

PHA Plans

Streamlined Annual Version

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

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

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

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

Streamlined Annual PHA Plan

for Fiscal Year: 2008

PHA Name: The Housing Authority of the City Of Fayette

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

Streamlined Annual PHA Plan Agency Identification

PHA Name: The Housing Authority
Of the City of Fayette

PHA Number: AL137

PHA Fiscal Year Beginning: 10/2008

PHA Programs Administered:

Public Housing and Section 8 Section 8 Only Public Housing Only
Number of public housing units: Number of S8 units: Number of public housing units: **160**
Number of S8 units:

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

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

PHA Plan Contact Information:

Name: Deborah Barham Phone: 205-932-6250
TDD: Email (if available): fayeha@centurytel.net

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. Yes No.

If yes, select all that apply:

- Main administrative office of the PHA
- PHA development management offices
- Main administrative office of the local, county or State government
- Public library PHA website Other (list below)

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

Main business office of the PHA PHA development management offices

Other (list below)

Streamlined Annual PHA Plan

Fiscal Year 2008

[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

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

A. PHA PLAN COMPONENTS

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

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

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

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

Form SF-LLL & SF-LLL a, Disclosure of Lobbying Activities.

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

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

Exemptions: Section 8 only; PHA s are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

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

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

2. What is the number of site based waiting list developments to which families may apply at one time?
3. How many unit offers may an applicant turn down before being removed from the site-based waiting list?
4. Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

B. Site-Based Waiting Lists – Coming Year

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

1. How many site-based waiting lists will the PHA operate in the coming year?
2. Yes No: Are any or all of the PHA’s site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?

- If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- PHA main administrative office
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other (list below)

2. Capital Improvement Needs

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

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

A. Capital Fund Program

1. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. Yes No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

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

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

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

HOPE VI Revitalization Grant Status	
a. Development Name:	
b. Development Number:	
c. Status of Grant:	
<input type="checkbox"/>	Revitalization Plan under development
<input type="checkbox"/>	Revitalization Plan submitted, pending approval
<input type="checkbox"/>	Revitalization Plan approved
<input type="checkbox"/>	Activities pursuant to an approved Revitalization Plan underway

3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name(s) below:
4. Yes No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5. Yes No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program
(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

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

2. Program Description:

a. Size of Program

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

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

b. PHA-established eligibility criteria

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

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

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

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

- Establishing a minimum homeowner down payment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
- Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):
- Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

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

1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
 - low utilization rate for vouchers due to lack of suitable rental units
 - access to neighborhoods outside of high poverty areas
 - other (describe below):
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

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

1. Consolidated Plan jurisdiction:**State of Alabama**

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

- The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: A new policy has been added. **The VAWA Policy has been adopted by the Fayette Housing Authority's Board of Commissioners. See Attachment of PHA Plan.**

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

When the Violence Against Women Act was passed all PHA's were to comply with the Act. From my understanding implementing the VAWA was mandatory.

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

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

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

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

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	pursuant to an opinion of counsel on file and available for inspection.	Identification and Annual Management and Operations

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-05 Replacement Housing Factor Grant No:		Federal FY of Grant: 2005
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	18,000		18,000	18,000
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,000		22,000	22,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	156,194		156,194	156,194
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition	32,000		32,000	0
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	1,500		1,500	1,500
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	229,694		229,694	197,694
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-05 Replacement Housing Factor Grant No:		Federal FY of Grant: 2005
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-05 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	
PHA WIDE 1,2,3	Operations	1406		18,000		18,000	18,000	complete
AL137-1,3	Fee & Costs	1430		22,000		22,000	22,000	complete
AL137-3	Dwelling Structures: HVAC, cabinets, painting, windows, doors, floor tile	1460		156,194		156,194	156,194	complete

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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-05 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	
AL137-1	Demolition	1485		32,000		32,000	0	approved 04/22/08
PHA WIDE 1,2,3	Relocation Costs	1495		1,500		1,500	1,500	complete

