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

PHA Plans

5 Year Plan for Fiscal Years 2005 - 2009
Annual Plan for Fiscal Year 2008

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: Anniston Housing Authority **PHA Number:** AL004

PHA Fiscal Year Beginning: 04/2008

PHA Programs Administered:

☒**Public Housing and Section 8** ☐**Section 8 Only** ☐**Public Housing Only**

Number of public housing units: 748 Number of S8 units: Number of public housing units:
Number of S8 units: 212

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

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

Public Access to Information

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

☒ Main administrative office of the PHA
☒ PHA development management offices
☐ PHA local offices

Display Locations For PHA Plans and Supporting Documents

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

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

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

☒ Main business office of the PHA

☐ PHA development management offices

☐ Other (list below)

5-YEAR PLAN
PHA FISCAL YEARS 2005- 2009
[24 CFR Part 903.5]

A. Mission

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

☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

☒ The PHA's mission is: (state mission here)

The basic goal of this Housing Authority is to serve the needs of low-income persons in the Anniston Housing Authority Jurisdiction.

This can be done by taking steps to:

1. **Promote adequate and affordable housing**
2. **Promote economic opportunity**
3. **Promote a suitable living environment without discrimination.**

Our goal is to provide drug free, decent, safe, and sanitary housing for eligible families and to provide opportunities and promote self-sufficiency and economic independence for residents.

In order to achieve this mission, we will:

Recognize resident as our ultimate customer;

Improve Public Housing Authority (HA) management and service delivery efforts through effective and efficient management of HA staff;

Seek problem-solving partnerships with residents, community, and government leadership;

Apply HA resources to the effective and efficient management and operation of public housing programs, taking into account changes in Federal funding.

*** Comply and Support the Violence Against Women and Justice Department Reauthorization Act 2005**

B. Goals

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

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

☒ PHA Goal: Expand the supply of assisted housing
Objectives:
- ☒ Apply for additional rental vouchers:
- ☒ Reduce public housing vacancies:
- ☐ Leverage private or other public funds to create additional housing opportunities:
- ☐ Acquire or build units or developments
- ☒ Other (list below)

AHA plans to offer project based assistance to existing housing dedicated for use by low income elderly. This is justified by the fact that there is a substantial lack of lower income housing for low-income elderly in Anniston, AL.

☒ PHA Goal: Improve the quality of assisted housing
Objectives:
- ☒ Improve public housing management: **(PHAS score) 90%> by 2009**
- ☒ Improve voucher management:**(SEMAP score) 90%> by 2009**
- ☐ Increase customer satisfaction:
- ☐ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- ☐ Renovate or modernize public housing units:
- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☐ Provide replacement vouchers:
- ☐ Other: (list below)

☒ PHA Goal: Increase assisted housing choices
Objectives:
- ☐ Provide voucher mobility counseling:
- ☐ Conduct outreach efforts to potential voucher landlords
- ☒ Increase voucher payment standards
- ☐ Implement voucher homeownership program:

☐ Implement public housing or other homeownership programs:
☐ Implement public housing site-based waiting lists:
☐ Convert public housing to vouchers:
☒ Other: (list below)

Anniston Housing Authority plans to undertake affirmative measures to insure that low income elderly individuals are provided with accessible housing with all varieties of disabilities regardless of unit size required and to affirmatively provide such affordable and accessible housing for such individuals. Anniston Housing Authority plans to offer project based assistance for not less than 45 nor more than 60 units of existing housing where the owners of the property are willing to provide units appropriate in size, amenities and services, exclusively for use by this population. This is justified by a substantial lack of affordable and accessible housing for this population.

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

☒ PHA Goal: Provide an improved living environment
Objectives:
☐ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
☐ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
☒ Implement public housing security improvements:
☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
☐ Other: (list below)

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

☒ PHA Goal: Promote self-sufficiency and asset development of assisted households
Objectives:
☒ Increase the number and percentage of employed persons in assisted families: **5% by 2009**
☒ Provide or attract supportive services to improve assistance recipients' employability: **Apply for additional resident funding. New and improved GED program in conjunction with Gadsden St. Community College.**
☐ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
☐ Other: (list below)

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

☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:

- ☐ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
- ☐ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- ☐ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
- ☒ Other: (list below) **Continue to meet 100% of all listed objectives through FY 2009**

Other PHA Goals and Objectives: (list below)

Other PHA Goals and Objectives: (list below)

The Anniston Housing Authority plans to issue project based vouchers to a 56 units elderly complex.

JUSTIFICATION….There is a substantial lack of low income housing for the elderly.

Other PHA Goals and Objectives: (list below) NEW GOAL with Submission of the Annual and Five-Year Plan beginning July 1, 2007 ??
HUD published Notices: PIH 2006-23, on June 23, 2006 and PIH 2006-42 on December 27, 2006, for Implementation of the Violence Against Women and Justice Department Reauthorization Act 2005 (VAWA). The VAWA prohibits the eviction of, and removal of assistance from certain persons living in public or Section 8-assisted housing if the asserted grounds for such action is an instance of domestic violence, dating violence, sexual assault, or stalking as those terms are defined in Section 3 of the United States Housing Act of 1937 as amended by VAWA (42 U. S. C. 13925). The HA distributed a notice on July 31, 2006, to all Public Housing Households and a notice was mailed to all Section 8 participant households on July 21, 2006, informing them that the HA would not evict or terminate Section 8 assistance to victims of criminal domestic violence, dating violence, sexual assault, or staking, as well as members of the victims' family listed on

the dwelling lease and/or Section 8 voucher. The HA would only take action to have the person committing the violence removed from the dwelling lease and/or Section 8 voucher for the protection of the family. Based on the requirements contained in HUD Notice 2006-23, the HA developed a certification form for victims to certify that the alleged incident of abuse are bona fide and agrees to have the alleged abuser removed from the dwelling lease and/or the Section 8 Voucher. The HA will also allow the victim and remaining family members to relocate for safety reasons to another public housing development managed by the HA and/or issue the Section 8 participant family a Voucher, which will allow for relocation. To inform new public housing households and Section 8 participant households of the requirements of VAWA, the HA developed a notice that is covered with the Public Housing household and the Section 8 participant household during the leasing session effective August 1, 2006 for Public Housing lease sessions and July 24, 2006, for Housing Assistance Payment contracts executed on or after July 24, 2006. Each person participating in the lease session is also required to sign the notice that explains the requirements of VAWA. To ensure that Section 8 Landlords are aware of the requirements of the VAWA, the HA mailed a notice to each Section 8 Landlord on July 21, 2006, which explained the requirements of VAWA. Also, for Housing Assistance Payment Contracts executed on or after July 24, 2006, the Landlord is provide a notice explaining the requirements of the VAWA and must sign the notice documenting that the HA has informed the Section 8 Landlord of the requirements of VAWA. HUD published an addition Notice: PIH 2006-42, on December 27, 2006, transmitting HUD-50066, Certification of Domestic Violence, Dating Violence, or Stalking, which is form HUD-50066. The HA starting using this certification form on February 1, 2007, for Public Housing and Section 8 and the certification form developed by the HA was changed and will used an attachment for form HUD-50066. A notice was posted for Public Housing and Section 8 on January 8, 2007, explaining that HUD has issued a certification for all acts covered by the VAWA Act of 2005 and that the existing certification form was amended and would be used as an attachment. The VAWA Act of 2005 allows Housing Authorities to require additional inform in addition to the certification and the attachments details what additional information the HA is requesting and the information being requested is in accordance with the VAWA Act of 2005. Also, the attachment is completed at the time the certification is completed.

It is the goal of the HA not to evict any public housing resident or terminate Section 8 assistance to any victim of violence covered under VAWA and that certifies to the alleged abuse and complies with the terms of the certification. The Board of Commissioners of the HA certified that the HA intents to comply with the implementing requirements of VAWA at the August 22, 2006, Board meeting.

NEW GOAL: With the publication of HUD Notice 2006-23 and HUD Notice 2006-42 the HA is establishing a goal that no individual covered under the VAWA that completes the HA certification to the alleged abuse and complies with the conditions of the certification will be evicted from public housing or have their Section 8 assistance terminated. This goal is being added to the HA 5 Year Plan this year and any activity related to the eviction of victims covered under VAWA will be reported as update to

future 5 Year Plans of the HA. **Update:** Since the HA implemented the provisions of the VAWA Act no public housing resident and/or Section 8 participant has be evicted or Section 8 assistance terminated that qualified as a victim of abuses covered under the VAWA Act.

Annual PHA Plan
PHA Fiscal Year 2008
[24 CFR Part 903.7]

i. Annual Plan Type:
Select which type of Annual Plan the PHA will submit.

☒ **Standard Plan**

☐ **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.

The purpose of the Agency Plan is to empower and equip the PHA to exercise optimum flexibility in meeting local housing needs within the community while meeting its own needs. The Agency Plan contains a *FY-2005-FY-2009 Five Year Plan* that includes the Authority's mission and long range goals and objectives.

The *FY-2008 Annual Plan* addresses the Authority's immediate operations, current policies, program participants, programs and services, and the PHA's strategy for handling operational concerns, resident concerns and needs, and programs and services for the upcoming fiscal year. The Agency Plan outlines the PHA's efforts in meeting the needs of the very-low, low, and moderate-income population in its community as well as serves as a management, operational and accountability tool for the PHA.

