

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: Imperial Valley Housing Authority – CA143

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: Imperial Valley Housing Authority

PHA Number: CA143

PHA Fiscal Year Beginning: (mm/yyyy) 07/2008

PHA Programs Administered:

Public Housing and Section 8

Number of public housing units:
Number of S8 units:

Section 8 Only

Number of S8 units:

Public Housing Only

Number of public housing units:

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

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

PHA Plan Contact Information:

Name: Andrea D. Roark
TDD:

Phone: 760-351-7000 ext. 115
Email (if available): aroark@ivha.org

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)

* 1690 W. Adams Ave., El Centro, CA 92243

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

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

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

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

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

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

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

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

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

A. Site-Based Waiting Lists-Previous Year

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

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

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

B. Site-Based Waiting Lists – Coming Year

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

1. How many site-based waiting lists will the PHA operate in the coming year? 0

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

2. Capital Improvement Needs

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

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

A. Capital Fund Program

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

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

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

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

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

3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name(s) below:
4. Yes No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
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: **Program in place designed to guide and direct families reach educational and career goals to empower them self sufficient and ultimately a homeowner.**

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?20

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:

The family has had no family-caused violations of HUD's Housing Quality Standards within the past year.

The family is not within the initial one-year period of a HAP Contract.

The family does not owe money to PHA.

The family has not committed any serious or repeated violations of a PHA-assisted lease within the past year.

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

The Homeownership Program is in place.

We continue to market the Program to current Section 8 participants who income qualify.

Apply for IDEA grant funds.

Coordinate efforts with city and county "First Time Homebuyer Programs and Down Payment Assistance Programs".

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

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

Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.

Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.

Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):

Demonstrating that it has other relevant experience (list experience below):

Over 25 FSS Public Housing & Section 8 participants have purchased home without continued assistance. Most of them have utilized their FSS escrow account for closing costs and/or down payment assistance. There have been a total of 5 Section 8 Homeownership closings to date. Currently 3 families are in escrow and several are searching for homes. IVHA has been awarded the IDEA Grant for 3 years and a total of 5 families have utilized this money.

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: (provide name here) **State of California**

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

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

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) **The State of California’s Department of Housing and Community Development (HCD) encourages the Imperial Valley Housing Authority to submit suggestions, improvements and additional objectives for consideration in the State Consolidated Plan updates.**

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. <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
x	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. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
x	Schedule of flat rents offered at each public housing development. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
x	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
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 necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Sufficiency
x	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any policies governing any Section 8 special housing types <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
x	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
x	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
x	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
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
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
x	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
x	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
x	FSS Action Plan(s) for public housing and/or Section 8.	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
x	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). <input checked="" type="checkbox"/> 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) (list individually; use as many lines as necessary)	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

CAPITAL FUND PROGRAM - CA16P143501-08

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program Grant No: CA16P143-501-08 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	-0-			
2	1406 Operations	56,441.00			
3	1408 Management Improvements Soft Costs	-0-			
	Management Improvements Hard Costs	-0-			
4	1410 Administration	111,604.00			
5	1411 Audit	-0-			
6	1415 Liquidated Damages	-0-			
7	1430 Fees and Costs	73,000.00			
8	1440 Site Acquisition	-0-			
9	1450 Site Improvement	150,000.00			
10	1460 Dwelling Structures	725,000.00			
11	1465.1 Dwelling Equipment— Nonexpendable	-0-			
12	1470 Nondwelling Structures	-0-			
13	1475 Nondwelling Equipment	-0-			

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program Grant No: CA16P143-501-08 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	
14	1485 Demolition	-0-			
15	1490 Replacement Reserve	-0-			
16	1492 Moving to Work Demonstration	-0-			
17	1495.1 Relocation Costs	-0-			
18	1499 Development Activities	-0-			
19	1502 Contingency	-0-			
		Original	Revised	Obligated	Expended
	Amount of Annual Grant: (sum of lines.....)	1,116,045.00			
	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: Imperial Valley Housing Authority			Grant Type and Number Capital Fund Program Grant No: CA16P143-501-08 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	
AMP 1:								
143-13	Kitchen Renovations, including plumbing	1460	32	400,000.00				
Orangewood	Replace rear yard fencing	1450	32	150,000.00				
	Subtotal			550,000.00				
143--19	Accessibility Renovations 2 units	1460	2	150,000.00				
Mesa Vista	Roofing Replacement	1460	30	100,000.00				
	Subtotal			250,000.00				
143-20	Accessibility Renovations 1 unit	1460	1	75,000.00				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Imperial Valley Housing Authority			Grant Type and Number Capital Fund Program Grant No: CA16P143-501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
				Total Estimated Cost		Total Actual Cost		Status of Work
Sol Vista								
PHA-Wide	A) Program Administration	1410		26,174.00				
Administration	B) Contract Administration	1410		85,430.00				
	Subtotal			111,604.00				
PHA-Wide	A) Architects	1430		70,000.00				
Fees and Costs	B) Publication	1430		3,000.00				
	Subtotal			73,000.00				
PHA-Wide	Operations	1406		56,441.00.				
Operations								

