)		
a) Public Housing Operating Fund	1,043,060	
b) Public Housing Capital Fund	906,436	
c) HOPE VI Revitalization	-0-	
d) HOPE VI Demolition	-0-	
e) Annual Contributions for Section 8 Tenant-Based Assistance	11,862,180 947,914	Vouchers Mod-Rehab
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	-0-	
g) Resident Opportunity and Self-Sufficiency Grants	97,317 77,160	FSS ROSS
h) Community Development Block Grant	-0-	
i) HOME	-0-	
Other Federal Grants (list below)		
	375,146	VA Per-Diem
2. Prior Year Federal Grants (unobligated funds only) (list below)		
	101,863	Supportive Housing
	145,000	HOPWA
	531,263	Shelter Plus Care
3. Public Housing Dwelling Rental Income		

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
	1,670,487	PH Operations
4. Other income (list below)		
	24,500	PH Operations
4. Non-federal sources (list below)		
Total resources	17,782,326	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
 - Ninety days
- Other: (describe)

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

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)
 - Previous and current landlord references
 - Credit history

- c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

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

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

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

- PHA main administrative office
 PHA development site management office
 Other (list below)

Currently applications may be obtained at a number of different locations, such as: Aging Services, Independent Living Center, Community Action Program (CAP), Workforce Services, etc. All applications received from other locations must be submitted to the HASLC’s main office to be added to the waiting list. This will change as we move toward site based waiting lists. We hope to complete this process by the end of summer 2007.

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

1. How many site-based waiting lists will the PHA operate in the coming year? 4

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? 4

3. Yes No: May families be on more than one list simultaneously
 If yes, how many lists? 2

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)

It will be our intent that all the above will be true and correct once we have implemented site-based waiting lists. This won't apply for public housing families should HUD approve our Disposition Application.

(3) Assignment

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

- One
- Two
- Three or More

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

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA: This does not apply for the Section 8 program, only public housing. For public housing it could be more or less offers, it would depend on the number of vacancies. We will offer as many

(4) Admissions Preferences

a. Income targeting:

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

b. Transfer policies:

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

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

If the resident needs to be closer to family support, place of employment or child care provider to enable the resident to maintain their employment, a transfer will be granted.

Other: (list below)

c. Preferences

1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)

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

Former Federal preferences:

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

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans’ families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)
We will provide a local preference to Law enforcement personnel and successful graduates of the HASLC’s and other homeless agencies Transitional Housing Programs.

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either

through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

1 Date and Time

1 Working families, and those who are unable to work because of age or disability.

1 Those currently enrolled in educational training or upward mobility programs.

1 Households that contribute to meeting income requirements (targeting).

1 Households that contribute to meeting income goals (broad range of incomes).

2 Law enforcement personnel and successful graduates of the HASLC’s and other homeless agencies Transitional Housing programs.

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

Victims of domestic violence

Substandard housing

Homelessness

High rent burden

Other preferences (select all that apply)

Working families and those unable to work because of age or disability

Veterans and veterans’ families

Residents who live and/or work in the jurisdiction

Those enrolled currently in educational, training, or upward mobility programs

Households that contribute to meeting income goals (broad range of incomes)

Households that contribute to meeting income requirements (targeting)

Those previously enrolled in educational, training, or upward mobility programs

Victims of reprisals or hate crimes

Other preference(s) (list below)

Law enforcement personnel and successful graduates of the HASLC’s and other homeless agencies Transitional Housing programs.

4. Relationship of preferences to income targeting requirements:

The PHA applies preferences within income tiers

Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

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

The PHA-resident lease

The PHA’s Admissions and (Continued) Occupancy policy

PHA briefing seminars or written materials

Other source (list)

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

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

(6) Deconcentration and Income Mixing

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

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

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

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

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

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

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

Other (list below)

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

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

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

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

B. Section 8

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

(1) Eligibility

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

- Criminal or drug-related activity only to the extent required by law or regulation
 Criminal and drug-related activity, more extensively than required by law or regulation
 More general screening than criminal and drug-related activity (list factors below)
 Other (list below)
Those who have or are participating in a federally subsidized housing program that owes either the PHA or landlord money based on their program participation.

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

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

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

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- Criminal or drug-related activity
 Other (describe below)
Current and previous landlord's name, address and phone number.

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- None
 Federal public housing
 Federal moderate rehabilitation
 Federal project-based certificate program
 Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

- PHA main administrative office
 Other (list below)

Applications may be obtained at several locations such as the Department of Workforce Services, State of Utah Department of Human Services Division of Services for People with Disabilities, Community Action Program (CAP), Independent Living Center, Aging Services, the HASLC web site, etc. All applications must be returned to the HASLC before they are placed on the waiting list.

(3) Search Time

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

If yes, state circumstances below:

- If client can demonstrate that they have looked but unable to find anything.
- If client was ill or hospitalized.
- Accommodating for a disability.

(4) Admissions Preferences

a. Income targeting

Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)

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

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- The preference will be given for the 60 project based vouchers targeted to homeless/disabled individuals wanting to participate in the program.
- High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

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

A local preference will be given to those terminated due to insufficient funding in order to put them back on the program when funding becomes available.

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

1 Date and Time

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
Victims of domestic violence
Substandard housing

- 1 Homelessness, for the 60 project based vouchers targeted to homeless individuals wanting to participate in the program.
High rent burden

Other preferences (select all that apply)

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

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

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

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

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

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

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

(5) Special Purpose Section 8 Assistance Programs

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

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

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

- Through published notices
 Other (list below)
Reports to the Resident Advisory Board, Resident Council, specialized organizations, advocacy groups and the HASLC web site.

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

The hardship requirements established by HUD.

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

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

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

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

- For the earned income of a previously unemployed household member
 For increases in earned income
 Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

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

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

e. Ceiling rents

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

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

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

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

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

- Market comparability study
- Fair market rents (FMR)
- 95th percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

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

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

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

(2) Flat Rents

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

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

B. Section 8 Tenant-Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)
Right now we have more control on rents being charged through rent reasonable testing.

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

- Annually
- Other (list below)
At a minimum we evaluate quarterly.

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

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

(2) Minimum Rent

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

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

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

The HASLC Board adopted the five hardship criteria established by HUD.

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

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

B. HUD Programs Under PHA Management

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

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

--	--	--

C. Management and Maintenance Policies

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

- (1) Public Housing Maintenance and Management: (list below)
- (2) Section 8 Management: (list below)

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

A. Public Housing

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

If yes, list additions to federal requirements below:

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

B. Section 8 Tenant-Based Assistance

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office
 Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. Capital Fund Activities

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

(1) Capital Fund Program Annual Statement

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) utoo4a07

-or-

- The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

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

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

b. If yes to question a, select one:

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

or-

- The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

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

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

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

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

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

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

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

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

It is our plan to submit a Disposition Application to HUD requesting to sell 313 of our public housing properties. Once the application is approved we will apply for relocation vouchers. We will use proceeds from the sale to purchase property where we will build affordable replacement housing. We expect to double the number of units sold and intend on building mixed income developments. This will keep the buildings financially self sustaining.

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

Demolition/Disposition Activity Description
1a. Development name: Public Housing 1b. Development (project) number: UT06P004003, UT06P004005, UT06P004007, UT06P004008, UT06P004009, UT06P005010, UO06P004011, UT06P005012, UT06P004013, UT06P004014, UT06P004017, UT06P004018, UT06P004020, UT06P004024, UT06P004027, UT06P004028, UT06P004029, UT06P004031
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (30/11/06)
5. Number of units affected: 313
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity:

- a. Actual or projected start date of activity: Immediately upon Disposition Application approval from HUD.
- b. Projected end date of activity: We intend to complete in stages expecting it to take approximately 3 to 5 years.

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

Designation of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly <input type="checkbox"/>	
Occupancy by families with disabilities <input type="checkbox"/>	
Occupancy by only elderly families and families with disabilities <input type="checkbox"/>	
3. Application status (select one)	
Approved; included in the PHA’s Designation Plan <input type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	

Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected: 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

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

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

2. Activity Description

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

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

status)

- Conversion Plan in development
- Conversion Plan submitted to HUD on: (DD/MM/YYYY)
- Conversion Plan approved by HUD on: (DD/MM/YYYY)
- Activities pursuant to HUD-approved Conversion Plan underway

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

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

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937 The HASLC intends to submit to HUD a application for voluntary conversion of our 100 unit senior high-rise, Phillips Plaza, from a public housing project to a Section 8 program. Our preliminary calculations show it is more cost effective for both HUD and the HASLC to covert this project. We plan to submit this application in 2007.

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

1. Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for

each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

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

B. Section 8 Tenant Based Assistance

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

high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

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

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

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

b. PHA-established eligibility criteria

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

If yes, list criteria below:

Chronically homeless individuals.

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (1)]

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

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

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

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

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

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

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

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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

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

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

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

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

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

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

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

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

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

C. Coordination between PHA and the police

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

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

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

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2005 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

- Yes No: Has the PHA included the PHDEP Plan for FY 2005 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

The Pet Policy has been previously submitted.