Preliminary planning sessions were conducted with the Authority's residents, Resident Advisory Board, community leaders and organizations, and State and local authorities during the development of the Agency Plan to ensure that the needs of the residents and community are addressed in the Agency Plan. The Agency Plan is consistent with the State's Consolidated Plan.

This Agency Plan contains a *FY-2005-FY-2009* Five Year Plan (mission, goals and objectives) and a *FY-2008* Annual Plan. Each of the 20 sections in the Agency Plan is preceded by a title page. An Annual Plan and/or update of the Agency Plan will be submitted to HUD annually at least 75 days before the start of the succeeding fiscal year.

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.

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Attachments

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

Required Attachments:

- ☒ Admissions Policy for Deconcentration (al004D01)
- ☒ FY 2008 Capital Fund Program Annual Statement (INCLUDED)
- ☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- ☒ List of Resident Advisory Board Members (al004A01)
- ☒ List of Resident Board Member (INCLUDED)
- ☒ Community Service Description of Implementation (INCLUDED)
- ☒ Information on Pet Policy (INCLUDED)

☐ Section 8 Homeownership Capacity Statement, if applicable
☐ Description of Homeownership Programs, if applicable

Optional Attachments:
☒ PHA Management Organizational Chart (al004C01)
☒ FY 2007 Capital Fund Program 5 Year Action Plan (INCLUDED)
☐ Public Housing Drug Elimination Program (PHDEP) Plan
☒ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) **NO COMMENTS**
☒ Other (List below, providing each attachment name**)**
Statement of 5 year goals (al004E01)
CFP P&E statements for 501-07 (al004F01)
501-03 (al004G01)
501-04 (al004H01)
501-05 (al004I01)
501-06 (al004J01)

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**
YES	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
YES	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
YES	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
YES	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
YES	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Applicable Plan Component**
YES	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
YES	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	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 Quality Housing and Work Responsibility Act Initial Guidance; Notice* and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Public housing rent determination policies, including the methodology for setting public housing flat rents ☒ check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
YES	Schedule of flat rents offered at each public housing development ☒ check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
YES	Section 8 rent determination (payment standard) policies ☒ check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
YES	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
YES	Public housing grievance procedures ☒ check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
YES	Section 8 informal review and hearing procedures ☒ check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
YES	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
YES	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

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Applicable Plan Component**
	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
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program ☐ check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
YES	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
YES	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
YES	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
	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	1246	5	4	4	2	3	2
Income >30% but <=50% of AMI	575	4	3	4	2	3	2
Income >50% but <80% of AMI	779	3	4	4	2	3	2
Elderly	953	4	5	5	3	3	4
Families with Disabilities	883	4	5	5	3	3	2
Race/Ethnicity 1		4	5	5	3	3	2
Race/Ethnicity 2		4	3	4	3	3	2
Race/Ethnicity 3		4	3	4	3	3	2
Race/Ethnicity							

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

☒ Consolidated Plan of the Jurisdiction/s
Indicate year: **2005**

☐ 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) ☐ Section 8 tenant-based assistance ☒ Public Housing ☐ Combined Section 8 and Public Housing ☐ 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	181		174
Extremely low income <=30% AMI	159	87.84	
Very low income (>30% but <=50% AMI)	22	12.15	
Low income (>50% but <80% AMI)	0	0	
Families with children	100	55	
Elderly families	5	2	
Families with Disabilities	14	7.7	
Race/ethnicity 1	30	16.5	
Race/ethnicity 2	150	83	
Race/ethnicity 3	1	1	
Race/ethnicity			
Characteristics by			

Housing Needs of Families on the Waiting List			
Bedroom Size (Public Housing Only)			
1BR	81	46	
2 BR	47	26	
3 BR	40	22	
4 BR	9	4	
5 BR	4	2	
5+ BR			

Is the waiting list closed (select one)? ☒ No ☐ Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☐ Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☐ No ☐ Yes

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

☒ Section 8 tenant-based assistance

☐ Public Housing

☐ Combined Section 8 and Public Housing

☐ 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	382		13
Extremely low income <=30% AMI	332	86.91	
Very low income (>30% but <=50% AMI)	44	11.51	
Low income (>50% but <80% AMI)	6	1.57	
Families with children	288	75	
Elderly families	0	0	
Families with	56	15	

Housing Needs of Families on the Waiting List			
Disabilities			
Race/ethnicity 1 / 2	29	7	
Race/ethnicity 2 / 2	352	92	
Race/ethnicity hispa	1	1	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	68	18	
2 BR	176	46	
3 BR	119	31	
4 BR	19	5	
5 BR	0	0	
5+ BR			

Is the waiting list closed (select one)? ☐ No ☒ Yes

If yes:

How long has it been closed (# of months)? 18

Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☒ Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☒ No ☐ Yes

C. Strategy for Addressing Needs

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

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

☐ Employ effective maintenance and management policies to minimize the number of public housing units off-line

☒ Reduce turnover time for vacated public housing units

☐ Reduce time to renovate public housing units

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

Strategy 2: Increase the number of affordable housing units by:
Select all that apply

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

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

Strategy 1: Target available assistance to families at or below 30 % of AMI
Select all that apply

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

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

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

Select all that apply

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

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:
Select all that apply

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:
Select all that apply

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

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

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

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

Strategy 2: Conduct activities to affirmatively further fair housing
Select all that apply

☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units

☒ Market the section 8 program to owners outside of areas of poverty /minority concentrations
☐ Other: (list below)

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

(2) Reasons for Selecting Strategies

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

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

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	2,884,776	
b) Public Housing Capital Fund	1,140,898	
c) HOPE VI Revitalization	0	
d) HOPE VI Demolition	0	

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
e) Annual Contributions for Section 8 Tenant-Based Assistance	798,158	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0	
g) Resident Opportunity and Self-Sufficiency Grants	0	
h) Community Development Block Grant	0	
i) HOME	0	
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
CFP 501-07	167,823	Mod/equip/operations
CFP 501-06	543,551	Mod/equip/operations
CFP 501-05	0	Mod/equip/operations
3. Public Housing Dwelling Rental Income	347,820	Admin, Maintenance, Operating
4. Other income (list below)		
Maint. Fees	35,700	Admin/Maint
Interest/Dividend	15,000	Admin
4. Non-federal sources (list below)		
Total resources	5,833,726	

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**)** **Near top of Waiting List**

☐ When families are within a certain time of being offered a unit: (state time)

☒ Other: (describe) **Time of Application**

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

☒ Criminal or Drug-related activity

☒ Rental history

☒ Housekeeping

☐ Other (describe)

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

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

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

(2)Waiting List Organization

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

☒ Community-wide list

☐ Sub-jurisdictional lists

☐ Site-based waiting lists

☐ Other (describe)

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

☒ PHA main administrative office

☐ PHA development site management office

☒ Other (list below) **Website Application is being developed**

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?

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

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

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

(3) Assignment

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

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

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

(4) Admissions Preferences

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

b. Transfer policies:
In what circumstances will transfers take precedence over new admissions? (list below)
☒ Emergencies
☒ Overhoused
☒ Underhoused
☒ Medical justification
☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)
☒ Resident choice: (state circumstances below) **Closer to Work or School**
☐ 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**)
*****Local Preference for Working Families**

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

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

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

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on.

If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

1 Date and Time

Former Federal preferences:

1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
1 Victims of domestic violence
2 Substandard housing
1 Homelessness
2 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)

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)

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

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

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

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
☒ Criminal or drug-related activity
☐ Other (describe below)

(2) Waiting List Organization

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

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

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

☒ PHA main administrative office
☐ Other (list below)

(3) Search Time

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

If yes, state circumstances below:

(4) Admissions Preferences

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

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

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

Date and Time

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

Other preferences (select all that apply)
☒ Working families and those unable to work because of age or disability
☐ Veterans and veterans' families
☐ Residents who live and/or work in your jurisdiction
☐ Those enrolled currently in educational, training, or upward mobility programs
☐ Households that contribute to meeting income goals (broad range of incomes)
☐ Households that contribute to meeting income requirements (targeting)
☐ Those previously enrolled in educational, training, or upward mobility programs

☐ Victims of reprisals or hate crimes
☒ Other preference(s) (list below) **Elderly**

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)
☒ Date and time of application
☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)
☐ This preference has previously been reviewed and approved by HUD
☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)
☐ The PHA applies preferences within income tiers
☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
☒ The Section 8 Administrative Plan
☒ Briefing sessions and written materials
☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
☒ Through published notices
☐ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

☐ $0
☐ $1-$25
☒ $26-$50

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

3. If yes to question 2, list these policies below**: Per HUD Policy**

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: **When 30% exceeds flat and ceiling rents**

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) **HUD Determined**

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) **Adopted in 2000 and updated yearly**.

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 below100% of FMR
☐ 100% of FMR
☒ Above 100% but at or below 110% of FMR
☐ Above 110% of FMR (if HUD approved; describe circumstances below)

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

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

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

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

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

☒ Annually
☐ Other (list below)

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

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

(2) Minimum Rent

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

☐ $0
☐ $1-$25
☒ $26-$50

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

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

☒ An organization chart showing the PHA's management structure and organization is attached.