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule								
PHA Name: Imperial Valley Housing Authority			Grant Type and Number Capital Fund Program No: CA16P143-501-08 Replacement Housing Factor No:			Federal FY of Grant: 2008		

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	
AMP 1:							
143-13							
Orangewood	9-12-2010			9-12-2012			
143-19							
Mesa Vista	9-12-2010			9-12-2012			
143-20							
Sol Vista	9-12-2010			9-12-2012			
PHA-Wide							
Administration	9-12-2010			9-12-2012			
PHA-Wide							
Operations	9-12-2010			9-12-2012			
PHA-Wide							
Fees and Costs	9-12-2010			9-12-2012			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program No: CA16P143-501-08 Replacement Housing Factor No:				Federal FY of Grant: 2008	
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	
AMP 1:							

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Imperial Valley Housing Authority		<input checked="" type="checkbox"/> Original 5-Year Plan CA16P143-501-08 <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2009 PHA FY: 2008	Work Statement for Year 3 FFY Grant: 2010 PHA FY: 2009	Work Statement for Year 4 FFY Grant: 2011 PHA FY: 2010	Work Statement for Year 5 FFY Grant: 2012 PHA FY: 2011
AMP 1:	Annual Statement				

143-10/El Centro Hms		-0-	-0-	-0-	-0-
143-13/Orangewood		-0-	-0-	-0-	-0-
143-15/580 Brighton		-0-	-0-	-0-	-0-
143-16/Commercial		-0-	-0-	-0-	-0-
143-17/Barbra Worth		200,000.00	-0-	-0-	-0-
143-19/Mesa Vista		-0-	-0-	-0-	-0-
143-20/Sol Vista		-0-	-0-	-0-	-0-
AMP 2:					
143-12/Green Gables		-0-	150,000.00	-0-	-0-
143-14/680 Brighton		-0-	-0-	-0-	-0-
143-12/Fairfield Hms		-0-	-0-	250,000.00	-0-
143-18/Calexico Hms		150,000.00	-0-	-0-	-0-
Total CFP Funds (Est.)		See Next Page	See Next Page	See Next Page	See Next Page
Total Replacement Housing Factor Funds		-0-	-0-	-0-	-0-

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Imperial Valley Housing Authority		<input checked="" type="checkbox"/> Original 5-Year Plan CA16P143-501-08 <input type="checkbox"/> Revision No:			
Development Number/Name/H A-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2009 PHA FY: 2008	Work Statement for Year 3 FFY Grant: 2010 PHA FY: 2009	Work Statement for Year 4 FFY Grant: 2011 PHA FY: 2010	Work Statement for Year 5 FFY Grant: 2012 PHA FY: 2011
AMP 3:	Annual State ment				
143-26/Bonita Homes		-0-	-0-	-0-	-0-
143-27/Winter Garden		-0-	275,000.00	-0-	200,000.00
143-22/Brawley Hms		-0-	-0-	-0-	-0-
143-21/East. Ave. a		-0-	-0-	-0-	-0-
AMP 4:					
143-21/East. Ave. b		-0-	-0-	-0-	-0-
143-		-0-	-0-	-0-	-0-

23/Killingsworth					
143-24/Westmorland		-0-	325,000.00	-0-	300,000.00
143-25/Robert Reese		400,000.00	-0-	-0-	-0-
PHA-Wide		366,045.00	366,045.00	659,022.00	559,022.00
Total CFP Funds (Est.)		1,116,045.00	1,116,045.00	1,116,045.00	1,116,045.00
Total Replacement Housing Factor Funds		-0-	-0-	-0-	-0-

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

Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: 2009 PHA FY: 2008			Activities for Year: <u>3</u> FFY Grant: 2010 PHA FY: 2009		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	AMP 1:			AMP 2:		
	143-17/Barbara	Replace A/C,	50,000.00	143-12/Green	Fencing	150,000.00