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

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

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

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

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and

other needs that have **not** been addressed elsewhere in this PHA Plan?

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

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

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

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

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

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

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

The Resident Advisory Board and visitors stated they are in support of the HASLC's one and five year plan and support the HA's decision to move forward with the Disposition application to sell 313 public housing units. They support the notion by doing this; affordable housing will increase in numbers giving more families, the elderly and disabled an opportunity to receive affordable housing. Because of ongoing discussion throughout the year, no questions or further discussion was needed. The Agency Plan was accepted as presented with all voting "Aye".

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

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

- Other: (list below)
No comments were made that required consideration of change. The RAB accepted the Plan as written.

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

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)
 HASLC Board of Commissioners
 Salt Lake City Mayor
 Salt Lake City Council members

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (Salt Lake City)
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
 - Provide affordable housing to the extent possible.
 - Work with the City on its goal to eliminate homelessness within the next 10 years by providing permanent housing to homeless and chronically homeless individuals.
 - Continue to partner with the City's First Time Home Buyers Program by providing up to 30 Section 8 Voucher to our clients eligible and wanting to participate in the City's program and continue providing referrals from our Family Self-Sufficiency Program.
- Other: (list below)

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

. Other Information Required by HUD

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

**RESIDENT ADVISORY BOARD MEMBERS
FOR
The Housing Authority of Salt Lake City
2006**

Thelma Labenski (Chair)
475 East 900 South
Salt Lake City, Utah 84111
(801) 364-3865

Bonnie Sawaya
660 South 300 East #807
Salt Lake City, Utah 84111
(801) 364-8432

Montrease Stone (Treasurer)
134 Hampton Ave
Salt Lake City, Utah 84111
(801) 364-4808

Douglas Sterling
1099 S West Temple #B106
Salt Lake City, Utah 84101
(801) 328-0751

Melissa Trask
3851 W Cobble Ridge #4-10
Salt Lake City, Utah 84084
(801) 260-1416

Ralph Lorange
1992 South 200 East #624
Salt Lake City, Utah 84115
No Phone

Ken Henline (Vice Chair)
524 Wilson Ave
Salt Lake City, Utah 84105
(801) 328-2875 Cell (801) 688-6938

Margaret Olivas
1099 S West Temple #B105
Salt Lake City, Utah 84101
Phone Number not Available

RESIDENT BOARD MEMBER

Douglas Sterling
1099 South West Temple #B106
Salt Lake City, Utah 84115

(801) 328-0751

Attachments

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

PHA Plan Table Library

Component 7 Capital Fund Program Annual Statement Parts I, II, and II

Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
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	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	
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	

Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

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

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years				

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing and Urban Development

OMB Approval No. 2577-0157 (7/98)

Comprehensive Grant Program (CGP)

Part I: Summary

Office of Public and Indian Housing

HA Name HOUSING AUTHORITY OF SALT LAKE CITY	Comprehensive Grant Number 501	FFY of Grant Approval 2007
---	--	--------------------------------------

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number _____ Performance and Evaluation Report for Program Year Ending _____
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (may not exceed 10% of 19)	\$70,567.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$73,248.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$74,187.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$14,140.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$94,500.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$309,862.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$10,800.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$39,516.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
17	1498 Mod Used for Development	\$0.00	\$0.00	\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of 19)	\$55,050.00	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$741,870.00	\$0.00	\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$10,000.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$40,000.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$5,000.00	\$0.00	\$0.00	\$0.00

\$0.00

\$0.00

\$0.00
\$0.00

Signature of Executive Director and Date X	Signature of Public Housing Director or Office of Native American Programs Administrator & Date: X
---	---

\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00

\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00

\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
HA-Wide Mgmt. Improvmts	Computer upgrades	1408		\$0.00	\$0.00	\$0.00	\$0.00	
"	Preventative Maintenance Improvement	"		\$68,248.00	\$0.00	\$0.00	\$0.00	
"	Procurement Improvement	"		\$0.00	\$0.00	\$0.00	\$0.00	
"	Training for Mod. and Maint.	"		\$5,000.00	\$0.00	\$0.00	\$0.00	
"	5) Item 5	"		\$0.00	\$0.00	\$0.00	\$0.00	
"	6) Item 6	"		\$0.00	\$0.00	\$0.00	\$0.00	
"	7) Item 7	"		\$0.00	\$0.00	\$0.00	\$0.00	
			Total 1408	\$73,248.00	\$0.00	\$0.00	\$0.00	
HA-Wide Admin	Funding for MCR Staff @ 10% of the annual grant amount	1410		\$74,187.00	\$0.00	\$0.00	\$0.00	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount	1430		\$14,140.00	\$0.00	\$0.00	\$0.00	
HA-Wide	Nonroutine vacancy prep.	1460		\$78,117.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine repairs, force account, paint c	1460		\$71,245.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement & Maint. Equipment	1475		\$39,516.00	\$0.00	\$0.00	\$0.00	
"	Demolition (specify location[s])	1485		\$0.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

X

X

(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

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

Development Number/ Name	General Description of Major Work Categories	Development Account	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
						Funds	Funds	

HA-Wide Activities		Number		Original	Revised (1)	Obligated (2)	Expended (2)
UT402 City Plaza	Site: Landscape and parking improvements	1450		\$86,000.00	\$0.00	\$0.00	\$0.00
			Total Site:	\$86,000.00	\$0.00	\$0.00	\$0.00
	Mechanical and Electrical: Plumbing and HVAC	1460		\$15,000.00	\$0.00	\$0.00	\$0.00
			Total M&E:	\$15,000.00	\$0.00	\$0.00	\$0.00
	Building Exterior:	1460		\$0.00	\$0.00	\$0.00	\$0.00
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00
	Dwelling Units: Kitchens	1460		\$87,500.00 \$0.00	\$0.00	\$0.00	\$0.00
			Total DUs:	\$87,500.00	\$0.00	\$0.00	\$0.00
	Dwelling Equipment:	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
	Interior Common Areas:	1470		\$0.00 \$0.00	\$0.00	\$0.00	\$0.00
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00	
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00	
Total, City Plaza			Project Total:	\$188,500.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

X

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

X

(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

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing and Urban Development
OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT403 Central City	Site: Parking lot crack seal	1450		\$0.00 \$1,000.00	\$0.00	\$0.00	\$0.00	

Mechanical and Electrical: Hvac	1460	Total Site:	\$1,000.00	\$0.00	\$0.00	\$0.00
			\$1,000.00	\$0.00	\$0.00	\$0.00
Building Exterior: Paint and siding	1460	Total M&E:	\$1,000.00	\$0.00	\$0.00	\$0.00
			\$1,000.00	\$0.00	\$0.00	\$0.00
Dwelling Units: Kitchen and bath cabinets	1460	Total B.E.:	\$1,000.00	\$0.00	\$0.00	\$0.00
		1	\$1,000.00	\$0.00	\$0.00	\$0.00
Dwelling Equipment: None	1465.1	Total DUs:	\$1,000.00	\$0.00	\$0.00	\$0.00
			\$0.00	\$0.00	\$0.00	\$0.00
Interior Common Areas: None	1470	Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
			\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities: None	1470	Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
			\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475	Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
			\$0.00	\$0.00	\$0.00	\$0.00
Total, Central City		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
		Project Total:	\$4,000.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT405 American	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None		1460		\$0.00	\$0.00	\$0.00	\$0.00
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	

		Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Units:						
None	1460		\$0.00	\$0.00	\$0.00	\$0.00
		Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Equipment:						
None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
		Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Interior Common Areas:						
None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities:						
None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment:						
None	1475		\$0.00	\$0.00	\$0.00	\$0.00
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, American		Project Total:	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

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)	
UT406 Phillips Plaza	Site:	1450	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Parking lot crack seal							
	Mechanical and Electrical:	1460	Total Site:	\$1,000.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior:	1460	Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units:	1460	Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
			\$0.00	\$0.00	\$0.00	\$0.00		

	Dwelling Equipment:	1465.1	Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00
			\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas:	1470	Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
	Rated doors at stairwells		\$9,800.00	\$0.00	\$0.00	\$0.00	
			\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities:	1470	Total ICAs:	\$9,800.00	\$0.00	\$0.00	\$0.00
			\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment:	1470	Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
		1	\$0.00	\$0.00	\$0.00	\$0.00	
Total, Phillips		Project Total:	\$10,800.00	\$0.00	\$0.00	\$0.00	
Signature of Executive Director and Date				Signature of Public Housing Director or Office of Native American Programs Administrator and Date			
X				X			

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT407 Scattered Sites	Site: Landscape , fencing, asphat & concrete	1450	2	\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: Furnaces & electrical	1460		\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: Siding	1460	2	\$333.00	\$0.00	\$0.00	\$0.00	
	Roofing		2	\$333.00				
	Windows		2	\$334.00				
		Total B.E.:		\$1,000.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: Cabinets	1460	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
		Total DUs:		\$1,000.00	\$0.00	\$0.00	\$0.00	
Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00		
	Total D.E.:		\$0.00	\$0.00	\$0.00	\$0.00		