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

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-06 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	1,000		1,000	1,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,000		22,000	19,939.90
8	1440 Site Acquisition				
9	1450 Site Improvement	170,170		170,170	124,063
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition	27,000		27,000	0
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	1,500		1,500	0
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	221,670		221,670	145,002.90
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				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-06 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-06 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	
PHA WIDE 1,2,3	Operations	1410		18000		1,000	18,000	complete
AL137-1,3	Fee & Costs	1430		22,000		22,000	19,939.90	In process
AL137-3	Site Improvement:	1450		170,170		170,170	124,063	In process

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-06 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	
	HVAC, cabinets, painting, windows, doors, floor tile							In process
AL137-1	Demolition Of Units	1485		27,000		27,000	0	approved 04/22/08
PHA WIDE 1,2,3	Relocation Costs	1495		1,500		1,500	0	In process

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09R137501-06		Federal FY of Grant: 2006
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	2,895		2,895	0
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	2,895		2,895	0
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09R137501-06		Federal FY of Grant: 2006
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09R137501-06			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	
AL137-1	Development Activities: Replacement Housing	1499		2,895		2,895	0	0

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program No: Replacement Housing Factor No: AL09R137501-06				Federal FY of Grant: 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
AL137-1	09/08		09/10				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-07 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	1,000		1,000	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,000		22,000	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	187,424		187,424	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition	15,000		15,000	0
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	1,500		1,500	0
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	226,924		226,924	0
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-07 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09P137501-07			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	
PHA Wide AL137-1,2,3	Administration	1410		1,000		1,000	0	Pending Award Bid
PHA Wide AL137-1,2,3	Fees & Costs	1430		22,000		22,000	0	Pending Award Bid
AL137-1	Demolition of Units	1485		15,000		15,000	0	Pending Application Approval

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09P137501-07			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	
PHA Wide								
AL137-1,2,3	Relocation Costs	1495		1,500		1,500	0	Pending Award Bid
AL137-3	Dwelling Structures: HVAC, cabinets, painting, windows, doors, floor tile	1460		187,424		187,424	0	Pending Award Bid

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09R137501-07		Federal FY of Grant: 2007
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	2,941		2,941	0
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	2,941		2,941	0
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09R137501-07		Federal FY of Grant: 2007
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09R137501-07			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	
AL137-1	Development Activities: Replacement Housing	1499		2,941		2,941	0	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette		Grant Type and Number Capital Fund Program Grant No: AL09P137501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	1,000		0	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,000		0	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	195,540		0	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	1,500		0	
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	220,040		0	
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-08 Replacement Housing Factor Grant No:		Federal FY of Grant: 2008
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide AL137-1,2,3	Administration	1410		1,000		0		
PHA Wide AL137-1,2,3	Fees & Costs	1430		22,000		0		
PHA Wide AL137-1,2,3	Relocation Costs	1495		1,500		0		

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
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	
AL137-3	Dwelling Structures:	1460		195,540		0		
	HVAC, cabinets, painting, windows, doors, floor tile							

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09R137501-08		Federal FY of Grant: 2008
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	2,941		0	0
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)				
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL09R137501-08		Federal FY of Grant: 2008
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09R137501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
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	
AL137-1	Development Activities: Replacement Housing	1499		2,941		0	0	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09R137501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
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	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette		Grant Type and Number Capital Fund Program Grant No: AL09P137501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,000		22,000	22,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	261,621		261,621	261,621
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	1,500		1,500	1,500
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	285,121		285,121	285,121
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-04 Replacement Housing Factor Grant No:		Federal FY of Grant: 2004
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: The Housing Authority of The City of Fayette			Grant Type and Number Capital Fund Program Grant No: AL09P137501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide AL137-1,2,3	A/E Fees & Fee Accountant	1430		22,000		22,000	22,000	complete
AL137-3	Modernization of units, walls, floors, ceiling, HVAC, roofing, windows, doors, painting	1460		261,121		261,621	261,621	complete of all units in process
AL137-1,2,3	Relocation of Tenants	1495		1,500		1,500	1,500	Completion