☐ A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	688	200
Section 8 Vouchers	212	25
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)

Personnel Policy
Maintenance Operating Procedures
AHA Policy Manual
Pest Control Policy
Admissions and Continued Occupancy Policy
Grievance Procedure
AHA Safety Policy

(2) Section 8 Management: (list below)

Administrative Plan

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)

-or-

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

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

Capital Fund Grant Number AL09P004501-08 FFY of Grant Approval: 2008

☒ Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	225,000.00
3	1408 Management Improvements	227,200.00
4	1410 Administration	116,254.30
5	1411 Audit	800.00
6	1415 Liquidated Damages	
7	1430 Fees and Costs	77,000.00
8	1440 Site Acquisition	
9	1450 Site Improvement	130,822.62
10	1460 Dwelling Structures	

11	1465.1 Dwelling Equipment-Nonexpendable	35,000.00
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	15,000.00
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	1501 Bond Finance	313,821.08
20	1502 Contingency	
21	**Amount of Annual Grant (Sum of lines 2-19)**	1,140,898.00
22	Amount of line 20 Related to LBP Activities	
23	Amount of line 20 Related to Section 504 Compliance	
24	Amount of line 20 Related to Security	
25	Amount of line 20 Related to Energy Conservation Measures	

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
HA-WIDE	1. Operations	1406	225,000.00
HA WIDE MGMT IMPROVEMENTS	1. Resident Salary/Fringe	1408.1	58,200.00
	2. Youth (Boys & Girls Club)	1408.2	20,000.00
	3. Resident Program	1408.3	8,000.00
	4. Mgmt Consultant	1408.4	8,000.00
	5. Hiring Security	1408.5	133,000.00
		Total 1408	227,200.00
HA WIDE	1. Pro-rate staff salaries	1410.1	116,254.30

form **HUD 50075** (03/2006)

Admin	2. Sundry 3. Travel 4. Fringe Benefits	1410.19 1410.10 1410.9 Total 1410	 116,254.30
HA WIDE	Audit Costs	1411 Total 1411	800.00 800.00
HA WIDE	1. A & E Fee 2. Technical assistance	1430.1 1430.7 Total 1430	7,000.00 70,000.00 77,000.00
HA WIDE	Stove/Refrigerator	1465.1 Total 1465	35,000.00 35,000.00
HA WIDE NON DWELL	1. Maint. Equip. 2. Computer Equip	1475.2 1475.4 Total 1475.4	7,500.00 7,500.00 15,000.00
AL 4-4 Glen Addie Homes	Doors/Windows	1460 Total 1460	130,822.62 130,822.62
HA WIDE	Bond Finance	1501	313,821.08
	Project Total		1,140,898.00

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)
Resident Salary	09/27/2010	09/18/2012
Youth Program	09/27/2010	09/18/2012
Resident Program	09/27/2010	09/18/2012
Mgmt Consultant	09/27/2010	09/18/2012
Security	09/27/2010	09/18/2012
4-4 Constantine	09/27/2010	09/18/2012

(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)

Capital Fund Program Five-Year Action Plan
Part I: Summary

ame: ANNISTON HOUSING AUTHORITY				☒**Original 5-Year Plan** ☐**Revision No:**	
Development Number/Name/HA-Wide A.	Year 1	Work Statement for Year 2 FFY Grant: 2009 PHA FY:	Work Statement for Year 3 FFY Grant:2010 PHA FY:	Work Statement for Year 4 FFY Grant: 2011 PHA FY:	Work Statement for Year 5 FFY Grant:2012 PHA FY:
L 4-4 Constantine Homes HA Wide Contingency	Annual Statement	$130,822.62	$130,822.62	$130,822.62	$130,822.62

B. Physical Improvements Subtotal		$130,822.62	$130,822.62	$130,822.62	$130,822.62
anagement Improvements		$227,200.00	$227,200.00	$227,200.00	$227,200.00
D. HA-Wide Nondwelling Structures & Equipment		$35,000.00	$35,000.00	$35,000.00	$35,000.00
E. Administration		$116,254.30	$116,254.30	$116,254.30	$116,254.30
F. Others (Fees&Costs, Relocation & audit))		$77,000.00	$77,000.00	$77,000.00	$77,000.00
G. Operations		$225,000.00	$225,000.00	$225,000.00	$225,000.00
H. Bond Finance		$313,821.08	$313,821.08	$313,821.08	$313,821.08
P Funds Listed for 5-year planning		$1,140,898.00	$1,140,898.00	$1,140,898.00	$1,140,898.00
placement Housing Factor Funds					

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

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

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

b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)
   - ☐ Revitalization Plan under development
   - ☐ Revitalization Plan submitted, pending approval
   - ☐ Revitalization Plan approved
   - ☐ Activities pursuant to an approved Revitalization Plan underway

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

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

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

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

Demolition/Disposition Activity Description
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition ☐

Disposition ☐
3. Application status (select one) Approved ☐ Submitted, pending approval ☐ Planned application ☐
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected: 6. Coverage of action (select one) ☐ Part of the development ☐ Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

Designation of Public Housing Activity Description
1a. Development name:

1b. Development (project) number:
2. Designation type: Occupancy by only the elderly ☐ Occupancy by families with disabilities ☐ Occupancy by only elderly families and families with disabilities ☐
3. Application status (select one) Approved; included in the PHA's Designation Plan ☐ Submitted, pending approval ☐ Planned application ☐
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)
5. If approved, will this designation constitute a (select one) ☐ New Designation Plan ☐ Revision of a previously-approved Designation Plan?
6. Number of units affected: 7. Coverage of action (select one) ☐ Part of the development ☐ 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? ☐ Assessment underway ☐ Assessment results submitted to HUD ☐ Assessment results approved by HUD (if marked, proceed to next question) ☐ Other (explain below)
3. ☐ Yes ☐ 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

Yeager and Boyd, LLC certifies that we have performed the initial required assessment for the Anniston Housing Authority. The assessment was performed by using information provided to our firm by the Anniston Housing Authority. We certify that the results of our assessment are as follows:

Development AL 04-1 is inappropriate for voluntary conversion. Our cost analysis demonstrates the cost of operations of the development are more cost efficient than tenant based assistance.

Development AL 04-1 is inappropriate for voluntary conversion. Our cost analysis demonstrates the cost of operations of the development are more cost efficient than tenant based assistance.

Development AL 04-2 is inappropriate for voluntary conversion. Our cost analysis demonstrates the cost of operations of the development are more cost efficient than tenant based assistance.

Development AL 04-3 is inappropriate for voluntary conversion. Our cost analysis demonstrates the cost of operations of the development are more cost efficient than tenant based assistance.

Development AL 04-4 is inappropriate for voluntary conversion because voluntary conversion would not principally benefit the residents of this development. The conversion would not provide residents with better housing choices due to the limited housing market and the conversion would affect the availability of affordable housing stock in the area. At the time of this assessment the occupancy rate is 99% and the waiting list has approximately 200 people waiting to be housed with the Authority.

Development AL 04-5 is inappropriate for voluntary conversion because voluntary conversion would not principally benefit the residents of this development. The conversion would not provide residents with better housing choices due to the limited housing market and the conversion would affect the availability of affordable housing stock in the area. At the time of this assessment the occupancy rate is 99% and the waiting list has approximately 200 people waiting to be housed with the Authority.

Development AL 04-6 is inappropriate for voluntary conversion because voluntary conversion would not principally benefit the residents of this development. The conversion would not provide residents with better housing choices due to the limited housing market and the conversion would affect the availability of affordable housing stock in the area. At the time of this assessment the occupancy rate is 99% and the waiting list has approximately 200 people waiting to be housed with the Authority.
Development AL 04 7 is inappropriate for voluntary conversion because voluntary conversion would not principally benefit the residents of this development. The conversion would not provide residents with better housing choices due to stock in the area. At the time of this assessment the occupancy rate is 99% and the waiting list has approximately 200 people waiting to be housed with the Authority.the limited housing market and the conversion would affect the availability of affordable housing

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 complete11A.

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: ☐ HOPE I ☐ 5(h) ☐ Turnkey III ☐ Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) ☐ Approved; included in the PHA's Homeownership Plan/Program ☐ Submitted, pending approval ☐ 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)
☐ Part of the development
☐ Total development

B. Section 8 Tenant Based Assistance

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

2. Program Description:

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

If the answer to the question above was yes, which statement best describes the number of participants? (select one)
☐ 25 or fewer participants
☐ 26 - 50 participants
☐ 51 to 100 participants
☐ more than 100 participants

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

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

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

COMMUNITY SERVICE POLICY

A. Each non-exempt adult public housing resident must contribute eight (8) hours of community service or participate in a self-sufficiency program for eight (8) hours in each month. Community Service is the performance of voluntary work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community Service does not include political activities.

Note:
For purposes of the community service requirement an adult is a person eighteen (18) years or older.

B. Exempt: The following adult family members are exempt:
(1) 62 years of age or older
(2) Persons with qualifying disabilities which prevent the individual's compliance. The individual must provide appropriate documentation to support the qualifying disability, which may include self certification. In addition, any person who is the primary caretaker of such individual is exempt.
(3) Persons engaged in work activities as defined in section 407.(d) of the Social Security Act.
(4) Persons participating at least eight (8) hours a month in a welfare-to-work program.
(5) Person receiving assistance from and in compliance with a State program funded under Part A, Title IV of the Social Security Act.