None	1470		\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities:		Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Storage	1470	1	\$1,000.00	\$0.00	\$0.00	\$0.00
		Total SWFs:	\$1,000.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment:						
None	1475		\$0.00	\$0.00	\$0.00	\$0.00
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Scattered		Project Total:	\$5,000.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT408/412 Faultline Apartments	Site: Parking lot crack seal	1450	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: Furnaces & electric	1460	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: Siding, fencing, roofing	1460	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: Kitchens & baths	1460	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00		

	Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Faultline			Project Total:	\$4,000.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
Ut409 Scattered Sites	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00	
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00	

Total, Scattered		Project Total:	\$0.00	\$0.00	\$0.00	\$0.00
-------------------------	--	-----------------------	---------------	---------------	---------------	---------------

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
 ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing and Urban Development OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT410 Scattered Sites	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Scattered			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

X

X

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
 and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT411 Scattered Sites	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Scattered			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

X

X

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
 and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

UT414 Peery House	Site: Parking lot crack seal	1450	1	\$1,000.00	\$0.00	\$0.00	\$0.00
	Total Site:			\$1,000.00	\$0.00	\$0.00	\$0.00
	Mechanical and Electrical: HVAC and plumbing	1460	1	\$1,000.00 \$0.00 \$0.00	\$0.00	\$0.00	\$0.00
	Total M&E:			\$1,000.00	\$0.00	\$0.00	\$0.00
	Building Exterior: Siding and paing	1460		\$1,000.00	\$0.00	\$0.00	\$0.00
	Total B.E.:			\$1,000.00	\$0.00	\$0.00	\$0.00
	Dwelling Units: Kitchens and baths	1460		\$1,000.00 \$0.00	\$0.00	\$0.00	\$0.00
	Total DUs:			\$1,000.00	\$0.00	\$0.00	\$0.00
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
	Total D.E.:			\$0.00	\$0.00	\$0.00	\$0.00
	Interior Common Areas: None	1470	1	\$0.00	\$0.00	\$0.00	\$0.00
	Total ICAs:			\$0.00	\$0.00	\$0.00	\$0.00
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
	Total SWFs:			\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00	
Total NDE:			\$0.00	\$0.00	\$0.00	\$0.00	
Total, Peery	Project Total:		\$4,000.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

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)	
UT415 Romney Plaza	Site: Parking lot crack seal	1450	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Total Site:			\$1,000.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: Emergency generator	1460	1	\$40,000.00 \$0.00	\$0.00	\$0.00	\$0.00	

	1460		\$0.00 \$0.00				
Building Exterior: None	1460	Total M&E:	\$40,000.00	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Units:	1460	Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Equipment: None	1465.1	Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Interior Common Areas:	1470	Total D.E.:	\$0.00 \$0.00 \$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities: None	1470	Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475	Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total, Romney		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		Project Total:	\$41,000.00	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT417 Mead/Amer	Site:	1450			\$0.00	\$0.00	\$0.00	
	Total Site:				\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical:	1460			\$0.00	\$0.00	\$0.00	
	Total M&E:				\$0.00	\$0.00	\$0.00	
Building Exterior:	1460			\$0.00	\$0.00	\$0.00		

		Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00
		Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
		Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Mead/Amer		Project Total:	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT418 Red,330,Pc	Site: Parking lot crack seal	1450	3	\$0.00 \$1,000.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: HVAC & plumbing	1460	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: Siding, fencing, roofing	1460	1	\$1,000.00 \$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: Flooring	1460	1	\$1,000.00 \$0.00	\$0.00	\$0.00	\$0.00	
		Total DUs:	\$1,000.00	\$0.00	\$0.00	\$0.00		

Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
		Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Red,330,Pc		Project Total:	\$4,000.00	\$0.00	\$0.00	\$0.00

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

X **X**

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

**U. S. Department of Housing
and Urban Development**

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT420 Pacific Hts	Site: Parking lot crack seal	1450	2	\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: HVAC & Plumbing	1460		\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: Paint, stucco	1460		\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: Kitchens	1460	1	\$1,000.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$1,000.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment:	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas:							

None	1470	Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities: None	1470	Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475	Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Pacific Hts		Project Total:	\$4,000.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

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)	
UT424 Scattered Sites	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	

Total, Scattered	Nondwelling Equipment: None	1475	Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00	\$0.00
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

OMB Approval No. 2577-0157 (7/31/98)

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

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)	
UT427 Scattered Sites	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Scattered			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
 ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
 and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT428 Scattered Sites	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Scattered			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing and Urban Development OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
UT429 Scattered Sites	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Scattered			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing and Urban Development OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

and Urban Development

Office of Public and Indian Housing

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)	
UT431 Scattered Sites	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Scattered			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

X

X

(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

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

Development Number/ Name HA-Wide	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)	

Activities							
HA-Wide Offices 1776so.	Site: Parking lot repairs	1450	1	\$500.00	\$0.00	\$0.00	\$0.00
			Total Site:	\$500.00	\$0.00	\$0.00	\$0.00
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
	Nondwelling Equipment:	1475		\$0.00 \$0.00	\$0.00	\$0.00	\$0.00
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00	
Total, Offices		Project Total:	\$500.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

OMB Approval No. 2577-0157 (7/31/98)

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

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)	
XX Y-22 Anywhere Homes	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical:		Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	

None	1460		\$0.00	\$0.00	\$0.00	\$0.00
Building Exterior:		Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00
None	1460		\$0.00	\$0.00	\$0.00	\$0.00
		Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Units:						
None	1460		\$0.00	\$0.00	\$0.00	\$0.00
		Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Equipment:						
None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
		Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Interior Common Areas:						
None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities:						
None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment:						
None	1475		\$0.00	\$0.00	\$0.00	\$0.00
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Anywhere		Project Total:	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing and Urban Development
OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
XX Y-23 Anywhere Homes	Site:	1450		\$0.00	\$0.00	\$0.00	\$0.00	
	None			\$0.00	\$0.00	\$0.00	\$0.00	
	Total Site:		\$0.00	\$0.00	\$0.00	\$0.00		
	Mechanical and Electrical:	1460		\$0.00	\$0.00	\$0.00	\$0.00	
None			\$0.00	\$0.00	\$0.00	\$0.00		
Total M&E:		\$0.00	\$0.00	\$0.00	\$0.00			
Building Exterior:	1460		\$0.00	\$0.00	\$0.00	\$0.00		
None			\$0.00	\$0.00	\$0.00	\$0.00		

		Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00
		Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00
Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
		Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Anywhere		Project Total:	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

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)	
XX Y-24 Anywhere Homes	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	

Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00
		Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00
Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Anywhere		Project Total:	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

X

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

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
XX Y-25 Anywhere Homes	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00		

Site-Wide Facilities: None	1470	Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00
Nondwelling Equipment: None	1475	Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
		Project Total:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Anywhere			\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
 ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
 and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

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)	
XX Y-26 Anywhere Homes	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460	Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460	Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460	Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1	Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470	Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470	Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	

	Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00
Total, Anywhere			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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

X

X

(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

Page ___ of ___

form HUD-52837 (10/96)
ref Handbook 7485.3

OMB Approval No. 2577-0157 (7/31/98)

Annual Statement /Performance and Evaluation Report

**U. S. Department of Housing
and Urban Development**

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

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)	
XX Y-27 Anywhere Homes	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00	
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00	

Total, Anywhere		Project Total:	\$0.00	\$0.00	\$0.00	\$0.00
------------------------	--	-----------------------	---------------	---------------	---------------	---------------

Signature of Executive Director and Date

X

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

X

(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

Page ___ of ___

form HUD-52837 (10/96)
 ref Handbook 7485.3

Annual Statement /Performance and Evaluation Report

**U. S. Department of Housing
 and Urban Development**

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
XX Y-28 Anywhere Homes	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00	
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00	
Total, Anywhere			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
 and Urban Development

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

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)	
XX Y-29 Anywhere Homes	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Anywhere			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

and Urban Development

Office of Public and Indian Housing

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)	
XX Y-30 Anywhere Homes	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00		
		Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00		
Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00		
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00		
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Anywhere			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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

X

X

(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

Comprehensive Grant Program (CGP) **Part III: Implementation Schedule**

Office of Public and Indian Housing

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Computer upgrades							
Preventative Maintenance Improvement	07/16/2009			07/16/2011			
Procurement Improvement	07/16/2009			07/16/2011			
Training for Mod. and Maint.	07/16/2009			07/16/2011			
5) Item 5							
6) Item 6							
7) Item 7							
#REF!							
HA-Wide Nonroutine vacancy prep.	07/16/2009			07/16/2011			
" Nonroutine repairs, force account	07/16/2009			07/16/2011			
" Appliances							
" Vehicle replacement & Maint. Eq	07/16/2009			07/16/2011			
" Demolition (specify location[s])							
UT402 City Plaza	07/16/2009			07/16/2011			
UT403 Central City	07/16/2009			07/16/2011			
UT405 American	07/16/2009			07/16/2011			
UT406 Phillips	07/16/2009			07/16/2011			
UT407 Scattered	07/16/2009			07/16/2011			
UT408/412 Faultline	07/16/2009			07/16/2011			
Ut409 Scattered	07/16/2009			07/16/2011			
UT410 Scattered	07/16/2009			07/16/2011			
UT411 Scattered	07/16/2009			07/16/2011			
UT413 Scattered	07/16/2009			07/16/2011			
UT414 Peery	07/16/2009			07/16/2011			
UT415 Romney	07/16/2009			07/16/2011			
UT417 Mead/Amer	07/16/2009			07/16/2011			
UT418 Red,330,Pc	07/16/2009			07/16/2011			
UT420 Pacific Hts	07/16/2009			07/16/2011			
UT424 Scattered	07/16/2009			07/16/2011			
UT427 Scattered	07/16/2009			07/16/2011			
UT428 Scattered	07/16/2009			07/16/2011			