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

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name The Housing Authority of the City of Fayette				<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	2008	FFY Grant: 2009 PHA FY:	FFY Grant: 2010 PHA FY:	FFY Grant: 2011 PHA FY:	FFY Grant: 2012 PHA FY:
Fayette Housing Authority	Annual Statement				
PHA Wide AL 137-1,2,3		22,000	22,000	22,000	22,000
PHA Wide AL 137-1,2,3		1,500	1,500	1,500	1,500
PHA Wide AL 137-1,2,3		1,000	1,000	1,000	1,000
AL137-3		260,500	260,500	260,500	260,500
CFP Funds Listed for 5-year planning	285,000	285,000	285,000	285,000	285,000
Subject to Change	Estimates Only	Estimates Only	Estimates Only	Estimates Only	Estimates Only

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

Replacement Housing Factor Funds	2,941 ESTIMATE	2,941 ESTIMATE	2,941 ESTIMATE	2,941 ESTIMATE	2,941 ESTIMATE
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**Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities**

Activities for Year 1	Activities for Year: <u>2009</u> FFY Grant: AL09P137501-09 PHA FY: 2009-2010			Activities for Year: <u>2010</u> FFY Grant: AL13709P137501-10 PHA FY: 2010-2011		
2008	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Annual Statement	Fayette Housing Authority			Fayette Housing Authority		
	AL137-1,2,3	Administration	1,000	AL137-1,2,3	Administration	1,000
	AL137-1,2,3	A&E Fees, & Fee Acct.	22,000	AL137-1,2,3	A&E Fees, & Fee Acct.	22,000
	AL137-1,2,3	Tenant Relocation	1,500	AL137-1,2,3	Tenant Relocation	1,500
	AL137-3	Modernization of 4 units	260,500	AL137-3	Modernization of 4 units	260,500

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

Total CFP Estimated Cost			\$ 285,000		\$ 285,000

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

Activities for Year: 2011 FFY Grant: AL09P137501-11 PHA FY: 2011-2012			Activities for Year: 2012 FFY Grant: AL09P137501-12 PHA FY: 2012-2013		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Fayette Housing Authority			Fayette Housing Authority		
AL137-1,2,3	Administration	1,000	AL137-1,2,3	Administration	1,000
AL137-1,2,3	A&E Fees, & Fee Acct.	22,000	AL137-1,2,3	A&E Fees, & Fee Acct.	22,000
AL137-1,2,3	Tenant Relocation	1,500	AL137-1,2,3	Tenant Relocation	1,500
AL137-3	Modernization of 5 units	260,500	AL137-3	Modernization of 4 units	260,500

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

Total CFP Estimated Cost		\$ 285,00			\$ 285,000

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

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

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

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

8. Capital Fund Program Five-Year Action Plan

Comments on Fayette Housing Authority's Progress

Our PHA is overjoyed to finally have approval for the demolition of the 5 buildings/10 units in development AL 137-1. The approval was received April 22, 2008. Since then our architect is working diligently to make the demolition happen. We have requested bids on the project and June 5, 2008 we will award a contract. There was a lot of participation in this bid. The last count was eleven contractors had inquired about the job. Hopefully, by the time you review this plan our PHA will have had the ten units removed. We are excited and our Mayor is excited. This is one step closer to meeting one of our goals in the 5 year/Annual Plan schedule.

Our PHA has a new Resident Advisory Board. Because of declining health, move-outs and death, our previous RAB was replaced. The new board members are Larry Fowler, Willow T. Montgomery, Joyce Piwowarski, Jessie L. Wilson, and James K. Billups. The new RAB was very pleased with the plan. When I ask them what were their comments or additions they would like to see in the plan, they said the PHA Plan looked good and they would not change anything. They said they knew progress is being made. I asked if they wanted to write any comments so they could be put in the plan, the RAB declined.