C. Proof of Compliance: Each head of household must present to the HA office documentation that he/she and all other persons eighteen years of age or older living in the household, who are not exempt, have complied with this section. Documentation may include a letter from the agency on letterhead or other official document. Any such documentation shall be verifiable by the HA. Failure to comply with the Community Service Requirement and to provide appropriate verifiable documentation prior to the date required shall result in the lease not being renewed by the HA. Provided, however, that the HA may allow the family member who is not in compliance to complete the requirements within the following year as follows: The head of household and the person not in compliance shall sign an agreement stating that the deficiency will be cured within the next twelve months. Proof of compliance with the agreement shall be made by the head of household annually at re-certification. Failure to comply with the agreement shall result in the lease being terminated for such non-compliance, unless the person(s), other than the head of household, no longer resides in the unit and has been removed from the lease.

FAILURE TO COMPLY WITH THE COMMUNITY SERVICE REQUIREMENT AND TO PROVIDE APPROPRIATE VERIFIABLE DOCUMENTATION PRIOR TO THE DATE REQUIRED SHALL RESULT IN THE LEASE NOT BEING RENEWED BY THE HA.

D. Changes in Exempt or Non-Exempt Status will be handled during an interim or annual re-certification.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? 04/01/2000

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.)

Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Cooper Care Program	*28*	*Application*	*Cooper Homes*	*Both*
Headstart	57	*Application*	Constantine Homes	*Both*
Boy & Girls Club	111	*Application*	Constantine Homes	*Both*
Boys & Girls Club	55	Sign-up	Norwood Homes	*Both*
Girl Scouts	34	Sign-up	Glen Addie/Norwood	*Both*

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

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

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

☒ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies

☒ Informing residents of new policy on admission and reexamination

☒ Actively notifying residents of new policy at times in addition to admission and reexamination.
☒ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
☐ Establishing a protocol for exchange of information with all appropriate TANF agencies
☐ Other: (list below)

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

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)

Glen Addie Homes **Cooper Homes**
Norwood Homes **Constantine Homes**
Barber Terrace

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)

Glen Addie Homes **Cooper Homes**
Norwood Homes **Constantine Homes**
Barber Terrace

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)

Glen Addie Homes **Cooper Homes**
Norwood Homes **Constantine Homes**
Barber Terrace

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)]

Pet Policy

Anniston Housing Authority (HA)

Section I.

1. Pet ownership: A tenant may own one or more common household pets or have one or more common household pets present in the dwelling unit of such tenant, subject to the following conditions:

    1. Each Head of Household may own up to two pets. If one of the pets is a dog or cat, (or other four legged animal), the second pet must be contained in a cage or an aquarium for fish. Each bird or other animals, other than fish, shall be counted as one pet.

    2. If the pet is a dog or cat, it must be neutered/spayed by the age of six (6) months, and cats must be declawed by the age of three (3) months. The evidence can be provided by a statement/bill from a veterinarian and/or staff of the humane society. The evidence must be provided prior to the execution of this agreement and/or within 10 days of the pet becoming of the age to be neutered/spayed or declawed. Tenant must provide waterproof and leak proof litter boxes for cat

waste, which must be kept inside the dwelling unit. Cardboard boxes are not acceptable and will not be approved. The Tenant shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary. Also, the weight of a cat cannot exceed 10 pounds (fully grown) and a dog may not exceed 20 pounds in weight (fully grown). All other four legged animals are limited to 10 pounds (fully grown).

3. If the pet is a bird, it shall be housed in a birdcage and cannot be let out of the cage at any time.

4. If the pet is a fish, the aquarium must be twenty gallons or less, and the container must be placed in a safe location in the unit. The Tenant is limited to one container for the fish; however, there is no limit on the number of fish that can be maintained in the container as long as the container is maintained in a safe and nonhazardous manner.

5. If the pet is a cat or dog, it must have received rabies and distemper inoculations or boosters, as applicable. Evidence of inoculations can be provided by a statement/bill from veterinarian or staff of the humane society and must be provided before the execution of this agreement.

6. All pets must be housed within the unit and no facilities can be constructed outside of the unit for any pet. No animal shall be permitted to be loose and if the pet is taken outside it must be taken outside on a leash and kept off other Tenant's lawns. Also, all pets must wear collars with identification at all times. Pets without a collar will be picked-up immediately and transported to the Humane Society or other appropriate facility.

7. All authorized pet(s) must be under the control of an adult. An unleashed pet, or one tied to a fixed object, is not considered to be under the control of an adult. Pets which are unleashed, or leashed and unattended, on HA property may be impounded and taken to the local Humane Society. It shall be the responsibility of the Tenant to reclaim the pet at the expense of the Tenant. Also, if a member of the HA staff has to take a pet to the Humane Society the Tenant will be charged $50 to cover the expense of taking the pet(s) to the Humane Society.

8. Pet(s) may not be left unattended for more than twenty-four consecutive hours. If it is reported to HA staff that a pet(s) has been left unattended for more than a twenty-four (24) consecutive hour period, HA staff may enter the unit and remove the pet and transfer the pet to the humane society. Any expense to remove and reclaim the pet from any facility will be the responsibility of the Tenant. In the case of an emergency, the HA will work with the resident to allow more than 24 hours for the resident to make accommodations for the pet.

9. Pet(s), as applicable, must be weighed by a veterinarian or staff of the humane society. A statement containing the weight of the pet must be provided to the HA prior to the execution of this agreement and upon request by the HA.

1. Responsible Pet Ownership: Each pet must be maintained responsibly and in accordance with this pet ownership lease addendum and in accordance with all applicable ordinances, state and local public health, animal control, and animal anti-cruelty laws and regulations governing pet ownership. Any waste generated by a pet must be properly and promptly disposed of by the tenant to avoid any unpleasant and unsanitary odor from being in the unit.

2. Prohibited Animals: Animals or breeds of animals that are considered by the HA to be vicious and/or intimidating will not be allowed. Some examples of animals that have a reputation of a vicious nature are: reptiles, rottweiler, doberman

pinscher, chows, pit bulldog, and/or any animal that displays vicious behavior. This determination will be made by a HA representative prior to the execution of this lease addendum.

4. Pet(s) shall not disturb, interfere or diminish the peaceful enjoyment of other tenants. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities. This includes any pets who make noise continuously and/or incessantly for a period of 10 minutes or intermittently for one - half hour or more and therefore disturbs any person at any time of the day or night. The Housing Manager will terminate this authorization if a pet disturbs other tenants under this section of the lease addendum. The Tenant will be given one week to make other arrangements for the care of the pet or the dwelling lease will be terminated

5. If the animal should become destructive, create a nuisance, represent a threat to the safety and security of other persons, or create a problem in the area of cleanliness and sanitation, the Housing Manager will notify the tenant, in writing, that the animal must be removed from the Public Housing Development, within 10 day of the date of the notice from the HA. The Tenant may request a hearing, which will be handled according to the HA's established grievance procedure. The pet may remain with the tenant during the hearing process unless the HA has determined that the pet may be a danger or threat to the safety and security of other persons. If this determination has been made by the HA, the pet must be immediately removed from the unit upon receipt of the notice from the HA.

6. The Tenant is solely responsible for cleaning up the waste of the pet within the dwelling and on the premises of the public housing development. If the pet is taken outside it must be on a leash at all times. If there is any visible waste by the pet it must be disposed of in a plastic bag, securely tied and placed in the garbage receptacle for their unit. If the HA staff is required to clean any waste left by a pet, the Tenant will be charged $25 for the removal of the waste.

7. The Tenant shall have pets restrained so that maintenance can be performed in the apartment. The Tenant shall, whenever an inspection or maintenance is scheduled, either be at home or shall have all animals restrained or caged. If a maintenance person enters an apartment where an animal is not restrained, maintenance shall not be performed, and the Tenant shall be charged a fee of $25.00. If this same situation again occurs, the pet shall be removed from the premises. Pets that are not caged or properly restrained may be impounded by animal control officers or by HA staff and taken to the local Humane Society. It shall be the responsibility of the Tenant to reclaim the pet at the expense of the Tenant. Also, if a member of the HA staff takes a pet to the Humane Society the Tenant will be charged an additional $50 to cover the expense of taking the pet(s) to the Humane Society. The housing authority shall not be responsible if any animal escapes from the residence due to maintenance, inspections or other activities of the landlord.

8. Pets may not be bred or used for any commercial purposes.

Section II. SCHEDULE OF ANNUAL FEES AND INITIAL DEPOSIT

FEE AND DEPOSIT SCHEDULE

(An Annual Fee and Deposit is required for each pet)

Type of Pet	Fee	Deposit
Dog	$150	$250
Cat	$100	$150
Fish Aquarium	$50	$100
Fish Bowl (Requires no power and no larger than two gallons)	$0	$25
Caged Pets	$100	$150

Note: The above schedule is applicable for each pet; therefore, if a tenant has more than one pet he or she must pay the applicable annual fee and deposit for each pet.

The entire annual fee and deposit (subject to the exception listed below) must be paid prior to the execution of the lease addendum. No pet shall be allowed in the unit prior to the completion of the terms of this pet policy.
The annual fee shall be paid at the time of reexamination each year and all proof of inoculations and other requirements shall be made available to the HA at such time. The Annual Fee is not reimbursable. The deposit made shall be utilized to offset damages caused by the pet and/or tenant. Any balance, if any, from the deposit will be refunded to the tenant. THERE SHALL BE NO REFUND OF THE ANNUAL FEE.