Signature of Executive Director and Date

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

X

X

(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

Comprehensive Grant Program (CGP)

Part III: Implementation Schedule

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
UT429 Scattered	07/16/2009			07/16/2011			
UT431 Scattered	07/16/2009			07/16/2011			
HA-Wide Offices	07/16/2009			07/16/2011			
XX Y-22 Anywhere							
XX Y-23 Anywhere							
XX Y-24 Anywhere							
XX Y-25 Anywhere							
XX Y-26 Anywhere							
XX Y-27 Anywhere							
XX Y-28 Anywhere							
XX Y-29 Anywhere							
XX Y-30 Anywhere							

Signature of Executive Director and Date

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

X

X

(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

ref. Handbook 7485.3
0157 (7/31/98)

at Dates (3)

form HUD-52837 (10/96)
ref. Handbook 7485.3

Five-Year Action Plan
Part I: Summary
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name: Housing Authority of Salt Lake City		Locality: (City/County & State) Salt Lake City, Utah				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No:
A. Development Number/Name	Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06	Work Statement for Year 3 FFY: '07	Work Statement for Year 4 FFY: '08	Work Statement for Year 5 FFY:'09	
Ut 402 City Plaza	See Annual Statement	\$65,500	\$63,000	\$143,000	\$96,000	
UT 403 Central City		\$129,000	\$149,500	\$21,500	\$16,500	
UT 405 Scattered Sites		\$10,000	\$0	\$1,000	\$0	
UT 406 Phillips Plaza		\$18,000	\$10,800	\$56,000	\$108,000	
UT 407 Scattered Sites		\$47,700	\$50,000	\$20,000	\$15,000	
UT 408/412 Faultline Apartments		\$8,000	\$2,000	\$19,000	\$1,000	
UT 409 Scattered Sites		\$0	\$0	\$0	\$0	
UT 410 Scattered Sites		\$0	\$0	\$0	\$0	
HA-Wide Contingency @ X%		\$45,871	\$44,771	\$32,071	\$41,071	
B. Physical Improvements Subtotal			\$436,871	\$436,871	\$436,871	\$436,871
C. Management Improvements		\$113,396	\$113,396	\$113,396	\$113,396	
D. HA-Wide Nondwelling Structures & Equipment		\$211,774	\$211,774	\$211,774	\$211,774	
E. Administration		\$90,572	\$90,572	\$90,572	\$90,572	
F. Other (Fees & Costs and Relocation)		\$12,000	\$12,000	\$12,000	\$12,000	
G. Operations		\$10,000	\$10,000	\$10,000	\$10,000	
H. Demolition		\$0	\$0	\$0	\$0	
I. Replacement Reserve		\$0	\$0	\$0	\$0	
J. Mod Used for Development		\$0	\$0	\$0	\$0	
K. Total CGP Funds		\$874,613	\$874,613	\$874,613	\$874,613	
L. Total Non-CGP Funds		\$0	\$0	\$0	\$0	
M. Grand Total		\$874,613	\$874,613	\$874,613	\$874,613	
Signature of Executive Director and Date: X			Signature of Public Housing Director/Office of Native American Programs Administrator and Date: X			

Five-Year Action Plan
Part I: Summary (Continuation)

U.S. Department of Housing
and Urban Development

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Comprehensive Grant Program (CGP)

HA Name:		Locality: (City/County & State)				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No:
Housing Authority of Salt Lake City		Salt Lake City, Utah				
A. Development Number/Name	Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06	Work Statement for Year 3 FFY: '07	Work Statement for Year 4 FFY: '08	Work Statement for Year 5 FFY: '00	
UT 411 Scattered Sites		\$0	\$0	\$0	\$0	
UT 413 Scattered Sites		\$0	\$0	\$0	\$0	
UT 414 Peery House		\$4,000	\$18,000	\$70,500	\$61,500	
UT 415 Romney Plaza	See	\$21,000	\$17,000	\$6,000	\$30,000	
UT 417 Mead and American Area		\$0	\$5,000	\$12,000	\$0	
UT 418 Redwood, Pacific, 330 N	Annual	\$65,800	\$56,800	\$31,800	\$56,800	
UT 420 Pacific Heights		\$20,000	\$18,000	\$9,000	\$9,000	
UT 424 Scattered Sites	Statement	\$0	\$0	\$0	\$0	
UT 427 Scattered Sites		\$0	\$0	\$0	\$0	
UT 428 Scattered Sites		\$0	\$0	\$0	\$0	
UT 429 Scattered Sites		\$0	\$0	\$0	\$0	
UT 431 Scattered Site		\$0	\$0	\$0	\$0	
OFFICE AND MAINTENANCE BLDG		\$2,000	\$2,000	\$15,000	\$2,000	
XX Y-22, Anywhere Homes		\$0	\$0	\$0	\$0	
XX Y-23, Anywhere Homes		\$0	\$0	\$0	\$0	
XX Y-24, Anywhere Homes		\$0	\$0	\$0	\$0	
XX Y-25, Anywhere Homes		\$0	\$0	\$0	\$0	
XX Y-26, Anywhere Homes		\$0	\$0	\$0	\$0	
XX Y-27, Anywhere Homes		\$0	\$0	\$0	\$0	
XX Y-28, Anywhere Homes		\$0	\$0	\$0	\$0	
XX Y-29, Anywhere Homes		\$0	\$0	\$0	\$0	
XX Y-30, Anywhere Homes		\$0	\$0	\$0	\$0	

112800

116800

144300

159300

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	HA-Wide Physical Improvements HA-WIDE Site: None		\$0	HA-Wide Physical Improvements HA-WIDE Site:	
		Total Site:	\$0		Total Site:
	ON-DEMAND Mechanical and Electrical: None		\$0	ON-DEMAND Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	ON-DEMAND Building Exterior: None		\$0	ON-DEMAND Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	ON-DEMAND Dwelling Units: Non-routine vacancy preparation		\$76,042	ON-DEMAND Dwelling Units: Non-routine vacancy preparation	
		Total DUs:	\$76,042		Total DUs:
	HA-WIDE Dwelling Equipment: None		\$0	HA-WIDE Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
HA-WIDE Interior Common Areas: Paint		\$97,732	HA-WIDE Interior Common Areas: Paint		
	Total ICAs:	\$97,732		Total ICAs:	
HA-WIDE Site-Wide Facilities: None		\$0	HA-WIDE Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
HA-WIDE Nondwelling Equipment: Vehicle and Maintenance Equipment		\$38,000	HA-WIDE Nondwelling Equipment: Vehicle and Maintenance Equipment		

Total NDE: \$38,000

Total NDE:

Subtotal of Estimated Cost \$211,774

Subtotal of Estimated Cost

Page ___ of ___

form HUD-5:

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 0	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	HA-Wide Physical Improvements HA-WIDE Site: None		\$0	HA-Wide Physical Improvements HA-WIDE Site: None	
		Total Site:	\$0		Total Site:
	ON-DEMAND Mechanical and Electrical: None		\$0	ON-DEMAND Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	ON-DEMAND Building Exterior: None		\$0	ON-DEMAND Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	ON-DEMAND Dwelling Units: Non-routine vacancy preparation		\$76,042	ON-DEMAND Dwelling Units: Non-routine vacancy preparation	
		Total DUs:	\$76,042		Total DUs:
	HA-WIDE Dwelling Equipment: None		\$0	HA-WIDE Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
HA-WIDE Interior Common Areas: Paint		\$97,732	HA-WIDE Interior Common Areas: Paint		
	Total ICAs:	\$97,732		Total ICAs:	
HA-WIDE Site-Wide Facilities: None		\$0	HA-WIDE Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	

	HA-WIDE Nondwelling Equipment: Vehicle and Maintenance Equipment		\$38,000	HA-WIDE Nondwelling Equipment: Vehicle and Maintenance Equipment	
		Total NDE:	\$38,000		Total NDE:
	Subtotal of Estimated Cost		\$211,774	Subtotal of Estimated Cost	

Page ___ of ___

form HUD-5:

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
Ut 402 City Plaza	Site: Parking lot	1	\$1,000	Site: Parking lot	1
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical: Lighting in baths	150	\$7,500	Mechanical and Electrical:	
		Total M&E:	\$7,500		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: Kitchens Smoke detectors	50 150	\$50,000 \$5,000	Dwelling Units: Kitchens	50
		Total DUs:	\$55,000		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment:	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: Rated doors	36
		Total ICAs:	\$0		Total ICAs:

	Site-Wide Facilities: Auto doors	2	\$2,000	Site-Wide Facilities: None	
		Total SWFs:	\$2,000		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$65,500	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	Ut 402 City Plaza			Ut 402 City Plaza	
	Site:			Site:	
	Parking lot	1	\$1,000	Parking lot	1
	Lighting		\$3,000		
		Total Site:	\$4,000		Total Site:
	Mechanical and Electrical:			Mechanical and Electrical:	
	Transfer switch	1	\$8,000	Fan coils	25
				Power distribution	1
				Plumbing	1
		Total M&E:	\$8,000		Total M&E:
	Building Exterior:			Building Exterior:	
	None		\$0	Paint railings	150
	Total B.E.:	\$0		Total B.E.:	
Dwelling Units:			Dwelling Units:		
Kitchens	50	\$50,000	Kitchens	50	
	Total DUs:	\$50,000		Total DUs:	
Dwelling Equipment:			Dwelling Equipment:		
Trash compactor	1	\$1,000			
	Total D.E.:	\$1,000		Total D.E.:	

	Interior Common Areas:			Interior Common Areas:	
	Paint	7	\$48,000	None	
	Carpet	7	\$32,000		
		Total ICAs:	\$80,000		Total ICAs:
	Site-Wide Facilities:			Site-Wide Facilities:	
	None		\$0	None	
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment:			Nondwelling Equipment:		
None		\$0	None		
	Total NDE:	\$0		Total NDE:	
Subtotal of Estimated Cost			\$143,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 403 Central City			UT 403 Central City	
	Site:			Site:	
	Parking lot	3	\$1,000	Parking lot	3
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical:			Mechanical and Electrical:	
	None		\$0	None	
		Total M&E:	\$0		Total M&E:
	Building Exterior:			Building Exterior:	
	None		\$0	Paint	3
		Total B.E.:	\$0	Siding	3
				Total B.E.:	
Dwelling Units:			Dwelling Units:		
Kitchens	15	\$45,000	Kitchens	15	
Flooring	46	\$83,000			
	Total DUs:	\$128,000		Total DUs:	

	Dwelling Equipment: None	Total D.E.:	\$0	Dwelling Equipment: None	Total D.E.:
	Interior Common Areas: None	Total ICAs:	\$0	Interior Common Areas: None	Total ICAs:
	Site-Wide Facilities: None	Total SWFs:	\$0	Site-Wide Facilities: None	Total SWFs:
	Nondwelling Equipment: None	Total NDE:	\$0	Nondwelling Equipment: None	Total NDE:
	Subtotal of Estimated Cost			\$129,000	Subtotal of Estimated Cost

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 403 Central City Site: Perimeter Fence Parking	3 3	\$20,000 \$1,500	UT 403 Central City Site: Parking lot	3
	Total Site:		\$21,500	Total Site:	
	Mechanical and Electrical: None	Total M&E:	\$0	Mechanical and Electrical: None	Total M&E:
	Building Exterior: None	Total B.E.:	\$0	Building Exterior: Roofing	14
	Total B.E.:		\$0	Total B.E.:	
Dwelling Units:				Dwelling Units:	

	Dwelling Equipment: None	Total DUs:	\$0	Dwelling Equipment: None	Total DUs:
	Interior Common Areas: None	Total D.E.:	\$0	Interior Common Areas: None	Total D.E.:
	Site-Wide Facilities: None	Total ICAs:	\$0	Site-Wide Facilities: Patio enclosures	Total ICAs: 3
	Nondwelling Equipment: None	Total SWFs:	\$0	Nondwelling Equipment:	Total SWFs:
		Total NDE:	\$0		Total NDE:
		Subtotal of Estimated Cost		\$21,500	Subtotal of Estimated Cost

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 405 Scattered Sites Site: None		\$0	UT 405 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
	Total B.E.:	\$0		Total B.E.:	
	Dwelling Units:			Dwelling Units:	

	Windows	3	\$10,000		
		Total DUs:	\$10,000		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
Subtotal of Estimated Cost			\$10,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 405 Scattered Sites Site: Concrete	3	\$1,000	UT 405 Scattered Sites Site:	
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	

	Total B.E.:	\$0	Total B.E.:	
Dwelling Units: None		\$0	Dwelling Units:	
	Total DUs:	\$0		Total DUs:
Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None	
	Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
	Total SWFs:	\$0		Total SWFs:
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
	Total NDE:	\$0		Total NDE:
Subtotal of Estimated Cost		\$1,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 406 Phillips Plaza			UT 406 Phillips Plaza	
	Site:			Site:	
	Parking lot	1	\$1,000	Parking lot	1
	Landscape	1	\$3,000		
	Total Site:		\$4,000	Total Site:	
Mechanical and Electrical:			Mechanical and Electrical:		
Smoke detectors	100	\$5,000	None		
Total M&E:		\$5,000	Total M&E:		

	Building Exterior: None		\$0	Building Exterior:	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units:			Dwelling Units:	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: Trash compactor	1	\$1,000	Dwelling Equipment: None	
		Total D.E.:	\$1,000		Total D.E.:
	Interior Common Areas: Paint hallways(L) Auto doors	1 2	\$6,000 \$2,000	Interior Common Areas: Doors	36
		Total ICAs:	\$8,000		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
		Total SWFs:	\$0		Total SWFs:
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$18,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 406 Phillips Plaza Site: Parking lot	1	\$1,000	UT 406 Phillips Plaza Site: Parking lot	1
		Total Site:	\$1,000		Total Site:

Annual	Mechanical and Electrical:			Mechanical and Electrical:	
	Emergency generator	1	\$30,000	Boilers	2
	Power distribution	1	\$12,000		
	Circulating pump & pipe	1	\$3,000		
Statement		Total M&E:	\$45,000		Total M&E:
	Building Exterior:			Building Exterior:	
	Paint railings, dividers & seal	100	\$10,000	None	
		Total B.E.:	\$10,000		Total B.E.:
	Dwelling Units:			Dwelling Units:	
				None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment:			Dwelling Equipment:	
	None		\$0	None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas:			Interior Common Areas:	
				Paint and carpet	8
		Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities:			Site-Wide Facilities:		
None		\$0	None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment:			Nondwelling Equipment:		
None		\$0	Ranges		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$56,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 407 Scattered Sites:			UT 407 Scattered Sites	

See Annual Statement	Landscape	12	\$10,000	Landscape	12
	Total Site:		\$10,000	Total Site:	
	Mechanical and Electrical: Furnaces, plumbing & electrical	6	\$10,000	Mechanical and Electrical: Furnaces, electrical and plumbing	6
	Total M&E:		\$10,000	Total M&E:	
	Building Exterior: Siding, soffit, roofing, gutters & paint	7	\$20,000	Building Exterior: Siding,soffit, facia,gutters and paint	14
	Total B.E.:		\$20,000	Total B.E.:	
	Dwelling Units: Kitchens and Baths	10	\$2,700	Dwelling Units: Flooring	5
	Total DUs:		\$2,700	Total DUs:	
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:		\$0	Total D.E.:	
	Interior Common Areas: None		\$0	Interior Common Areas: None	
	Total ICAs:		\$0	Total ICAs:	
	Site-Wide Facilities: Storage sheds	3	\$5,000	Site-Wide Facilities: Storage	3
Total SWFs:		\$5,000	Total SWFs:		
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
Total NDE:		\$0	Total NDE:		
Subtotal of Estimated Cost			\$47,700	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1	Work Statement for Year 4 FFY: '08	Work Statement for Year 5 FFY: '00
---------------------------	---------------------------------------	---------------------------------------

FFY 05	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	UT 407 Scattered Sites Site: Landscape,concete, asphalt	8	\$2,000	UT 407 Scattered Sites Site: Landscape	3
		Total Site:	\$2,000		Total Site:
	Mechanical and Electrical: HVAC	5	\$5,000	Mechanical and Electrical: Plumbing and electrical	3
		Total M&E:	\$5,000		Total M&E:
	Building Exterior: Roofing, siding, gutters and paint	8	\$10,000	Building Exterior: Siding	2
		Total B.E.:	\$10,000		Total B.E.:
	Dwelling Units: Kitchens and baths	5	\$2,000	Dwelling Units: Kitchens and baths	1
		Total DUs:	\$2,000		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: Sheds	1	\$1,000	Site-Wide Facilities: Sheds	1
		Total SWFs:	\$1,000		Total SWFs:
Nondwelling Equipment: Appliances	0	\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$20,000	Subtotal of Estimated Cost	