During our last modernization grant project this past year Fayette Housing Authority eliminated all, but two efficiency units on our property. Two buildings which contained four units each were gutted and renovated. The four units in each building were converted into two 2 bedroom units. This made the apartments more marketable for this area. By merging two apartments together we eliminated four units from our original list. The number of buildings remains the same. Because these renovated units are merged units now PIC has the units listed as an exception. Therefore instead of having 164 units, Fayette Housing Authority has 160 units at the current time of this PHA Plan. Holly Poteete, our PIC Coach, says the units will still show up on the PIC screen, but they are under exception because the buildings remain. Mrs. Poteete has been instructing our PHA what to do all along. Before this action was done these units could not be rented because they were too small. No one wanted to rent them.

Fayette Housing Authority
PIH Lead-Based Paint Compliance Tracking

1. Total number of units: 160 currently; in 2001 166 units.
During the LBP Testing in 2001, due to the former LBP Tester/Assessor being debarred, our PHA had 166 units. Since then, one building with two units was demolished in project 001; later 8 units were merged forming 4 units in project 003.
2. Total number pre-1978 units: 166
3. Total number of units inspected/risk assessed for lead-based paint: 166
4. Total number of units abated under modernization: 2 units
I know this sounds strange, but in 2001 when our agency was retested one unit in project -003 had lead paint in the window sill. We were advised since project 003 was being renovated completely to replace the window sill found with LBP and the others just to be safe. We did and are doing so. Lead Free in project 003.
5. Total number of units identified with lead-based hazards and not abated. 98 units, but let me explain-50 units in project 002; 48 units in project 001-10 units in project 001 are offline, utilities disconnected, and windows boarded up due to pending approval for demolition. We are told the application is on the Directors desk (literally) to be approved. So, actually 38 units in project 001 need abated again. (See further comments at the bottom of the page).
6. Total number of units that received lead-based paint interim control. 48 units; our maintenance pressure washed, peeled paint, and repainted on the porches and eaves of project 001. Projects 002 and 003 have vinyl siding along the porch and eaves. For inspections and in the best interest of our tenants, maintenance touches up paint in 001 as needed beyond repainting.
7. Total number of units that have passed clearance after abatement/interim control. For project 001 the answer is still zero (0).
8. Total number of units with lead based paint receiving ongoing maintenance: 88
9. Total number of units that received visual assessment for deteriorated lead-based paint: 0; Refer to number 6.
10. Total number of units failing "visual" assessment in 2007: 0
11. Total number of units that passed clearance in 2007: 62
12. Total number of EIBLL units reported in 2007: 0
13. Total number of EIBLL units abated in 2007: 0
14. Total number of EIBLL units passing clearance in 2007: 0

Comments- In project 002 there are 24 porch columns that have to be replaced and the window lintels. In project 001 the interior window frames/casings/jambes, door frames(those connected to the window frames), plumbing access panels, exterior door frames, fascia, frieze boards, box eaves, door lintels, window lintels,

and porch ceilings. The porches were encapsulated in 1987, but the LBP Testing contractor said it still shows up. We don't know why. I contacted three lead abatement contractors for an estimate to remove the lead. The cheapest estimate given was \$400,000.00. Our agency has 16 units/8 buildings left to be renovated- I sincerely hope they will be renovated completely within three years. Project 001 is the oldest section. It needs a complete overhaul. All of these details are in our five year/annual plan.

Fayette Housing Authority Policy Governing Violence Against Women Act

The Housing Authority of the City of Fayette (FHA) in order to promote drug free, decent, safe, sanitary housing for families and to provide opportunities and promote economic independence for residents, the proceeding policy has been established.

FHA will prohibit the eviction of and the removal of assistance from certain persons living in public housing if the assertive ground for such action is an instance of domestic violence, dating violence, sexual assault, or stalking as the terms in Sec. 3 of the United States Housing Act of 1937. The FHA will only take action to have the person committing the violence removed from the dwelling lease for the protection of the family.

FHA has developed a form for victims to certify that the alleged incident of abuse were bona fide and agrees to have the person removed from the lease. The FHA will allow the victim and family to relocate to another public housing development managed by FHA for safety reasons if applicable at the time.

The FHA will receive a copy of the report of the incident from the police department for certification purposes only and complete HUD Form 50066.