It shall be a serious violation of the lease for any tenant to have a pet without proper approval and without having complied with the terms of this policy. Such violation shall be considered to be a violation of Paragraph IV (L) of the lease (a serious violation) and the HA will issue a termination notice. The tenant will be entitled to a grievance hearing in accordance with the provisions of Paragraph 5 of this Pet Policy or the Grievance Procedure, as applicable.

RESIDENT ACKNOWLEDGMENT

After reading and/or having read to me this lease addendum I, _____ agree to the following: (Print Name)

I agree to abide by the requirements outlined in this lease addendum for pet ownership and to keep the pet(s) in accordance with this lease addendum.

I agree and understand that I am liable for any damage or injury whatsoever caused by pet(s) and shall pay the landlord or applicable party for any damages or injury caused by the pet(s). I also realize that I should obtain liability insurance for pet ownership and that paying for the insurance is my responsibility.

I agree to accept full responsibility and will indemnify and hold harmless the landlord for any claims by or injuries to third parties or their property caused by my pet(s).

I agree to pay a non-refundable annual fee of $_____ to cover some of the additional operating cost incurred by the HA. I also understand that this fee is due and payable prior to the execution of this lease addendum and each twelve months thereafter.

I agree to pay a refundable pet deposit of $_____ to the HA. The Annual Fee and Initial Deposit must be paid prior to the execution of this lease addendum. The pet deposit may be used by the Landlord at the termination of the lease toward payment of any rent or toward payment of any other costs made necessary because of Tenant's occupancy of the premises. Otherwise, the pet deposit, or any balance remaining after final inspection, will be returned to the Tenant after the premises are vacated and all keys have been returned.

I AGREE AND UNDERSTAND THAT ALL INFORMATION CONCERNING MY PET(S) MUST BE UPDATED ANNUALLY AND PROVIDED TO THE HA AT THE ANNUAL REEXAMINATION. ANNUAL FEES SHALL BE PAYABLE IN FULL TWELVE MONTHS FROM THE APPROVAL DATE.

I AGREE AND UNDERSTAND THAT VIOLATING THIS LEASE ADDENDUM MAY RESULT IN THE REMOVAL OF THE PET(S) FROM THE PROPERTY OF THE HA AND/OR EVICTION. I, ALSO UNDERSTAND THAT I MY NOT BE ALLOWED TO OWN ANY TYPE OF PET IN THE FUTURE WHILE BEING AN OCCUPANT OF THE HA.

I ALSO UNDERSTAND THAT I MUST OBTAIN PRIOR APPROVAL FORM THE HA BEFORE MAKING A CHANGE OF A PET FOR WHICH THIS POLICY WAS APPROVED OR ADDING A SECOND PET. ALSO, A PICTURE MAY BE TAKEN BY THE HA STAFF OF THE PET (S) FOR DOCUMENTATION.

Head of Household Signature Date

Housing Authority Representative Signature Date

form **HUD 50075** (03/2006)

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

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

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

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

1. ☒ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

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

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

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

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

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

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

☐ Attached at Attachment (File name)

☐ Provided below:

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

☐ Considered comments, but determined that no changes to the PHA Plan were necessary.

☐ The PHA changed portions of the PHA Plan in response to comments
List changes below:

☐ Other: (list below)

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

MAYOR CHOSEN - Anniston Mayor appointed Ms. Mae Thomas Hall from Parkwin Homes (4-6 public housing). Her first Board meeting was March 25, 2003.

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

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

3. Description of Resident Election Process

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

☐ Candidates were nominated by resident and assisted family organizations

☐ Candidates could be nominated by any adult recipient of PHA assistance

☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot

☐ Other: (describe)

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here)

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

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

☐ Other: (list below)

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

D. Other Information Required by HUD

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

Attachments

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

ANNISTON HOUSING AUTHORITY

RESIDENT ADVISORY BOARD MEMBERS

As of 01-01-2007

Fannie Leonard

Mae Thomas Hall

Sarah Borrell

Willie Pearl Fomby

Bobbie Jean Wright

Margaret Cook

Amma Welch

Debra Tarrant

Larry Ware

Jacqueline Keith

Cathy Hood

Brenda Gholston

Tanya Sayers

Beverly Willis

RASS IMPROVEMENTS

Communication

The Anniston Housing Authority will continue to provide residents information concerning maintenance and repair, modernization, meetings, and events through the bi-monthly newsletter, *The Informer*. We will also post flyers in the administrative offices of each housing complex and on mailbox clusters. Residents will be notified of emergency situations such as water shut off by receiving a flyer on their door, information posted on mailbox clusters or by calling the office.

We will continue to investigate all verbal and written questions and concerns from residents and we will reply to their questions and concerns in writing within seven (7) working days of receiving the transaction.

Anniston Housing Authority's staff goal is to recognize residents as our ultimate customer; therefore, we pledge to be courteous and professional with the residents at all times.

Management will be asked to attend 25% of the residents organization meetings.

Safety

The Anniston Housing Authority has provided the residents with off duty police officers to patrol the housing authority's property and surrounding community and cellular telephones so residents can speak directly to the police officers. At the end of each week, AHA receives a police report of different violations that took place on housing property during the week.

Within the next six (6) months, each resident will receive a visit from the Resident Initiative Coordinator so together we can examine the safety in the community. Once the information is compiled, we will target a technical assistant to provide us with a tool to work with so the residents can feel safe in their homes and enjoy a drug free, decent, safe, and sanitary community.

Neighborhood Appearance

The Anniston Housing Authority's Maintenance Department will continue to provide the Residents of the Anniston Housing Authority with free lawn care. Extra residents are hired during summer months for grass cutting and for the up-keep of common areas including the playground and parking lots.

Most of the exteriors of the housing complex are between 50 to 60 years old. We will continue to keep the exteriors of the housing complex free of graffiti.

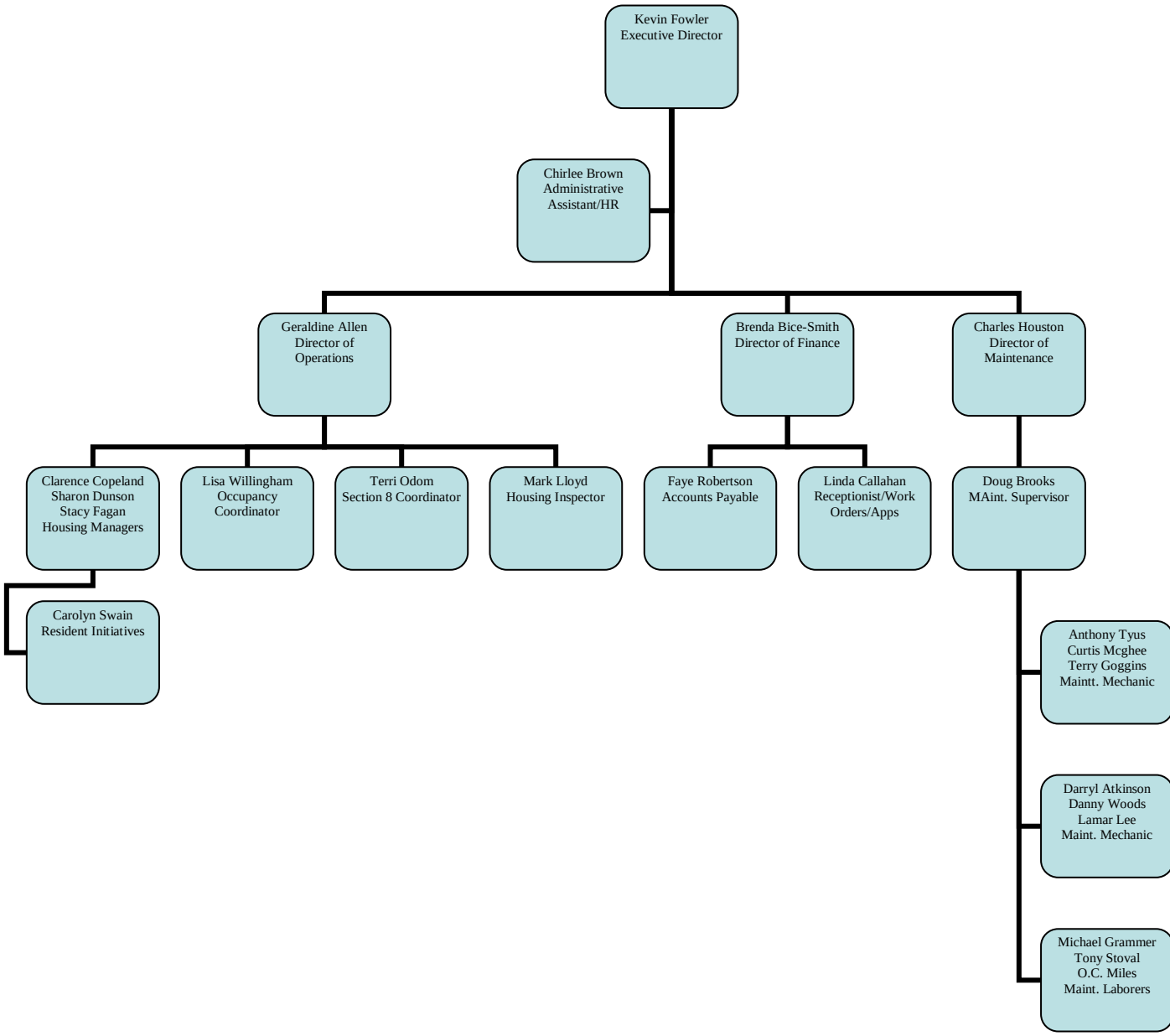
Each resident is responsible for his/her yard. Trash/litter, broken glass in the yard is the responsibility of the resident and residents will be charged a fine if AHA Maintenance Department has to clean it up.