	Worth	Heating		Gables		
		Roofing	50,000.00			
		Security Doors/Lights	40,000.00	AMP 3:		
Annual		Soil erosion Mitigation	60,000.00	143-27/Winter Gardens	Roofing	125,000.00
		Subtotal	200,000.00		Replace A/C, Heating	90,000.00
	AMP 2:				Convert one unit to Fully Accessible	60,000.00
	143-18/Calexico Hms	Convert two units to Fully accessible	150,000.00		Subtotal	275,000.00
Statement						
	AMP 4:			AMP 4:		
	143/25/Robert Reese	Replace A/C, Heating	170,000.00	143- 24/Westmorland	Roofing	175,000.00
		Roofing	70,000.00		Replace A/C, Heating	150,000.00
		Landscaping Imp.	60,000.00		Subtotal	325,000.00
		Parking Imp.	100,000.00			
		Subtotal	400,000.00			

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

Activities for Year 1	Activities for Year : <u>4</u> FFY Grant: 2011 PHA FY: 2010			Activities for Year: <u>5</u> FFY Grant: 2012 PHA FY: 2011		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	AMP 2:			AMP 1:		
	143-11/Fairfield Homes	Foundation/Crack		143-15/580 Brighton	Kitchens	42,000.00
		Repair	250,000.00			
				143-16/Com./Brighton	Kitchens	49,000.00
Annual				143-17/Barbara Worth	Kitchens	63,000.00
				AMP 2:		
Statement				143-14/680 Brighton	Kitchens	42,000.00

		Bldg.			Bldg.	
	Subtotal		866,045.00		Office to Comm. Use	350,000.00
				Subtotal		670,045.00
Statement						
	Total Estimated CFP Cost		1,116,045.00			1,116,045.00

CAPITAL FUND PROGRAM - CA16P143501-07

<p>Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</p>
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PHA Name: Imperial Valley Housing Authority	Grant Type and Number Capital Fund Program Grant No: CA16P143-501-07 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007
--	--	--

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12-31-2007 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-			
2	1406 Operations	176,441.00			
3	1408 Management Improvements Soft Costs	-0-			
	Management Improvements Hard Costs	-0-			
4	1410 Administration	111,604.00		111,604.00	
5	1411 Audit	-0-			
6	1415 Liquidated Damages	-0-			
7	1430 Fees and Costs	69,000.00			
8	1440 Site Acquisition	-0-			
9	1450 Site Improvement	-0-			
10	1460 Dwelling Structures	759,000.00			
11	1465.1 Dwelling Equipment— Nonexpendable	-0-			
12	1470 Nondwelling Structures	-0-			
13	1475 Nondwelling Equipment	-0-			
14	1485 Demolition	-0-			
15	1490 Replacement Reserve	-0-			
16	1492 Moving to Work Demonstration	-0-			
17	1495.1 Relocation Costs	-0-			
18	1499 Development Activities	-0-			
19	1502 Contingency	-0-			

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program Grant No: CA16P143-501-07 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-2007 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Amount of Annual Grant: (sum of lines.....)	1,116,045.00		111,604.00	
	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: Imperial Valley Housing Authority			Grant Type and Number Capital Fund Program Grant No: CA16P143-501-07 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	
143-13	A/C – Heating Replacement	1460	32	150,000.00				
Orangewood Homes	Roofing System	1460	32	250,000.00				
	Subtotal			400,000.00				
143-11	Foam Roofing Coating	1460	50	59,000.00				
Fairfield Homes	Security Screen Doors	1460	50	50,000.00				
	A/C – Heating Replacement	1460	50	250,000.00				
	Subtotal			359,000.00				
PHA-Wide								
Administration	A) Program Administration	1410		33,921.00		33,921.00		
	B) Contract Administration	1410		77,683.00		77,683.00		
	Subtotal			111,604.00		111,604.00		
						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:			Grant Type and Number			Federal FY of Grant:			
Imperial Valley Housing Authority			Capital Fund Program Grant No: CA16P143-501-07 Replacement Housing Factor Grant No:			2007			
					Total Estimated Cost		Total Actual Cost		Status of Work
PHA-Wide									
Fees and Costs	A) Architects	1430			66,000.00				
	B) Publication	1430			3,000.00				
	Subtotal				69,000.00				
PHA-Wide									
Operations	Operations	1406			176,441.00.				