The FHA will take the appropriate measures necessary to help secure the safety of the individual and family members by issuing Trespass Notice to the alleged abuser, removing the individual from the dwelling lease, cooperating with Domestic Violence Sexual Assault Services in West Alabama (Turning Point), and Fayette Police Department.

Should the alleged abuser be a visitor or non-tenant of the FHA then a Trespass Notice will be issued to the violator banning the individual from Fayette Housing Authority premises. The tenant and family members will be prohibited from allowing the abuser to visit regardless of the relative association. The FHA will explain the Trespass Requirements and Tenant Obligations at the issuance of the Trespass Notice. Only in the event of tenant failure to comply with the Trespass requirements after the notice has been issued will cause termination of tenancy.

As long as the tenant (individual) and /or family members comply with the conditions of the certification, eviction from public housing assistance can and will be avoided.

Adopted December 6, 2007

VIOLENCE AGAINST WOMEN ACT REPORT

A goal of the Fayette Housing Authority is to fully comply with the Violence Against Women Act (VAWA). It is our objective to work with others to prevent offenses covered by VAWA to the degree we can .

The Fayette Housing Authority provides or offers the following activities, services or programs, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking.

Turning Point, Dept. of Human Resources of Fayette AL, Fayette Police Department

The Fayette Housing Authority provides or offers the following activities, services or programs that help child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing.

No Trespass Policy, Emergency Public Housing when applicable,
Turning Point Brochure

The Fayette Housing Authority provides or offers the following activities, services, or programs to prevent domestic violence, dating violence, sexual assault, stalking, or to enhance victim safety in assisted families.

Information for Victims of Abuse in Federal Public Housing, Fayette Police Department

The Fayette Housing Authority has the following procedures set in place to assure applicants and residents are aware of their rights under the Violence Women Act.

Violence Against Women Act Policy, No Trespass Policy

FAYETTE HOUSING AUTHORITY

Information for Victims of Abuse in Federal Public Housing

What is the new law?

The new law is called the Violence Against Women Act, or VAWA.

VAWA protects victims of domestic violence who live in **federally** funded public housing. If you are facing domestic abuse, VAWA can protect you from eviction and housing discrimination.

How do I know if I live in public housing?

If your landlord is a housing authority, you live in public housing. If your public housing is funded by the **federal** government, everyone in your household is protected by VAWA. To find out if your housing is **federally funded**, ask housing authority staff. **State** public housing tenants are **not** covered by VAWA; But people are working to pass a law to protect state public housing tenants, too.

How does VAWA protect me?

VAWA means that a housing authority can not refuse to rent to you just because you are or were a victim of abuse.

VAWA means that you can not be evicted from public housing just because of your abuser or your abuser's actions. If you and your abuser live together, the housing authority can evict your abuser for his or her acts of abuse, but you must be allowed to stay. Acts of abuse include domestic violence, threats, dating violence or stalking. In the event you allow your abuser to stay or visit on the housing authority premises you can be evicted for not following housing authority VAWA policy.

Can I be evicted for violating my lease?

Under VAWA, a housing authority can not evict you for violating your lease because you are a victim of abuse.

It also can not evict you for criminal activity related to domestic violence, dating violence, or stalking.

But, a housing authority could evict you for serious or repeated lease violations that are unrelated to domestic abuse such as VAWA Policy and Trespass Policy.

What can the housing authority do?

A housing authority can evict you if it can prove that other tenants or staff is in **actual** and **imminent** (immediate) danger that cannot be addressed by security or other steps. If the housing authority can prove this, you could be evicted even if you are a victim of domestic abuse.

But without proven danger, the housing authority can not evict you or penalize you in any way.

Also, the housing authority **can not** hold you to a more demanding set of rules than it uses for tenants who are not victims of abuse.

How can I claim my rights under VAWA?

A housing authority can ask for proof that you are a victim of abuse. If you want the protections that VAWA provides, you may have to prove to the housing authority that you are a victim of abuse.

How do I prove that I am a victim of abuse?