Residents that are experiencing the presence of rodents and insects inside the apartment must make arrangements with the AHA Maintenance Department for treatment.

The Anniston Housing Authority adhere and abide by the City of Anniston ORDINANCE NO. 99-0-15 AN ORDINANCE DECLARING CERTAIN ACTS AND NOISES UNLAWFUL; PROVIDING PENALTIES FOR VIOLATION THEREOF.

Community Policing has been effective continuously in the Anniston Housing Authority since receiving the PHDEP Grant in 1997. AHA will introduce other crime prevention programs such as Neighborhood Watch, Block Watch, Tenant Patrol, or Street Patrol to the residents within the next 12 months. Residents will have the opportunity to decide what crime prevention program they want in the community and AHA will provide the residents with the necessary training and material to implement the program.

ANNISTON HOUSING AUTHORITY



DECONCENTRATION POLICY

1. Objective: The objective of the Deconcentration Rule for public housing units is to ensure that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development. The specific objective of the housing authority is to house no less than 40 percent of its public housing inventory with families that have income at or below 30% of the area median income by public housing development. Also the housing authority will take actions to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the housing authority does not concentrate families with higher income levels, it is the goal of the housing authority not to house more than 60% of its units in any one development with families whose income exceeds 30% of the area median income. The housing authority will track the status of family income, by development, on a monthly basis by utilizing income reports generated by the housing authority's computer system.

2. Actions: To accomplish the deconcentration goals, the housing authority will take the following actions:

   A. At the beginning of each housing authority fiscal year, the housing authority will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of move-ins from the previous housing authority fiscal year.

   B. To accomplish the goals of: (1) Housing not less than 40% of its public housing inventory on an annual basis with families that have incomes at or below 30% of area median income, and (2) Not housing families with incomes that exceed 30% of the area median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, the housing authority's Tenant Selection and Assignment Plan, which is a part of this policy, provides for skipping families on the waiting list to accomplish these goals.

Component 3, (6) Deconcentration and Income Mixing

a.__X___YES _____NO Does the PHA have any general occupancy (family) housing developments covered by deconcentration. If no, this section is complete. If yes, continue to next question.

b._____YES ___X____NO Do any of these covered developments have average incomes above or below 85 % to 115% of the average of such developments. If no this section is complete.

STATEMENT OF PROGRESS

5 YEARS GOALS

The following information is an update relating to the Anniston Housing Authority's progress in meeting its 5 year goals set forth in the PHA plan.

Goal #	**Current Update**
1	Apply for up to 500 additional rental vouchers by FY 2008. Currently, the Anniston Housing Authority has just recently met the minimum lease up threshold for applying. The AHA will be making a grant application for some vouchers under the Mainstream program in the near future. **Would like to receive additional vouchers from Talladega HA.**
2	Reduce public housing vacancies to at least 5% by FY 2007. Currently, the AHA is at a 8.2% vacancy rate. The increase in vacancy rate is do to modernization that took place at AL004002.
3	Improve PHAS score to 90% by FY 2007. Currently the AHA is working on all areas related to PHAS. Maintenance programs are in place to improve on PASS. Management has been more actively involved in communicating with resident to improve on our RASS scores. Management has been proactively working towards a reduction in unit turn around time to increase our MASS scores. Strong Policies and sound fiscal management have been implemented to improve even further in FASS scores. We intend on seeing improvement this year.
4	Improve SEMAP scoring to 90%. We are in the process of submitting our current SEMAP report and feel confident that we will be a high performer. **FY 2001-2002 the Anniston Housing received a High Performer Score for SEMAP.**
5	Install A/C at 4-1, 4-2, 4-4, 4-5, 4-6, 4-7a, 4-7b by FY 2007. Air conditioning has been install at 4-1 for 504 accessible units. Current plans are for air conditioning to be installed at these other listed sites by FY 2006. Currently, we are in litigation over the Mitsubishi Ductless units that were installed at 4-1 and 4-5 as of 01/01/2008.
6	Increase the number and percentage of employed persons in assisted families 5 % by FY 2007. Mandatory income disregards have been implemented to encourage persons to become employed. Beyond that, the AHA had received ROSS grant funding for training and self-sufficiency education. The housing authority is actively working with resident leaders to promote education and employment.

7 All management work items are consistent with the Annual Statement and proceeding as planned.

8 All administrative items are consistent with the Annual Statement and proceeding as planned.

CAPITAL FUND PROGRAM TABLES START HERE

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number AL09P004501-07 Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant:

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2007 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds			0.00	
2	1406 Operations	225,000.00		0.00	
3	1408 Management Improvements	227,200.00		0.00	
4	1410 Administration	116,254.30		0.00	
5	1411 Audit	800.00		0.00	
6	1415 Liquidated Damages				
7	1430 Fees and Costs	77,000.00		0.00	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	130,822.62		0.00	
11	1465.1 Dwelling Equipment—Nonexpendable	35,000.00		35,500.00	1,839.95
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	15,000.00		0.00	
14	1485 Demolition				

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number AL09P004501-07 Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant:

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2007 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Bond Finance	313,821.08		313,821.08	0.00
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	1,140,898.00		348,821.08	1,839.95
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number**AL09P004501-07 Capital Fund Program Grant No: Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	1. Operations	1406		225,000.00		0		
HA-WIDE MGMT IMPROV	1. Res. Init. Sal. 2. Youth Prog (B&G) 3. Res. Programs 4. Mgmt. Consultant 5. Security	1408.2 1408.4 1408.5 1408.6 1408.7 Total 1408		54,200.00 20,000.00 10,000.00 10,000.00 133,000.00 227,200.00		0 0 0 0 0 0		
HA-WIDE	1. CFP Mgmt. Fees	1410.1 Total 1410		116,254.30 116,254.30		0 0		

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number**AL09P004501-07 Capital Fund Program Grant No: Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	Audit Costs	1411		800.00		0		
		Total 1411		800.00		0		
HA-WIDE	1. A & E Fee 2. Tech Assist. Advisor	1430.1 1430.7		7,000.00 70,000.00		0 0		
		Total 1430		77,000.00		0		
HA-WIDE	1. Range/Refrigerators	1465.1		35,000.00		35,000.00	1,839.95	
		Total 1465		35,000.00		35,000.00	1,839.95	

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number**AL09P004501-07 Capital Fund Program Grant No: Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	1. Maint. Equip. 2. Comp. Equip.	1475.2 1475.4 Total 1475		7,500.00 7,500.00 15,000.00		0 0 0		
AL 4-4	Structure Improvements	1460 Total 1460		130,822.62 130,822.62		0 0		
HA-WIDE	Bond Finance	1501 Total 1501		313,821.08 313,821.08		313,821.08 313,821.08	0 0	

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number**AL09P004501-07 Capital Fund Program Grant No: Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

PHA Name: ANNISTN HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program No: **AL09P004501-07** Replacement Housing Factor No:				**Federal FY of Grant:** 2007	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Resident Sal.	9/30/2009			9/30/2011			

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

PHA Name: ANNISTN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program No: **AL09P004501-07** Replacement Housing Factor No:	**Federal FY of Grant:** 2007

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Youth Prog.	9/30/2009			9/30/2011			
Resident prog.	9/30/2009			9/30/2011			
Mgmt. Consultant	9/30/2009			9/30/2011			
Security	9/30/2009			9/30/2011			
4-4 Constantine	9/30/2009			9/30/2011			

CAPITAL FUND PROGRAM TABLES START HERE

PHA Name: **ANNISTON HOUSING AUTHORITY** **Period Ending 09/30/2007 Final** **FINAL PERFORMAN AND EVALUATION REPORT**	**Grant Type and Number AL09P004501 03** Capital Fund Program Grant No: Replacement Housing Factor Grant No: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	**Revised**	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs	$190,138.00	$179,495.99	$179,495.99	$179,459.99
	Management Improvements Hard Costs				
4	1410 Administration	$95,068.00	$95,136.63	$95,136.63	$95,136.63
5	1411 Audit	$800.00	$0.00	$800.00	$800.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	$83,856.00	$83,710.53	83,710.53	$83,710.53
8	1440 Site Acquisition		$0.00	$0.00	$0.00
9	1450 Site Improvement	0.00	$0.00		
10	1460 Dwelling Structures	$226,953.65	$0.00	$226,953.65	226,953.65
11	1465.1 Dwelling Equipment—Nonexpendable	$12,031.00	$13,517.35	$13,517.35	$13,517.35
12	1470 Nondwelling Structures	0.0	0.00	0.00	0.00

	PHA Name: **ANNISTON HOUSING AUTHORITY** **Period Ending 09/30/2007 Final** **FINAL PERFORMAN AND EVALUATION REPORT**	**Grant Type and Number AL09P004501 03** Capital Fund Program Grant No: Replacement Housing Factor Grant No: Final Performance and Evaluation Report

	Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	13	1475 Nondwelling Equipment	$27,750.00	$36,982.50	$36,982.50	$36,982.50
	14	1485 Demolition				
	15	1490 Replacement Reserve/Bond Replacement	$314,072.35	$0.00	$314,071.35	$314,071.35
	16	1492 Moving to Work Demonstration				
	17	1495.1 Relocation Costs				
	18	1499 Development Activities				
	19	1502 Contingency				
		Amount of Annual Grant: (sum of lines…..)	$950,668.00	$0.00 $0.00 $0.00	$950,668.00 $0.00 $0.00	$950,668.00 $0.00 $0.00
		Amount of line XX Related to LBP Activities				
		Amount of line XX Related to Section 504 compliance				
		Amount of line XX Related to Security –Soft Costs				
		Amount of Line XX related to Security-- Hard Costs				
		Amount of line XX Related to Energy Conservation Measures				
		Collateralization Expenses or Debt Service				

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

PHA Name: Anniston Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09P004501-03 Replacement Housing Factor Grant No:					Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
	1. Operations								
HA-WIDE MGMT IMPROVMTS	1. Res. Init. Salary		1408.1	1 EA	$55,335.00	55,928.20	55,928.20	55,928.20	
	2. Youth Program (Boys and Girls Club)		1408.2	1 EA	$20,000.00	$19,999.21	$19,999.21	$19,991.21	
	3. Resident Program		1408.3	1 LS	$23,621.00	$21,383.58	$21,383.58	21,383.58	
	4. Management Consultant		1408.4	12 mos	$10,000.00	$1,000.00	$1,000.00	$1,000.00	
	5. Hiring of Security Guard		1408.5	12 mos	$81,182.00	81,185.00	$81,185.00	$81,185.00	
				Total 1408	$190,138.00	$179,495.99	$179,495.99	$179,495.99	

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

PHA Name: Anniston Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09P004501-03 Replacement Housing Factor Grant No:					Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
HA-WIDE ADMIN	1. Pro-rated Staff Salaries		15 EA	1410.1	$72,671.00	$72,858.05	$72,858.050	$72,858.05	
	2. Sundry		1 LS	1410.19	0.00	103.75	103.75	103.75	
	3. Travel		6 EA	1410.10	0.00	$0.00	$0.00	$0.00	
	4. Fringe Benefits		15 EA	1410.9	$22,397.00	$22,174.83	$22,174.83	$22,174.83	
			Total 1410		$95,068.00	95,136.63	95,136.63	95,136.63	
HA-WIDE AUDIT	1. Audit Cost			1411	$800.00	$0.00	$800.00	$800.00	
			Total 1411		$800.00	$0.00	$800.00	$800.00	

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

PHA Name: Anniston Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09P004501-03 Replacement Housing Factor Grant No:					Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
HA-Wide	1. A & E Fees,			1430.01	$22,330.00	$23,330.00	$23,330.00	$20,330.00	A
	2. Technical Assistant			1430.7	$60,526.00	$60,380.53	$60,380.53	$60,380.53	A
			Total 1430		$83,856.00	$83,710.53	$83,710.53	$80,710.53	
HA-WIDE	1. Stove/Refrigerator		1465.1	17 EA	$5,731.00	$13,517.35	$13,517.35	$13,517.35	C
	2. Space Heates		1465.2	18 EA	$6,300.00	0.00	0.00		A
			Total 1465		$12,031.00	$13,517.35	$13,517.35	$13,517.35	A
HA-WIDE	1. Computers		5 EA	1475.4	$4,750.00	$11,307.25	$11,307.25	$11,307.25	A
	2. Computer Monitors		5 EA	1475.4	$1,500.00	$1,500.00	$1,500.00	$1,500.00	A
	3. Computer Software		1 LS	1475.4	$1,500.00	$0.00	$0.00	$0.00	A
	4. Automobile Equipment		1 LS	1475.4	$20,000.00	$24,175.25	$24,175.25	$24,175.25	
	(Clerk of Works)								
			Total		$27,750.00	$36,982.50	$36,982.50	$36,982.50	

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

PHA Name: Anniston Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09P004501-03 Replacement Housing Factor Grant No:					Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
			1475						
	Dwelling Structure								
AL 4-2	Install Air Condition Sleeves		1460	96	$107,327.65	$0.00	$107,327.65	107,327.65	A
Cooper Homes									
AL 4-4 Constantine Homes	Install Air Condition Sleeves		1460	107	$119,626.00	$0.00	$119,626.00	119,626.00	A
				Total 1460	226,953.65	$0.00	226,953.65	$226,953.65	
	Bond Finance		1490		$314,072.00	$314,071.35	$314,071.35	$314,071.35	
				Total 1490	$314,072.00	$314,071.35	$314,071.35	$314,071.35	
				Total Project	$950,668.00	$0.00	$950,668.00	$950,668.00	

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

PHA Name: Anniston Housing Authority	Grant Type and Number Capital Fund Program Grant No: AL09P004501-03 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003

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

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

PHA Name: Anniston Housing Authority	Grant Type and Number Capital Fund Program Grant No: AL09P004501-03 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003

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

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

PHA Name: Annniston Housing Authority	Grant Type and Number Capital Fund Program No: AL09P004501-03 Replacement Housing Factor No:	Federal FY of Grant: 2003

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1. Resident Salary/Fringe	09/27/05			09/16/07			
2. Youth Program (Boys and Girls Club)	09/27/05			09/16/07			

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

PHA Name: Annniston Housing Authority	Grant Type and Number Capital Fund Program No: AL09P004501-03 Replacement Housing Factor No:	Federal FY of Grant: 2003

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
3. Resident Program	09/27/05 09/27/05			09/16/07 09/16/07			
4. Management Consultant	09/30/05			09/30/07			
5. Hiring of Secuity Guard	0927/05			0916/07			
AL 4-2 Cooper Homes	09/27/05			09/16/07			
AL Constantine Homes	09/27/05			09/16/07			

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

Activities for Year 1	Activities for Year :_____ FFY Grant:	Activities for Year: ____ FFY Grant:

	PHA FY:			PHA FY:		

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

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: AL09P004501-04 Replacement Housing Factor Grant No:	Federal FY of Grant: 2004

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2007 ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	$233,356.00	233,355.11	233,355.11	215,000.00
3	1408 Management Improvements	$233,356.00	$233,125.83	226,336.79	233,125.83
4	1410 Administration	$116,678.40	$116,569.64	116,569.64	116,569.64
5	1411 Audit	$ 800.00		800.00	800.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	$ 77,650.00		$77,650.00	76,117.78
8	1440 Site Acquisition				
9	1450 Site Improvement	$126,903.04	$137,354.51	137,354.51	31,959.46
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	$36,920.00	36,920.89	$36,920.89	36,920.89
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	$14,500.00	14,838.93	14,838.93	11,535.84
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Bond Finance	$326,620.56	$316,169.09	$316,169.09	316,169.09
20	1502 Contingency				

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

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: AL09P004501-04 Replacement Housing Factor Grant No:	Federal FY of Grant: 2004

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2007 ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
21	Amount of Annual Grant: (sum of lines 2 – 20)	$1,166,784.00	$1,166,784.00	1,166,784.00	1,049,764.60
222	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs	$133,600.00	$133,600.00	133,600.00	81,224.50
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	$126,903.04	$137,354.51	137,354.51	18,307.33

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:	Federal FY of Grant: 2004

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

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	1. Operations	1406		$233,356.00	233,355.11	233,355.11	233,355.11	
HA-Wide Mgmt Improvements	1. Resident Salary/Fringe 2.Youth Program (Boys and Girls Club) 2. Resident Program 3. Management Consultant 4. Hiring of Security	1408.1 1408.2 1408.3 1408.4 .1408.5		49,756.00 20,000.00 20,000.00 10,000.00 133,600.00	50,316.24 19,999.96 19,209.59 7,783.00 135,817.00	$50,316.24 19,999.96 19,209.59 7,783.00 $135,817.00	50,316.24 19,999.96 19,209.59 994.00 135,817.00	
		Total 1408		233,356.00	233,125.83	233,125.83	226,336.79	
HA-Wide	1. Pro-Rated Staff Salaries	1410.1		85,375.00	84,354.42	84,354.42	84,354.42	

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Admin	2.Sundry 3. Travel	1410.19 1410.10		1,650.00 1,650.00	3,657.21 0.00	3,657.21 0.00	3,657.21 0.00	
	4. Fringe Benefits	1410.9		28,003.40	28,558.01	28,558.01	28,558.01	
	TOTAL 1410			116,678.40	$116,569.64	116,569.64	116,569.64	
HA-Wide	Audit Cost	1411		800.00		800.00	800.00	

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Audit			Total 1411	800.00		800.00	800.00	

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	1. A & E Fee	1430.01	1 EA	8,250.00		8,250.00	6,732.00	
Fees and	2. Technical Assistant	1430.7	1 EA	69,400.00		69,400.00	69,385.78	

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Total 1430		Total 1430	77,650.00		77,650.00	76,117.78	

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	1. Stove/Refrigerator	1465.1	65/65	36,920.00	36,920.89	36,920.89	36,920.89	

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
			Total 1465					

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

PHA Name: ANNISTON HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09Poo4501-04 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2004

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	Office Equip	1475.1						
NON-DWELL	Computer Equip	1475.4	8	10,000.00	11,535.84	11,535.84	11,535.84	
	3. Computer Software	1475.4	1	1,000.00	0.00	0.00	0.00	
	4. A/C Maintenance Equip	1475.2	1 Lot	3,500.00	3,303.09	3,303.09	0.00	