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				Federal FY of Grant:	
Imperial Valley Housing Authority		Capital Fund Program No: CA16P143-501-07 Replacement Housing Factor No:				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	
143-13							
Orangewood Homes	9-12-2009			9-12-2011			

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)							
Part III: Implementation Schedule							
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program No: CA16P143-501-07 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	
143-11							
Fairfield Homes	9-12-2009			9-12-2011			
PHA-Wide Administration	9-12-2009		9-30-2007	9-12-2011			
PHA-Wide Operations	9-12-2009			9-12-2011			
PHA-Wide Fees and Costs	9-12-2009			9-12-2011			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program No: CA16P143-501-07 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	

CAPITAL FUND PROGRAM - CA16P143501-06

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary		
PHA Name: Imperial Valley Housing Authority	Grant Type and Number Capital Fund Program Grant No: CA16P143-501-06 Replacement Housing Factor Grant No:	Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-2007 <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	-0-			
2	1406 Operations	-0-			
3	1408 Management Improvements Soft Costs	-0-			
	Management Improvements Hard Costs	-0-			
4	1410 Administration	105,902.00		105,902.00	
5	1411 Audit	-0-			
6	1415 Liquidated Damages	-0-			
7	1430 Fees and Costs	74,000.00		74,000.00	74,000.00
8	1440 Site Acquisition	-0-			
9	1450 Site Improvement	-0-			
10	1460 Dwelling Structures	879,120.00		879,120.00	788,798.00
11	1465.1 Dwelling Equipment— Nonexpendable	-0-			
12	1470 Nondwelling Structures	-0-			
13	1475 Nondwelling Equipment	-0-			
14	1485 Demolition	-0-			
15	1490 Replacement Reserve	-0-			
16	1492 Moving to Work Demonstration	-0-			
17	1495.1 Relocation Costs	-0-			
18	1499 Development Activities	-0-			
19	1502 Contingency	-0-			
		Original	Revised	Obligated	Expended
	Amount of Annual Grant: (sum of lines.....)	1,059,022.00		1,059,022.00	862,798.00
	Amount of line XX Related to LBP Activities				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program Grant No: CA16P143-501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-2007 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
	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: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program Grant No: CA16P143-501-06 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	
143-18								
Calexico Homes	Foam Roofing Coating	1460	25	27,500.00		27,500.00		
143-20								
Sol Vista Homes	Foam Roofing Coating	1460	12	13,200.00		13,200.00		
143-21								
Eastern Ave Hms	A/C – Heating Replacement	1460	150	645,920.00		645,920.00		
	Foam Roofing Coating	1460	150	165,000.00		165,000.00		
143-22								
Brawley Homes	Foam Roofing Coating	1460	25	27,500.00		27,500.00		

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Imperial Valley Housing Authority			Grant Type and Number Capital Fund Program Grant No: CA16P143-501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
				Total Estimated Cost		Total Actual Cost		Status of Work
PHA-Wide	A) Program Administration	1410		28,219.00		28,219.00		
Administration	B) Contract Administration	1410		77,683.00		77,683.00		
PHA-Wide	A) Architects	1430		72,000.00		72,000.00	72,000.00	
Fees and Costs	B) Publication	1430		2,000.00		2,000.00	2,000.00	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule								
PHA Name: Imperial Valley Housing Authority			Grant Type and Number Capital Fund Program No: CA16P143-501-06 Replacement Housing Factor No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
143-18								

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program No: CA16P143-501-06 Replacement Housing Factor No:				Federal FY of Grant: 2006	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Calexico Homes	7-17-2008		6-30-2007	7-17-2010			
143-20							
Sol Vista Homes	7-17-2008		6-30-2007	7-17-2010			
143-21							
Eastern Ave. Homes	7-17-2008		6-30-2007	7-17-2010			
143-22							
Brawley Homes	7-17-2008		6-30-2007	7-17-2010			
PHA-Wide							
Administration	7-17-2008		9-30-2006	7-17-2010			
PHA-Wide							
Fees and Costs	7-17-2008		6-30-2007	7-17-2010		6-30-2007	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Imperial Valley Housing Authority		Grant Type and Number Capital Fund Program No: CA16P143-501-06 Replacement Housing Factor No:				Federal FY of Grant: 2006	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	

Physical Needs Assessment
 Comprehensive Grant Program (CGP)

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

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

HA Name IMPERIAL VALLEY HOUSING AUTHORITY				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-010		Development Name EL CENTRO HOMES		DOFA Date or <u>1995</u> Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings	Number of Vacant Units	
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Attached/Semi-Detached <input checked="" type="checkbox"/>	21	0	
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution		
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-up <input type="checkbox"/>	0 _____ 1 _____ 2 _____	%	
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 <u>8</u> 4 <u>8</u> 5 <u>5</u>	Total Current	
Section 23, Bond Financed <input type="checkbox"/>			5+ _____	Units 21	
General Description of Needed Physical Improvements				Urgency of Need (1-5)	
Landscaping Drying pads				5 4	

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 63,000.00
Per Unit Hard Cost	\$ 3000.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

**Resident Input
 Maintenance Staff Observations
 Work Order System Review
 Annual Inspection
 Modernization Staff Review**