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	UT 408/412 Faultline Apartments			UT 408/412 Faultline Apartments	
	Site: Asphalt parking lot	1	\$1,000	Site: Parking lot	1
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical:	
		Total M&E:	\$0		Total M&E:
	Building Exterior: Paint Decks	8 8	\$2,000 \$5,000	Building Exterior: None	
		Total B.E.:	\$7,000		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: Kitchens	1
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$8,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	UT 408/412 Faultline Apartments			UT 408/412 Faultline Apartments	
	Site:			Site:	
	Parking lot	1	\$1,000	Parking lot	1
	Fences	1	\$5,000		
		Total Site:	\$6,000		Total Site:
	Mechanical and Electrical:			Mechanical and Electrical:	
	Power distribution	4	\$5,000	Power distribution	4
		Total M&E:	\$5,000		Total M&E:
	Building Exterior:			Building Exterior:	
	None		\$0	None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units:			Dwelling Units:	
	Doors	8	\$8,000	None	
	Total DUs:	\$8,000		Total DUs:	
Dwelling Equipment:			Dwelling Equipment:		
None		\$0	None		
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas:			Interior Common Areas:		
None		\$0	None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities:			Site-Wide Facilities:		
None		\$0	None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment:			Nondwelling Equipment:		
None		\$0	None		

		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$19,000	Subtotal of Estimated Cost	

Page ___ of ___

form HUD-5;

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 409 Scattered Sites Site: None		\$0	UT 409 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		

	Nondwelling Equipment: None	Total SWFs:	\$0	Nondwelling Equipment: None	Total SWFs:
			\$0		
		Total NDE:	\$0		Total NDE:
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost	

Page ___ of ___

form HUD-5;

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 409 Scattered Sites Site: None		\$0	UT 409 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	

	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 410 Scattered Sites Site: None		\$0	UT 410 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:

	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 410 Scattered Sites Site: None		\$0	UT 410 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
	Total B.E.:	\$0		Total B.E.:	
	Dwelling Units: None		\$0	Dwelling Units: None	

	Dwelling Equipment: None	Total DUs:	\$0	Dwelling Equipment: None	Total DUs:
			\$0		
	Interior Common Areas: None	Total D.E.:	\$0	Interior Common Areas: None	Total D.E.:
			\$0		
	Site-Wide Facilities: None	Total ICAs:	\$0	Site-Wide Facilities: None	Total ICAs:
			\$0		
	Nondwelling Equipment: None	Total SWFs:	\$0	Nondwelling Equipment: None	Total SWFs:
			\$0		
		Total NDE:	\$0	Total NDE:	
			\$0		
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 411 Scattered Sites Site: None		\$0	UT 411 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:

	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 411 Scattered Sites Site: None		\$0	UT 411 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
	Total M&E:	\$0		Total M&E:	

Statement	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 413 Scattered Sites Site: None		\$0	UT 413 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:

Annual Statement	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity

See Annual Statement	UT 413 Scattered Sites Site: None		\$0	UT 413 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Statement for Year 1

FFY 05

FFY: '06

FFY: '07

Statement for Year 1 FFY 05	FFY: '06			FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	UT 414 Peery House Site: Parking lot	1	\$1,000	UT 414 Peery House Site: Parking lot	1
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical: Water heater	1	\$3,000	Mechanical and Electrical: None	
		Total M&E:	\$3,000		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units:		\$0	Dwelling Units: Smoke detectors	17
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: Paint and carpet	2
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
		Total SWFs:	\$0		Total SWFs:
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$4,000	Subtotal of Estimated Cost	

Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

Office of Public and Indian Housing

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	UT 414 Peery House Site: Parking lot	1	\$500	UT 414 Peery House Site: Parking lot	1
		Total Site:	\$500		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: Roof	1	\$35,000	Building Exterior: Paint Siding	1 1
		Total B.E.:	\$35,000		Total B.E.:
	Dwelling Units: Fancoils	17	\$35,000	Dwelling Units: Kitchens and Plumbing Doors and Windows	17 17
		Total DUs:	\$35,000		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	

Subtotal of Estimated Cost

\$70,500

Subtotal of Estimated Cost

Page ___ of ___

form HUD-5;

Five-Year Action Plan

U. S. Department of Housing

OMB Approval No. 25

Part II: Supporting Pages

and Urban Development

Physical Needs Work Statement(s)

Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 415 Romney Plaza			UT 415 Romney Plaza	
	Site:			Site:	
	Parking lot	1	\$1,000	Parking lot	1
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical:			Mechanical and Electrical:	
	Plumbing	35	\$5,000	None	
		Total M&E:	\$5,000		Total M&E:
	Building Exterior:			Building Exterior:	
		Total B.E.:	\$0	None	Total B.E.:
	Dwelling Units:			Dwelling Units:	
	Kitchens	35	\$10,000	Kitchens	35
		Total DUs:	\$10,000	Plumbing	35
		Total D.U.s:	\$10,000		Total DUs:
	Dwelling Equipment:			Dwelling Equipment:	
None	Total D.E.:	\$0	None	Total D.E.:	
Interior Common Areas:			Interior Common Areas:		
Paint hallways	L&1	\$5,000	Paint hallways	2&3	
	Total ICAs:	\$5,000		Total ICAs:	
Site-Wide Facilities:			Site-Wide Facilities:		
None	Total SWFs:	\$0	None	Total SWFs:	
	Total SWFs:	\$0		Total SWFs:	

	Nondwelling Equipment: None			Nondwelling Equipment: None	
			\$0		
		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$21,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 415 Romney Plaza			UT 415 Romney Plaza	
	Site:			Site:	
	Parking lot	1	\$1,000	Parking lot	1
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical:			Mechanical and Electrical:	
	None		\$0	Emergency generator and transfer switch	1
				Fire alarm system	1
	Total M&E:		\$0	Total M&E:	
	Building Exterior:			Building Exterior:	
	None		\$0	Skylight blinds	20
				Paint	1
	Total B.E.:		\$0	Total B.E.:	
Dwelling Units:			Dwelling Units:		
			Smoke detectors	70	
			Fan coils	5	
Total DUs:		\$0	Total DUs:		
Dwelling Equipment:			Dwelling Equipment:		
None		\$0	None		
Total D.E.:		\$0	Total D.E.:		
Interior Common Areas:			Interior Common Areas:		
Paint hallways	4&5	\$5,000	None		
Total ICAs:		\$5,000	Total ICAs:		

	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
Subtotal of Estimated Cost			\$6,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 417 Mead and American Area			UT 417 Mead and American Area	
	Site: None		\$0	Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: Paint	17
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	

	Interior Common Areas: None	Total D.E.:	\$0	Interior Common Areas: None	Total D.E.:
			\$0		
	Site-Wide Facilities: None	Total ICAs:	\$0	Site-Wide Facilities: None	Total ICAs:
			\$0		
	Nondwelling Equipment: None	Total SWFs:	\$0	Nondwelling Equipment: None	Total SWFs:
		\$0			
		Total NDE:	\$0		Total NDE:
			\$0		
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 417 Mead and American Area Site: Sitework	5	\$1,000	UT 417 Mead and American Area Site: None	
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: Dwelling structure	5	\$2,000	Building Exterior:	
		Total B.E.:	\$2,000		Total B.E.:
	Dwelling Units: Kitchens	6	\$8,000	Dwelling Units: None	
	Bathrooms	6	\$1,000		
		Total DUs:	\$9,000		Total DUs:

	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
Subtotal of Estimated Cost			\$12,000	Subtotal of Estimated Cost	

Page ___ of ___

form HUD-5;

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 418 Redwood, Pacific, 330 N			UT 418 Redwood, Pacific, 330 N	
	Site:			Site:	
	Parking lots	3	\$3,000	Parking lots	3
	Fencing	3	\$34,000		
	Total Site:		\$37,000	Total Site:	
Mechanical and Electrical:			Mechanical and Electrical:		
	Total M&E:	\$0	None	Total M&E:	
Building Exterior:			Building Exterior:		
None		\$0	None		
Total B.E.:		\$0	Total B.E.:		

	Dwelling Units: Kitchens	24	\$28,800	Dwelling Units: Flooring Kitchens	12 24
		Total DUs:	\$28,800		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
Subtotal of Estimated Cost			\$65,800	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 418 Redwood, Pacific, 330 N Site: Parking lots	3	\$3,000	UT 418 Redwood, Pacific, 330 N Site: Parking lots	3
		Total Site:	\$3,000		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior:			Building Exterior:	

			\$0	Roofing	1
				Paint	2
	Total B.E.:		\$0		Total B.E.:
Dwelling Units:				Dwelling Units:	
Kitchens	24		\$28,800	Kitchens	24
			\$0		
Total DUs:			\$28,800	Total DUs:	
Dwelling Equipment:				Dwelling Equipment:	
None			\$0	None	
Total D.E.:			\$0	Total D.E.:	
Interior Common Areas:				Interior Common Areas:	
None			\$0	None	
Total ICAs:			\$0	Total ICAs:	
Site-Wide Facilities:				Site-Wide Facilities:	
None			\$0	None	
Total SWFs:			\$0	Total SWFs:	
Nondwelling Equipment:				Nondwelling Equipment:	
None			\$0	None	
Total NDE:			\$0	Total NDE:	
Subtotal of Estimated Cost			\$31,800	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 420 Pacific Heights			UT 420 Pacific Heights	
	Site:			Site:	
	Parking lots	1	\$1,000	Asphalt	2
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical:			Mechanical and Electrical:	