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

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

PHA Name: ANNISTON HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:	**Federal FY of Grant:** 2004

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
			Total 1475	14,500.00	14,838.83	14,838.93	11,535.84	
	Bond Finance	1501	1	$316,169.09		316,169.09	316,169.09	
			Total 1501	$316,169.09		316,169.09	316,169.09	

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

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant NoAL09P004501-04 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
A-L 4-2 Cooper Homes	Water Replacement System	1460	Project	137,354.51		137,354.51	31,959.46	
AL 4-4 Constantine Homes		1460						
			Project Total	1,166.784.00		1,166,784.00	1,049,764.60	

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

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

PHA Name ANNISTON HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program No: AL09P004501-04 Replacement Housing Factor No:	**Federal**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reaso
	Original	Revised	Actual	Original	Revised	Actual	
1. Resident Salary	09/27/2006			09/16/2008			
2. Youth Program	09/27/2006			09/16/2008			
3.Resident Program	09/27/2006			09/16/2008			
4. Management Consultant	09/27/2006			09/16/2008			
5.Hiring of Security Guards.	09/27/2006			09/16/2008			
AL 4-2	09/27/2005			09/16/2007			
Cooper Homes							
AL 4-4 Constantine Homes	09/27/2005			09/16/2007			

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CAPITAL FUND PROGRAM TABLES START HERE

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: AL09P00450105 Replacement Housing Factor Grant No:	Federal FY of Grant: 2005

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2007 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	236,673.00		236,673.00	236,673.00
3	1408 Management Improvements	236,673.00		236,673.00	85,806.75
4	1410 Administration	118,336.80		118,336.80	4,275.940
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	77,650.00		77,650.00	67,893.42
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	140,679.94	137,354.11	137,354.11	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	36,920.00	37,083.50	37,083.50	37,083.50
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	14,500.00		14,500.00	8,665.16
14	1485 Demolition				
15	1490 Replacement Reserve				

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: AL09P00450105 Replacement Housing Factor Grant No:	Federal FY of Grant: 2005

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2007 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Bond Finance	316,169.09		316,169.09	231,015.00
20	1502 Contingency	9,092.00		9092.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	1,183,368.00		1,183,368.00	750,410.71
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant No: AL09P00450105 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA WIDE	Operations	**1406**		**236,673.00**		236,673.00	236,673.00	
HA WIDE MGMT IMPROVEMENTS	1. Resident salary/Fringe	1408.1	1 EA	49,756.00		49,756.00	34,380.23	
	2. Youth (Boys/Girls Club)	1408.2	1 EA	20,000.00		20,000.00	20,000.00	
	3. Resident Program	1408.3	1 LS	20,000.00		20,000.00	10,355.52	
	4. Mgmt Consultant	1408.4	12 Mos	13,317.00		13,317.00	0.00	
	5. Hiring Security	1408.5	12 Mos	133,600.00		133,600.00	21,071.00	
		Total 1408		**236,673.00**		236,673.00	85,806.75	
HA WIDE ADMIN	1. Pro-rates staff salaries	1410.1	15 EA	87,033.40		87,033.40	3,476.60	
	2. Sundry	1410.19	1 LS	1,650.00		1,650.00	254.02	
	3. Travel	1410.10	6 EA	1,650.00	1,486.50	1,486.50	0	
	4. Fringe Benefits	1410.9	15 EA	28,003.40		28,003.40	0.00	

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant No: AL09P00450105 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
		Total 1410		**118,336.80**	118,173.30	118,173.30	4,275.94	
HA WIDE	1. A & E Fee 2. Tech Assist	1430.1 1430.7	1 EA 1 EA	8,250.00 69,400.00		8,250.00 69,400.00	0.00 67,893.42	
		Total 1430		**77,650.00**		77,650.00	67,893.42	
HA WIDE DWELLING STRUCTURES	1. Stove/Refrigerator	1465.1	104 EA	36,920.00	37,083.50	37,083.50	37,083.50	
		Total 1465		**36,920.00**	37,083.50	37,083.50	37,083.50	
AL 4-1 Constantine	Fencing	1460	161 DU	137,354.11		137,354.11	0.00	
		Total 1460		**137,354.11**		137,354.11	0.00	

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

PHA Name: ANNISTON HOUSING AUTHORITY		**Grant Type and Number** Capital Fund Program Grant No: AL09P00450105 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA WIDE NON-DWELLING	1. Office Equip 2. Maint. Equip 3. Computer Equip	1475.1 1475.2 1475.4	1 LS 1 LS 6 EA	2,500.00 3,500.00 8,500.00		2,500.00 3,500.00 8,500.00	0.00 0.00 5,834.84	
		Total 1475		**14,500.00**		14,500.00	5,834.84	
	Bond Finance	1501	1 EA	316,169.09		316,169.09	231,015.00	
		Total 1501		**316,169.09**	312,843.26	312,843.26	312,843.26	
	Contingency	1502		9,092.00		9,092.00	0.00	
		Total 1502		**9,092.00**		9,092.00	0.00	
		Project Total		**1,183,368.00**		1,183,368.00	750,410.71	

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

PHA Name: ANNISTON HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program No: AL09P00450105 Replacement Housing Factor No:	**Federal FY of Grant:** 2005

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Resident Salary	09/27/2005			09/16/2007			
Youth Program	09/27/2005			09/16/2007			
Resident Program	09/27/2005			09/16/2007			
Mgmt Consultant	09/27/2005			09/16/2007			
Hiring Security	09/27/2005			09/16/2007			
4-4 Constantine	09/27/2005			09/16/2007			

CAPITAL FUND PROGRAM TABLES START HERE

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: AL09P004501-06 Replacement Housing Factor Grant No:	Federal FY of Grant: 2006

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 9/30/2007 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	224,831.91		100,000.00	25,000.00
3	1408 Management Improvements	225,074.00		709.91	709.91
4	1410 Administration	95,300.00			
5	1411 Audit	800.00			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	77,000.00		77,000.00	11,458.15
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	142,483.18	175,843.18	0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	35,000.00		35,000.00	34,954.36
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	15,000.00		0.00	0.00
14	1485 Demolition				

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

PHA Name: ANNISTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: AL09P004501-06 Replacement Housing Factor Grant No:	Federal FY of Grant: 2006

☐ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
☒ **Performance and Evaluation Report for Period Ending: 9/30/2007** ☐ **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Bond Finance	313,693.91		313,693.91	
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	1,162,543.00		620,993.91	72,122.42
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: ANNISTON HOUSING AUTH.		**Grant Type and Number** Capital Fund Program Grant No: AL09P004501-06 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA WIDE	1. Operations	1406		224,831.91		100,000.00	25,000.00	
HA WIDE MGMT IMPROVE	1. Res. Init. Sal. 2. Youth Prog. (B&G) 3. Res. Programs 4. Mgmt. Consultant 5. Security	1408.2 1408.4 1408.5 1408.6 1408.7 Total 1408		53,074.00 20,000.00 10,000.00 10,000.00 132,000.00 225,074.00		0.00 709.91 709.91	0.00 709.91 709.91	
HA WIDE ADMIN	1. Pro-rate salaries 2. Sundry 3. Travel 4. Fringe Benefits	1410.1 1410.5 1410.6 1410.9 Total 1410		70,000.00 1,650.00 1,650.00 22,000.00 95,300.00		70,000.00 1,650.00 1,650.00 22,000.00 95,300.00	0.00 0.00 0.00 0.00 0.00	

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

PHA Name: ANNISTON HOUSING AUTH.		**Grant Type and Number** Capital Fund Program Grant No: AL09P004501-06 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA WIDE	Audit Costs	1411		800.00		0.00	0.00	
HA WIDE	1. A & E Fee 2. Tech Assist. Advis.	1430.1 1430.7 Total 1430		7,000.00 70,000.00 77,000.00		7,000.00 70,000.00 77,000.00	0.00 11,458.15 11,458.15	
HA WIDE	1. Range/Refrigerators	1465.1 Total 1465		35,000.00 35,000.00		34,954.36 34,954.36	34,954.36 34,954.36	
HA WIDE	1. Maint. Equip 2. Comp. Equip.	1475.2 1475.4 Total 1475		7,500.00 7,500.00 15,000.00		0.00 0.00 0.00	0.00 0.00 0.00	

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

PHA Name: ANNISTON HOUSING AUTH.		**Grant Type and Number** Capital Fund Program Grant No: AL09P004501-06 Replacement Housing Factor Grant No:				**Federal FY of Grant:** 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
AL 4-4	Fencing	1460 Total 1460		140,007.00	175,843.18 175,843.18	0.00 0.00	0.00 0.00	
HA WIDE	Bond Finance	1501 Total 1501		316,169.09	313,693.91 313,693.91	313,693.91 313,693.91	0.00 0.00	
Grant Total					1,162,543.0 0	620,993.91	72,122.42	

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

PHA Name:	**Grant Type and Number** Capital Fund Program No: Replacement Housing Factor No:	**Federal FY of Grant:**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Resident Sal.	9/30/2008			9/30/2010			
Youth Prog.	9/30/2008			9/30/2010			
Resident Prog.	9/30/2008			9/30/2010			
Mgmt. Consult	9/30/2008			9/30/2010			
Security	9/30/2008			9/30/2010			
4-4 Constantine	9/30/2008			9/30/2010			