Page 1 of 1

form HUD-52832 (10/96)
 ref Handbook 7485.3

**Physical Needs Assessment
 Comprehensive Grant Program (CGP)**

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

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

HA Name IMPERIAL VALLEY HOUSING AUTHORITY				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-011		Development Name FAIRFIELD HOMES		DOFA Date or <u>June 30, 1952</u> Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings	Number of Vacant Units	
Rental	Family	Detached/Semi-Detached	25	0	
Turnkey III - Vacant	Elderly	Row	Current Bedroom Distribution		
Turnkey III - Occupied	Mixed	Walk-up	0	1	2
Mutual Help		Elevator	3	4	5
Section 23, Bond Financed			5+		
					%
				Total Current	
				Units 50	
General Description of Needed Physical Improvements					Urgency of Need (1-5)

Security Screen doors	2
A/C Duct Protection	3
Replace Wall Heaters	3
Replace Air Conditioning	3
Foundation Cracks	4
Bathroom Renovation	4
Interior Wall Finish	4
Replace Sewer Laterals	5
Doors	5
Exterior Finish	5
Storage Space	5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$ 1,315,000.00
Per Unit Hard Cost		\$ 26,300.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008	

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
 Work Order System Review
 Annual Inspection
 Modernization Staff Review

Page 1 of 1

form HUD-52832 (10/96)
 ref Handbook 7485.3

Physical Needs Assessment
 Comprehensive Grant Program (CGP)

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

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

HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-012	Development Name GREEN GABLES		DOFA Date or <u>June 30, 1988</u> Construction Date
Development Type: Rental <input checked="" type="checkbox"/> Turnkey III - Vacant <input type="checkbox"/> Turnkey III - Occupied <input type="checkbox"/> Mutual Help <input type="checkbox"/> Section 23, Bond Financed <input type="checkbox"/>	Occupancy Type: Family <input type="checkbox"/> Elderly <input type="checkbox"/> Mixed <input checked="" type="checkbox"/>	Structure Type: Detached/Semi-Detached <input checked="" type="checkbox"/> Row <input type="checkbox"/> Walk-up <input checked="" type="checkbox"/> Elevator <input type="checkbox"/>	Number of Buildings 19 Current Bedroom Distribution 0 6 1 13 2 6 3 6 4 3 5 2 5+ _____ Total Current Units 36

General Description of Needed Physical Improvements	Urgency of Need (1-5)
Fencing	1
Roofs	2
Paving	2
Exterior balcony decking	3
Site Improvements	3
Kitchen Renovation	4
Bathroom Renovation	4
Flooring	4
Doors	5
Windows	5
Exterior Finish	5
Drying Pads	5

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Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 728,000.00
Per Unit Hard Cost	\$ 20,222.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
 Work Order System Review
 Annual Inspection
 Modernization Staff Review

Physical Needs Assessment
 Comprehensive Grant Program (CGP)

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

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

HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____													
Development Number CA16-P143-013 (CA16-PO40-005)		Development Name ORANGEWOOD HOMES													
		DOFA Date or <u>Dec. 31, 1982</u> Construction Date													
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings												
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	32												
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">0</td> <td style="width:25%;">1</td> <td style="width:25%;">2</td> <td style="width:25%;">13</td> </tr> <tr> <td>3</td> <td>4</td> <td>17</td> <td>2</td> </tr> <tr> <td>5+</td> <td></td> <td></td> <td></td> </tr> </table>	0	1	2	13	3	4	17	2	5+			
0	1	2		13											
3	4	17		2											
5+															
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>	%												
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	Total Current												
Section 23, Bond Financed <input type="checkbox"/>			Units 32												
General Description of Needed Physical Improvements			Urgency of Need (1-5)												
Fencing			1												
Kitchen Plumbing			1												

Kitchen Renovation	1
Air Conditioning Replacement	2
Roofs	2
Bathroom Renovation	3
Site Improvements	3
Flooring	4
Doors	4
Windows	5
Exterior Finish	5
Drying Pads	5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 1,568,000.00
Per Unit Hard Cost	\$ 49,000.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	January 5, 2007

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
 Work Order System Review
 Annual Inspection
 Modernization Staff Review

Physical Needs Assessment
 Comprehensive Grant Program (CGP)

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

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

HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-014	Development Name 680 BRIGHTON	DOFA Date or _____ 1990 Construction Date	
Development Type: Rental <input checked="" type="checkbox"/>	Occupancy Type: Family <input type="checkbox"/>	Structure Type: Detached/Semi-Detached <input checked="" type="checkbox"/>	Number of Buildings 3
			Number of Vacant Units 0