Annual Statement	None		\$0	None	
	Building Exterior: Paint doors	Total M&E: 1	\$0 \$2,000	Building Exterior: None	Total M&E:
	Dwelling Units: Flooring Kitchens	Total B.E.: 8 4	\$2,000 \$8,000 \$9,000	Dwelling Units: Kitchens Flooring	Total B.E.: 4 8
	Dwelling Equipment: None	Total DUs: Total D.E.:	\$17,000 \$0	Dwelling Equipment: None	Total DUs: Total D.E.:
	Interior Common Areas: None	Total ICAs:	\$0	Interior Common Areas: None	Total ICAs:
	Site-Wide Facilities: None	Total SWFs:	\$0	Site-Wide Facilities: None	Total SWFs:
	Nondwelling Equipment: None	Total NDE:	\$0	Nondwelling Equipment: None	Total NDE:
	Subtotal of Estimated Cost		\$20,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 420 Pacific Heights			UT 420 Pacific Heights	

See Annual Statement	Site: Parking lots	1	\$1,000	Site: Parking lots	1
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: Flooring	8	\$8,000	Dwelling Units: Flooring	8
		Total DUs:	\$8,000		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$9,000	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement	Work Statement for Year 2 FFY: '06	Work Statement for Year 3 FFY: '07
----------------	---------------------------------------	---------------------------------------

for Year 1

FFY 05

	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	UT 424 Scattered Sites Site: None		\$0	UT 424 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Comprehensive Grant Program (CGP)

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	UT 424 Scattered Sites Site: None		\$0	UT 424 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	UT 427 Scattered Sites			UT 427 Scattered Sites	
	Site: None		\$0	Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		

		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

U. S. Department of Housing
 and Urban Development
 Office of Public and Indian Housing
 OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 427 Scattered Sites Site: None		\$0	UT 427 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
Dwelling Equipment: None		\$0	Dwelling Equipment: None		
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		

		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Page ___ of ___

form HUD-5:

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 428 Scattered Sites Site: None		\$0	UT 428 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		

	Site-Wide Facilities: None	Total ICAs:	\$0	Site-Wide Facilities: None	Total ICAs:
			\$0		
		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost	

Page ___ of ___

form HUD-5;

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 428 Scattered Sites Site: None		\$0	UT 428 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
			\$0		

	Interior Common Areas: None	Total D.E.:	\$0	Interior Common Areas: None	Total D.E.:
			\$0		
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 429 Scattered Sites Site: None		\$0	UT 429 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
	Total B.E.:	\$0		Total B.E.:	
	Dwelling Units: None		\$0	Dwelling Units: None	

	Dwelling Equipment: None	Total DUs:	\$0	Dwelling Equipment: None	Total DUs:
			\$0		
	Interior Common Areas: None	Total D.E.:	\$0	Interior Common Areas: None	Total D.E.:
			\$0		
	Site-Wide Facilities: None	Total ICAs:	\$0	Site-Wide Facilities: None	Total ICAs:
			\$0		
Nondwelling Equipment: None	Total SWFs:	\$0	Nondwelling Equipment: None	Total SWFs:	
		\$0			
	Total NDE:		\$0	Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 429 Scattered Sites Site: None		\$0	UT 429 Scattered Sites Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
			\$0		

	Dwelling Units: None	Total B.E.:	\$0	Dwelling Units: None	Total B.E.:
			\$0		
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 431 Scattered Site Site: None		\$0	UT 431 Scattered Site Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	

Statement	Total M&E:	\$0	Total M&E:	
	Building Exterior: None	\$0	Building Exterior: None	
	Total B.E.:	\$0	Total B.E.:	
	Dwelling Units: None	\$0	Dwelling Units: None	
	Total DUs:	\$0	Total DUs:	
	Dwelling Equipment: None	\$0	Dwelling Equipment: None	
	Total D.E.:	\$0	Total D.E.:	
	Interior Common Areas: None	\$0	Interior Common Areas: None	
	Total ICAs:	\$0	Total ICAs:	
	Site-Wide Facilities: None	\$0	Site-Wide Facilities: None	
Total SWFs:	\$0	Total SWFs:		
Nondwelling Equipment: None	\$0	Nondwelling Equipment: None		
Total NDE:	\$0	Total NDE:		
Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	UT 431 Scattered Site Site: None		\$0	UT 431 Scattered Site Site: None	

See	Total Site:		\$0	Total Site:	
	Mechanical and Electrical:			Mechanical and Electrical:	
	None		\$0	None	
	Total M&E:		\$0	Total M&E:	
	Building Exterior:			Building Exterior:	
	None		\$0	None	
	Total B.E.:		\$0	Total B.E.:	
	Dwelling Units:			Dwelling Units:	
	None		\$0	None	
	Total DUs:		\$0	Total DUs:	
Dwelling Equipment:			Dwelling Equipment:		
None		\$0	None		
Total D.E.:		\$0	Total D.E.:		
Interior Common Areas:			Interior Common Areas:		
None		\$0	None		
Total ICAs:		\$0	Total ICAs:		
Site-Wide Facilities:			Site-Wide Facilities:		
None		\$0	None		
Total SWFs:		\$0	Total SWFs:		
Nondwelling Equipment:			Nondwelling Equipment:		
None		\$0	None		
Total NDE:		\$0	Total NDE:		
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity

See Annual Statement	OFFICE AND MAINTENANCE BLDG			OFFICE AND MAINTENANCE BLDG	
	Site: Parking lot	2	\$1,000	Site: Parking lot	2
		Total Site:	\$1,000		Total Site:
	Mechanical and Electrical: Hvac		\$1,000	Mechanical and Electrical: None	
		Total M&E:	\$1,000		Total M&E:
	Building Exterior: None		\$0	Building Exterior: Doors	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas: Paint and Carpet	1,000	\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$2,000	Subtotal of Estimated Cost	

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	OFFICE AND MAINTENANCE BLDG			OFFICE AND MAINTENANCE BLDG	
	Site: Fence		\$5,000	Site: Parking lot	2
		Total Site:	\$5,000		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: Roof		\$10,000	Building Exterior: Stucco	1
		Total B.E.:	\$10,000		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$15,000	Subtotal of Estimated Cost	

Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

and Urban Development
 Office of Public and Indian Housing

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	XX Y-22, Anywhere Homes			XX Y-22, Anywhere Homes	
	Site: None		\$0	Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	

	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	
--	----------------------------	--	-----	----------------------------	--

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-22, Anywhere Homes			XX Y-22, Anywhere Homes	
	Site:			Site:	
	None		\$0	None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical:			Mechanical and Electrical:	
	None		\$0	None	
		Total M&E:	\$0		Total M&E:
	Building Exterior:			Building Exterior:	
	None		\$0	None	
		Total B.E.:	\$0		Total B.E.:
Dwelling Units:			Dwelling Units:		
None		\$0	None		
	Total DUs:	\$0		Total DUs:	
Dwelling Equipment:			Dwelling Equipment:		
None		\$0	None		
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas:			Interior Common Areas:		
None		\$0	None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities:			Site-Wide Facilities:		
None		\$0	None		
	Total SWFs:	\$0		Total SWFs:	

	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-23, Anywhere Homes			XX Y-23, Anywhere Homes	
	Site: None		\$0	Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	

	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-23, Anywhere Homes Site: None		\$0	XX Y-23, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:

	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-24, Anywhere Homes Site: None		\$0	XX Y-24, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
	Total B.E.:	\$0		Total B.E.:	
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:

	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-24, Anywhere Homes Site: None		\$0	XX Y-24, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:

	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-25, Anywhere Homes Site: None		\$0	XX Y-25, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
	Total M&E:	\$0		Total M&E:	

	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-25, Anywhere Homes Site: None		\$0	XX Y-25, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:

Annual Statement	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-26, Anywhere Homes			XX Y-26, Anywhere Homes	

See Annual Statement	Site: None		\$0	Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement	Work Statement for Year 4 FFY: '08	Work Statement for Year 5 FFY: '00
----------------	---------------------------------------	---------------------------------------

for Year 1

FFY 05

	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	XX Y-26, Anywhere Homes Site: None		\$0	XX Y-26, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Comprehensive Grant Program (CGP)

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	XX Y-27, Anywhere Homes Site: None		\$0	XX Y-27, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
See Annual Statement	XX Y-27, Anywhere Homes Site: None		\$0	XX Y-27, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		

		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-28, Anywhere Homes			XX Y-28, Anywhere Homes	
	Site: None		\$0	Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
	Total D.E.:	\$0		Total D.E.:	
Interior Common Areas: None		\$0	Interior Common Areas: None		
	Total ICAs:	\$0		Total ICAs:	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		

		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0		Nondwelling Equipment: None
		Total NDE:	\$0		Total NDE:
	Subtotal of Estimated Cost		\$0		Subtotal of Estimated Cost

Page ___ of ___

form HUD-5:

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-28, Anywhere Homes Site: None		\$0	XX Y-28, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
Interior Common Areas: None		\$0	Interior Common Areas: None		

	Site-Wide Facilities: None	Total ICAs:	\$0	Site-Wide Facilities: None	Total ICAs:
			\$0		
		Total SWFs:	\$0		Total SWFs:
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None	
		Total NDE:	\$0		Total NDE:
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost	

Page ___ of ___

form HUD-5;