The housing authority **must** accept any one of these documents as proof that you are a victim of abuse:

- A HUD-approved certification form. The housing authority must give you a copy of this form.
- A written statement signed by a victim services provider, medical professional, or an attorney saying that the acts in question were acts of domestic violence, dating violence, or stalking against you. You must also sign the statement.
- A police record that says you were a victim of domestic violence, dating violence, or stalking.
- A court record (for example, a restraining order, an affidavit filed in a court case, or an order from the Probate and Family Court) that says you were a victim of domestic violence, dating violence, or stalking.

How long do I have to submit proof?

If the housing authority asks you for proof that you are a victim of abuse, you must submit it within 14 business days (this does not include weekends).

Is information I give to the housing authority confidential?

Yes. The housing authority must keep any information you provide about the violence against you confidential. But sometimes the housing authority may use this information. It can use this information only in the following situations:

- If you give permission for the housing authority to share this information.
- If it needs it in an eviction proceeding (for example, to evict your abuser).
- If a court orders the housing authority to disclose information.

Where can I go for help?

If you think that you are being unfairly evicted or discriminated against because you are a victim of domestic violence, dating violence, or stalking, call [your local legal services office](#).

If you need emergency safety assistance or advice, call [Turning Point West Alabama Center](#) at 1-800-650-6522 or 205-932-SAVE [your local domestic violence shelter](#).

CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, and Urban Development U.S. Department of Housing and Urban Development OMB Approval No. 2577-0249 Exp. (07/31/2007) **OR STALKING**
Office of Public and Indian Housing 1 form HUD-50066 (11/2006) **Public reporting burden** for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. Information provided is to be used by PHAs and Section 8 owners or managers to request a tenant to certify that the individual is a victim of domestic violence, dating violence or stalking. The information is subject to the confidentiality requirements of the HUD Reform Legislation. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Purpose of Form: The Violence Against Women and Justice Department Reauthorization Act of 2005 protects qualified tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them.

Use of Form: Within 14 business days of receiving the written request for this certification by the PHA, owner, or manager, an individual seeking protection from eviction or termination of assistance as a result of domestic violence may complete and submit this certification form: or in lieu of the certification form, provide information related to his/her domestic violence incident. The certification or alternate document or verbal statement must be provided to the PHA, owner, or manager. If the individual has not provided the requested certification or the information that may be provided in lieu of the certification by the 14th business day or any extension of the date provided by the PHA, manager or owner, none of the protections afforded to victims of domestic violence, who participate in the Section 8 or public housing programs will apply. Distribution or issuance of this form by PHAs, owners or managers does not serve as a written request for certification

Note that an individual may provide, in lieu of this certification (or in addition to it):

- (1) A Federal, State, tribal, territorial, or local police or court record; or
- (2) Documentation signed by an employee, agent or volunteer of a victim service provider, an attorney or a medical professional, from whom the individual has sought assistance in addressing domestic violence, dating violence or stalking, or the effects of abuse, in which the professional attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation.
- (3) Victim's written or verbal statement or other corroborating evidence.

TO BE COMPLETED BY THE INDIVIDUAL OF DOMESTIC VIOLENCE:

Date Written Request Received By Individual: _____

Name of the individual of domestic violence or dating violence or stalking:

Name(s) of family members listed on the lease (if not individual):

Name of the abuser: _____

Relation to individual: _____

Date the incident of domestic violence occurred: _____

Time: _____

Location of Incident: _____ form HUD-50066 (11/2006)

Name of Individual:

I hereby certify that the information that I have provided is true and correct and I believe that, based on the information I have provided, that I am a victim of domestic violence, dating violence or stalking and that the incident(s) in question are bona fide incidents of such actual or threatened abuse. I acknowledge that submission of false information relating to program eligibility is a basis for termination of assistance or eviction.

Signature _____ Executed on

(Date) _____

All information provided to a PHA, owner or manager relating to the incident(s) of domestic violence, including the fact that an individual is a victim of domestic violence shall be retained in confidence by an owner and shall neither be entered into any shared database nor provided to any related entity, except to the extent that such disclosure is (i) requested or consented to by the individual in writing; (ii) required for use in an eviction proceeding or termination of assistance; or (iii) otherwise required by applicable law.