PHA Name: Imperial Valley Housing Authority

Streamlined Annual Plan for Fiscal Year 2008

HA Code: CA143

Turnkey III - Vacant

Elderly

X

Row

Walk-up

Elevator

Current Bedroom Distribution

0	1	2	6
3	4	5	
5+			

%

Total Current

Units **6**

General Description of Needed Physical Improvements

Urgency of Need (1-5)

Kitchen Renovation

4

Bathroom Renovation

4

Flooring

4

Site Improvements

5

Exterior Finish

5

Doors

5

Windows

5

Fencing

5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements

\$ 192,000.00

Per Unit Hard Cost

\$ 32,000.00

Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost

Yes No

Development Has Long-Term Physical and Social Viability

Yes No

Date Assessment Prepared

February 15, 2008

Source(s) of Information:

Resident Input
Maintenance Staff Observations
Work Order System Review
Annual Inspection
Modernization Staff Review

Physical Needs Assessment
 Comprehensive Grant Program (CGP)

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

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

HA Name IMPERIAL VALLEY HOUSING AUTHORITY				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-015		Development Name 580 BRIGHTON		DOFA Date or <u>1990</u> Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings	Number of Vacant Units	
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	3	0	
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution		
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>	0 _____ 1 _____ 2 6	%	
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 _____ 4 _____ 5 _____	Total Current	
Section 23, Bond Financed <input type="checkbox"/>			5+ _____	Units 6	
General Description of Needed Physical Improvements				Urgency of Need (1-5)	
Kitchen Renovation Bathroom Renovation Flooring Site Improvements Exterior Finish Doors Windows Fencing				4 4 4 5 5 5 5 5	
Total Preliminary Estimated Hard Cost for Needed Physical Improvements				\$ 192,000.00	
Per Unit Hard Cost				\$ 32,000.00	
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Development Has Long-Term Physical and Social Viability				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Date Assessment Prepared				February 15, 2008	

Source(s) of Information:

**Resident Input
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Physical Needs Assessment
 Comprehensive Grant Program (CGP)

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

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

HA Name IMPERIAL VALLEY HOUSING AUTHORITY			<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-016		Development Name COMMERCIAL		DOFA Date or <u> 1990 </u> Construction Date
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings	Number of Vacant Units
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	3	0
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution	
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>	0 _____ 1 _____ 2 <u> 7 </u>	%
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 _____ 4 _____ 5 _____	Total Current
Section 23, Bond Financed <input type="checkbox"/>			5+ _____	Units 7
General Description of Needed Physical Improvements				Urgency of Need (1-5)

Kitchen Renovation	4
Bathroom Renovation	4
Flooring	4
Site Improvements	5
Exterior Finish	5
Doors	5
Windows	5
Fencing	5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$ 224,000.00
Per Unit Hard Cost		\$ 32,000.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008	

Source(s) of Information:

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Physical Needs Assessment
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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____		
Development Number CA16-P143-017	Development Name BARBARA WORTH		DOFA Date or <u>1990</u> Construction Date	
Development Type: Rental <input checked="" type="checkbox"/>	Occupancy Type: Family <input checked="" type="checkbox"/>	Structure Type: Detached/Semi-Detached <input checked="" type="checkbox"/>	Number of Buildings 9	Number of Vacant Units 0
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution	
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-up <input type="checkbox"/>	0 _____ 1 _____ 2 _____	Total Current Units 9
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 <u>9</u> 4 _____ 5 _____	
Section 23, Bond Financed <input type="checkbox"/>			5+ _____	

General Description of Needed Physical Improvements	Urgency of Need (1-5)
Site Improvements	2
Air Conditioning Replacement	2
Roofing	2
Security	2
Kitchen Renovations	4
Bathroom Renovations	4
Flooring	4
Exterior Finish	5
Fencing	5
Doors	5
Windows	5

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Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 439,000.00
Per Unit Hard Cost	\$ 48,778.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

Resident Input
Maintenance Staff Observations
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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____																
Development Number CA16-P143-018		Development Name CALEXICO HOMES																
		DOFA Date or <u>June 30, 1953</u> Construction Date																
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings															
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	12															
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> <td style="text-align: center;">7</td> </tr> <tr> <td style="text-align: center;">3</td> <td style="text-align: center;">12</td> <td style="text-align: center;">4</td> <td style="text-align: center;">4</td> <td style="text-align: center;">5</td> </tr> <tr> <td style="text-align: center;">5+</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> </table>	0	1	2	2	7	3	12	4	4	5	5+	_____	_____	_____	_____
0	1	2		2	7													
3	12	4		4	5													
5+	_____	_____		_____	_____													
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>																
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>																
Section 23, Bond Financed <input type="checkbox"/>																		
General Description of Needed Physical Improvements			Numbr of Vacant Units 0															
			Total Current Units 25															
			Urgency of Need (1-5) 1															