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-29, Anywhere Homes Site: None		\$0	XX Y-29, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
			\$0		

	Interior Common Areas: None	Total D.E.:	\$0	Interior Common Areas: None	Total D.E.:
			\$0		
	Site-Wide Facilities: None	Total ICAs:	\$0	Site-Wide Facilities: None	Total ICAs:
			\$0		
	Nondwelling Equipment: None	Total SWFs:	\$0	Nondwelling Equipment: None	Total SWFs:
		\$0			
		Total NDE:	\$0	Nondwelling Equipment: None	Total NDE:
			\$0		
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-29, Anywhere Homes Site: None		\$0	XX Y-29, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
	Total B.E.:	\$0		Total B.E.:	
			\$0		
	Dwelling Units: None		\$0	Dwelling Units: None	
			\$0		

	Dwelling Equipment: None	Total DUs:	\$0	Dwelling Equipment: None	Total DUs:
			\$0		
	Interior Common Areas: None	Total D.E.:	\$0	Interior Common Areas: None	Total D.E.:
			\$0		
	Site-Wide Facilities: None	Total ICAs:	\$0	Site-Wide Facilities: None	Total ICAs:
			\$0		
	Nondwelling Equipment: None	Total SWFs:	\$0	Nondwelling Equipment: None	Total SWFs:
			\$0		
		Total NDE:	\$0	Total NDE:	
			\$0		
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-30, Anywhere Homes Site: None		\$0	XX Y-30, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	
		Total M&E:	\$0		Total M&E:
	Building Exterior: None		\$0	Building Exterior: None	
			\$0		

	Dwelling Units: None	Total B.E.:	\$0	Dwelling Units: None	Total B.E.:
			\$0		
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		Total SWFs:
	Total SWFs:	\$0			Total SWFs:
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		Total NDE:
	Total NDE:	\$0			Total NDE:
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 25

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY: '00	
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity
	XX Y-30, Anywhere Homes Site: None		\$0	XX Y-30, Anywhere Homes Site: None	
		Total Site:	\$0		Total Site:
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None	

Statement	Building Exterior: None	Total M&E:	\$0	Building Exterior: None	Total M&E:
			\$0		
		Total B.E.:	\$0		Total B.E.:
	Dwelling Units: None		\$0	Dwelling Units: None	
		Total DUs:	\$0		Total DUs:
	Dwelling Equipment: None		\$0	Dwelling Equipment: None	
		Total D.E.:	\$0		Total D.E.:
	Interior Common Areas: None		\$0	Interior Common Areas: None	
		Total ICAs:	\$0		Total ICAs:
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None	
	Total SWFs:	\$0		Total SWFs:	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		
	Total NDE:	\$0		Total NDE:	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost	

Estimated Cost
\$0
\$0
\$0
\$0
\$0
\$0
\$76,042
\$76,042
\$0
\$0
\$97,732
\$97,732
\$0
\$0
\$38,000

\$38,000
\$211,774

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost
\$0
\$0
\$0
\$0
\$0
\$0
\$76,042
\$76,042
\$0
\$0
\$97,732
\$97,732
\$0
\$0

\$38,000

\$38,000

\$211,774

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$1,000

\$1,000

\$0

\$0

\$0

\$50,000

\$0

\$50,000

\$0

\$0

\$12,000

\$12,000

\$0

\$0

\$0

\$0
\$63,000

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$1,000

\$1,000

\$25,000

\$0

\$5,000

\$30,000

\$15,000

\$15,000

\$50,000

\$50,000

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$96,000

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$1,500

\$0

\$1,500

\$0

\$0

\$5,000

\$98,000

\$103,000

\$45,000

\$45,000

\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$149,500

2834 (10/96)
77-0157 (7/31/98)

Estimated Cost
\$1,500.00
\$1,500
\$0
\$0
\$5,000
\$5,000

\$0
\$0
\$0
\$0
\$10,000
\$10,000
\$0
\$0
\$16,500

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost
\$0
\$0
\$0
\$0
\$0
\$0

\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0

2834 (10/96)
77-0157 (7/31/98)

Estimated Cost
\$0
\$0
\$0
\$0

\$0
\$0
\$0
\$0
\$9,800
\$9,800
\$0
\$0
\$0
\$10,800

2834 (10/96)
77-0157 (7/31/98)

Estimated Cost
\$1,000
\$1,000

\$60,000

\$60,000

\$0

\$0

\$0

\$0

\$0

\$0

\$47,000

\$47,000

\$0

\$0

\$0

\$0

\$108,000

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$10,000
\$10,000
\$10,000
\$10,000
\$20,000
\$20,000
\$5,000
\$5,000
\$0
\$0
\$0
\$0
\$5,000
\$5,000
\$0
\$0
\$50,000

2834 (10/96)
77-0157 (7/31/98)

Estimated Cost

\$2,000

\$2,000

\$5,000

\$5,000

\$5,000

\$5,000

\$2,000

\$2,000

\$0

\$0

\$0

\$0

\$1,000

\$1,000

\$0

\$0

\$15,000

\$0

\$1,000

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost
\$1,000
\$1,000
\$0
\$0
\$0
\$1,000
\$1,000
\$0
\$16,000
\$16,000
\$0
\$0
\$0
\$0
\$18,000

\$61,500

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$1,000

\$1,000

\$0

\$0

\$0

\$0

\$10,000

\$1,000

\$11,000

\$0

\$0

\$5,000

\$5,000

\$0

\$0

\$0

\$0

\$17,000

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$1,000

\$1,000

\$10,000

\$0

\$10,000

\$8,000

\$2,000

\$10,000

\$4,000

\$5,000

\$9,000

\$0

\$0

\$0

\$0

\$0
\$0
\$0
\$0
\$30,000

2834 (10/96)
77-0157 (7/31/98)

Estimated Cost
\$0
\$0
\$0
\$0
\$5,000
\$5,000
\$0
\$0
\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$3,000

\$3,000

\$0

\$0

\$0

\$0

\$25,000
\$28,800

\$53,800

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$56,800

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$3,000

\$3,000

\$0

\$0

\$19,000
\$6,000

\$25,000

\$28,800

\$28,800

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$56,800

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$1,000

\$1,000

\$0
\$0
\$0
\$0
\$9,000
\$8,000
\$17,000
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$18,000

2834 (10/96)
77-0157 (7/31/98)

Estimated Cost

\$1,000

\$1,000

\$0

\$0

\$0

\$0

\$8,000

\$8,000

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$9,000

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$1,000

\$1,000
\$0

\$0
\$1,000

\$1,000
\$0

\$0
\$0

\$0
\$0

\$0
\$0

\$0
\$2,000

2834 (10/96)
77-0157 (7/31/98)

Estimated Cost
\$1,000

\$1,000
\$0

\$0
\$1,000

\$1,000
\$0

\$0
\$0

\$0
\$0

\$0
\$0

\$0
\$0

\$0
\$0

\$0
\$2,000

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

2834 (10/96)

77-0157 (7/31/98)

Estimated Cost

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157 (7/31/98)

Work Statement for Year 1 FFY 05	Work Statement for Year 2 FFY: '06			Work Statement for Year 3 FFY: '07		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	Upgrade computers to improve capacity and effectiveness of Public Housing staff functions.	0	\$0	Upgrade computers to improve capacity and effectiveness of Public Housing staff functions.	0	\$0
	A Preventive Maintenance Program to improve the condition of Public Housing.	1	\$59,096	A Preventive Maintenance Program to improve the condition of Public Housing.	1	\$59,096
	A procurement technician to monitor and improve procurement practices.	1	\$49,300	A procurement technician to monitor and improve procurement practices.	1	\$49,300
	Training for staff to obtain skills need to sustain the physical improvements.	5	\$5,000	Training for staff to obtain the skills necessary to maintain the physical improvements	5	\$0
	5) Item 5		\$0	5) Item 5		\$0
	6) Item 6		\$0	6) Item 6		\$0
	7) Item 7		\$0	7) Item 7		\$0
	Subtotal of Estimated Cost		\$113,396	Subtotal of Estimated Cost		\$113,396

Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157 (7/31/98)

Work Statement for Year 1 FFY 05	Work Statement for Year 4 FFY: '08			Work Statement for Year 5 FFY:'09		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	Upgrade computers to improve capacity and effectiveness of Public Housing staff functions.	0	\$0	Upgrade computers to improve capacity and effectiveness of Public Housing staff functions.	0	\$0
	A Preventive Maintenance Program to improve the condition of Public Housing.	1	\$59,096	A Preventive Maintenance Program to improve the condition of Public Housing.	1	\$59,096
	A procurement technician to monitor and improve procurement practices.	1	\$49,300	A procurement technician to monitor and improve procurement practices.	1	\$49,300
	Training for modernization and maintenance to provide skills necessary to sustain the physical improvement	5	\$5,000	Training	5	\$5,000
	5) Item 5		\$0	5) Item 5		\$0
	6) Item 6		\$0	6) Item 6		\$0
	7) Item 7		\$0	7) Item 7		\$0
	Subtotal of Estimated Cost		\$113,396	Subtotal of Estimated Cost		\$113,396