504 Renovations

Site Water Valves	2
Bathroom Renovations	4
Closet Renovations	4
Doors	4
Interior Wall Finish	5
Water/Sewer Main Lines	5
Storage	

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 700,000.00
Per Unit Hard Cost	\$ 28,000.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____
Development Number CA16-P143-019	Development Name MESA VISTA HOMES	DOFA Date or <u>Dec. 31, 1951</u> Construction Date
Development Type: Rental <input checked="" type="checkbox"/>	Occupancy Type: Family <input type="checkbox"/>	Structure Type: Detached/Semi-Detached <input checked="" type="checkbox"/>
Number of Buildings 15		Number of Vacant Units 0

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HA Name IMPERIAL VALLEY HOUSING AUTHORITY				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____		
Development Number CA16-P143-020		Development Name SOL VISTA HOMES		DOFA Date or <u>Dec. 31, 1951</u> Construction Date		
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings		Number of Vacant Units	
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	6		0	
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution		Total Current Units 12	
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>	0 _____	1 _____		%
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	2 _____	3 _____		
Section 23, Bond Financed <input type="checkbox"/>			4 _____	5 _____		
					5+ _____	
General Description of Needed Physical Improvements					Urgency of Need (1-5)	

504 Renovation
 Closet Renovation
 Bathroom Renovation
 Interior Wall Finish
 Doors
 Storage Space
 Water/Sewer Main Lines

1
4
4
4
4
5
5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$ 410,000.00
Per Unit Hard Cost		\$ 34,167.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared		February 15, 2008
Source(s) of Information:		

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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-021	Development Name EASTERN AVENUE HOMES		DOFA Date or <u>Dec. 31, 1952</u> Construction Date
Development Type: Rental <input checked="" type="checkbox"/>	Occupancy Type: Family <input type="checkbox"/>	Structure Type: Detached/Semi-Detached <input checked="" type="checkbox"/>	Number of Buildings 77
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution 0 1 42 2 62 3 32 4 14 5 _____ 5+ _____
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>	
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	Total Current Units 150
Section 23, Bond Financed <input type="checkbox"/>	General Description of Needed Physical Improvements		Urgency of Need (1-5)

Bathroom Renovation
 Interior Wall Finish
 Doors
 Storage Space
 Water/Sewer Main Lines

3
 3
 3
 5
 5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$ 2,970,000.00
Per Unit Hard Cost		\$ 19,800.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008	

Source(s) of Information:

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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-022	Development Name BRAWLEY HOMES		DOFA Date or <u>June 30, 1957</u> Construction Date
Development Type: Rental <input checked="" type="checkbox"/>	Occupancy Type: Family <input checked="" type="checkbox"/>	Structure Type: Detached/Semi-Detached <input checked="" type="checkbox"/>	Number of Buildings 13
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution 0 _____ 1 _____ 2 _____ 3 <u>12</u> 4 <u>13</u> 5 _____ 5+ _____
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-up <input type="checkbox"/>	
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	
Section 23, Bond Financed <input type="checkbox"/>			
General Description of Needed Physical Improvements			Number of Vacant Units 0
			Total Current Units 25
			Urgency of Need (1-5)

Utility Meter Closet
 Parking Paving
 Bathroom Renovation
 Windows
 Doors
 Interior Wall Finish
 Site Improvements
 Storage Space
 Water/Sewer Main Lines

3
 3
 4
 4
 4
 4
 5
 5
 5

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Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 800,000.00
Per Unit Hard Cost	\$ 32,000.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-023	Development Name O. GLENN KILLINGSWORTH HOMES		DOFA Date or <u>Dec. 31, 1951</u> Construction Date
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	6
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Number of Vacant Units 0
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>	
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	Current Bedroom Distribution
Section 23, Bond Financed <input type="checkbox"/>			0 1 2 8 %
			3 4 4 13 5 _____
			5+ _____
General Description of Needed Physical Improvements			Total Current Units 12
			Urgency of Need (1-5)

Bathroom Renovation	3
Interior Wall Finish	3
Doors	3
Site Water Valves	4
Storage Space	5
Site Sewer laterals	5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 240,000.00
Per Unit Hard Cost	\$ 20,000.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____
Development Number CA16-P143-024	Development Name WESTMORLAND HOMES	DOFA Date or <u>June 30, 1972</u> Construction Date

Development Type:		Occupancy Type:	Structure Type:	Number of Buildings	Number of Vacant Units
Rental	<input checked="" type="checkbox"/>	Family	Detached/Semi-Detached	29	0
Turnkey III - Vacant	<input type="checkbox"/>	Elderly	Row	Current Bedroom Distribution	
Turnkey III - Occupied	<input type="checkbox"/>	Mixed	Walk-up	0	1
Mutual Help	<input type="checkbox"/>		Elevator	8	2
Section 23, Bond Financed	<input type="checkbox"/>			10	
					%
					Total Current
					Units 35
General Description of Needed Physical Improvements					Urgency of Need (1-5)

Wall Heater Removal	1
Air Conditioning Replacement	1
Roofing	1
Lighting Fixture Replacement	2
Kitchen Renovation	4
Doors	4
Water/Sewer Main Lines	5
Site Improvements	5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 745,000.00
Per Unit Hard Cost	\$ 12,286.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
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HA Name IMPERIAL VALLEY HOUSING AUTHORITY				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number CA16-P143-025		Development Name ROBERT REESE HOMES		DOFA Date or <u>Mar. 31, 1984</u> Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings		Number of Vacant Units
Rental	Family	Detached/Semi-Detached	4		0
Turnkey III - Vacant	Elderly	Row	Current Bedroom Distribution		
Turnkey III - Occupied	Mixed	Walk-up	0 _____ 1 15 2 _____	%	
Mutual Help		Elevator	3 _____ 4 _____ 5 _____	Total Current	
Section 23, Bond Financed			5+ _____	Units 15	
General Description of Needed Physical Improvements					Urgency of Need (1-5)
Air Conditioning Replacement Roofing Site Improvements Concrete Paving Windows Doors Flooring Exterior Finish					1 1 1 1 4 4 4 5
Total Preliminary Estimated Hard Cost for Needed Physical Improvements				\$	240,000.00
Per Unit Hard Cost				\$	16,000.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Development Has Long-Term Physical and Social Viability Yes No

Date Assessment Prepared February 15, 2008

Source(s) of Information:
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 Modernization Staff Review

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HA Name Original
 Revision Number _____
IMPERIAL VALLEY HOUSING AUTHORITY

Development Number **CA16-P143-026** DOFA Date
 or Mar. 31, 1951
 Construction Date
 Development Name **BONITA HOMES**

Development Type:	Occupancy Type:	Structure Type:	Number of Buildings	Number of Vacant Units
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	12	0
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution	
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>	0 1 2 12	%
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 8 4 4 5	Total Current
Section 23, Bond Financed <input type="checkbox"/>			5+ _____	Units 20

General Description of Needed Physical Improvements	Urgency of Need (1-5)
Bathroom Renovation	3
Remodel Closets	3
Interior Wall Finish	3
Doors	3
Water/Sewer Main Lines	5
Storage	5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$ 420,000.00
Per Unit Hard Cost		\$ 21,000.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008	

Source(s) of Information:

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 Maintenance Staff Observations
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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input type="checkbox"/> Original <input checked="" type="checkbox"/> Revision Number <u>1</u>	
Development Number CA16-P143-027 (CA16-PO51-002)		Development Name WINTER GARDEN HOMES	
		DOFA Date or <u>Mar. 31, 1989</u> Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	20
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input checked="" type="checkbox"/>	Walk-up <input type="checkbox"/>	
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 <u>8</u> 4 <u>10</u> 5 <u>2</u>
Section 23, Bond Financed <input type="checkbox"/>			5+ _____
General Description of Needed Physical Improvements			Number of Vacant Units 0
			%
			Total Current Units 20
			Urgency of Need (1-5)

Roofing Replacement	1
Air Conditioning Replacement	1
504 Renovation	1
Kitchen Renovation	4
Bathroom Renovation	4
Windows	4
Doors	4
Flooring	5

Exterior Finish	5
Storage	5
Site Improvements - Landscaping, Concrete flat work	5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 950,000.00
Per Unit Hard Cost	\$ 47,500.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
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HA Name IMPERIAL VALLEY HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number PHA-WIDE	Development Name PHA - WIDE		DOFA Date or Construction Date _____
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental <input type="checkbox"/>	Family <input type="checkbox"/>	Attached/Semi-Detached <input type="checkbox"/>	Number of Vacant Units 0
Turnkey III - Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-up <input type="checkbox"/>	Current Bedroom Distribution
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	0 _____ 1 _____ 2 _____
Section 23, Bond Financed <input type="checkbox"/>			3 _____ 4 _____ 5 _____
			5+ _____
General Description of Needed Physical Improvements			Urgency of Need (1-5)

Administration Building	3
Community Space Remodel	4
Westside El Centro Shop	5

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$ 1,350,000.00
Per Unit Hard Cost	\$
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	February 15, 2008

Source(s) of Information:

Resident Input
 Maintenance Staff Observations
 Work Order System Review
 Annual Inspection
 Modernization Staff Review