

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: Eastpointe Housing Commission

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: Eastpointe Housing Commission

PHA Number: MI044

PHA Fiscal Year Beginning: 7/1/2008

PHA Programs Administered:

Public Housing and Section 8

Number of public housing units: **164**
Number of S8 units:

Section 8 Only

Number of S8 units: **171**

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: **Jody L. Wenz**

Phone: **586-445-5099**

TDD:

Email **EHCDir@aol.com**

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

- 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
- X** 9. **Attachment a (mi044a08) – Revised annual statement Rev#1 & P/E report 12/31/2007**

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

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

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

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

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

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

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

A. Site-Based Waiting Lists-Previous Year

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

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

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

B. Site-Based Waiting Lists – Coming Year

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

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

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 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):

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)

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)

Excerpt from 2006- 2008 Macomb County Consolidated plan:

“The number of homeless people and people at risk of becoming homeless is increasing in Macomb County. This must be addressed for the good of the community, as well as the individual.” Therefore the mission of the Macomb HOME Consortium is to “ provide decent, affordable housing to LI residents within its jurisdiction, in accordance with the provisions of the National Affordable Housing Act of 1990, as amended. Consortium members will, moreover, use their community development resources in concert with their housing and community development partners, to promote decent housing and a suitable living environment for LI persons, in accordance with the Housing and Community Development Act of 1949, as amended.”

Of the seven housing commissions in Macomb County, six serve the jurisdiction of the Macomb HOME Consortium. Each serves a separate community and has varying levels of resources. Each administers a Low Rent Public Housing (LRPH) program and four administer Section 8 Housing Choice Voucher programs. This equates to roughly 1,300 units administered by these entities. The County has no housing commission and has also relied on MSHDA to administer assisted housing programs. This arrangement has worked well, adding another 900 units to the mix of assisted housing. This arrangement has therefore provided roughly 2,200 units of public and assisted housing for the Consortium. **It is difficult, for reasons cited in item #2 above however, for the Consortium and the housing commissions to work closely on a sustained basis, apart from sharing information and supporting each other’s projects. It is virtually impossible, given restricted funding resources for example, to pool resources to address public housing concerns. The Consortium will continue, however, whenever possible, to act to improve public housing and the neighborhoods surrounding them.**

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
	<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
IN OFFICE	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
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
IN OFFICE	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
N/A	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	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
	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
	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
N/A	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
N/A	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
IN OFFICE	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
X	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, 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
N/A	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
N/A	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 type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
N/A	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
N/A	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
IN OFFICE	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
IN OFFICE	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
N/A	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: EASTPOINTE HOUSING COMMISSION			Grant Type and Number Capital Fund Program Grant No: MI28 P044 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				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	11,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	35,000			
10	1460 Dwelling Structures	87,000			
11	1465.1 Dwelling Equipment—Nonexpendable	32,000			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	170,000			
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: EASTPOINTE HOUSING COMMISSION			Grant Type and Number Capital Fund Program Grant No: MI28 P044 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
	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: Eastpointe Housing Commission			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant:		
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	Grant Preparation	1430		1,000				
PHA WIDE	Complete parking lot replacement	1450		35,000				
PHA WIDE	R&R ceiling tiles and grids in all common hallways	1460		15,000				
PHA WIDE	Paint common areas and hallways	1460		25,000				

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: Eastpointe Housing Commission			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant:		
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	Carpet common areas and hallways	1460		35,000				
PHA WIDE	Upgrade entrance door	1460		12,000				
PHA WIDE	Refrigerator replacement program, phase I	1465		32,000				
PHA WIDE	Replace maintenance equipment	1475		5,000				
PHA WIDE	A&E fees & related costs	1430		10,000				

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name Eastpointe Housing Commission				<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 FFY Grant: 2009 PHA FY: 6/30/10	Work Statement for Year 3 FFY Grant: 2010 PHA FY: 6/30/11	Work Statement for Year 4 FFY Grant: 2011 PHA FY: 6/30/12	Work Statement for Year 5 FFY Grant: 2012 PHA FY: 6/30/13
	Annual Statement				
MANAGEMENT			22,000		
DWELLING UNITS		154,500	111,000	170,000	170,000
NON- DWELLING			25,000		
CFP Funds Listed for 5-year planning		154,500	158,000	170,000	170,000
Replacement Housing Factor Funds					

8. Capital Fund Program Five-Year Action Plan

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: 6/30/10			Activities for Year: <u>3</u> FFY Grant: 2010 PHA FY: 6/30/11		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual						
Statement	<i>PHA WIDE</i>	Brick/Tuck work	2,000	<i>PHA WIDE</i>	<i>Hot water tank repl.</i>	3,000
	<i>PHA WIDE</i>	Water-saving bath fixtures	15,000	<i>PHA WIDE</i>	Replace boilers	80,000
	<i>PHA WIDE</i>	Bed & bath door replacement	30,000	<i>PHA WIDE</i>	Replace vehicle	25,000
	<i>PHA WIDE</i>	Closet & storage bi-fold door repl.	60,000	<i>PHA WIDE</i>	Landscaping improvements	3,000
	<i>PHA WIDE</i>	HVAC upgrades	2,500	<i>PHA WIDE</i>	Computer system upgrades	5,000
	<i>PHA WIDE</i>	Electrical upgrades	3,000	<i>PHA WIDE</i>	Trash compactor upgrades	25,000
	<i>PHA WIDE</i>	Refrigerator repl.	42,000	<i>PHA WIDE</i>	Office equipment	5,000
				<i>PHA WIDE</i>	Maint. Equipment	5,000
				<i>PHA WIDE</i>	Security system upgrades	3,000
				<i>PHA WIDE</i>	Furniture	4,000

8. Capital Fund Program Five-Year Action Plan

Total CFP Estimated Cost			\$154,500		\$158,000

Capital Fund Program Five-Year Action Plan					
Part II: Supporting Pages—Work Activities					
Activities for Year : <u> 4 </u> FFY Grant: 2011 PHA FY: 6/30/12			Activities for Year: <u> 5 </u> FFY Grant: 2012 PHA FY: 6/30/13		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
	Plumbing upgrades	3,000		Replace original windows, phase II	70,000
	Replace original windows, phase I	90,000		Upgrade entrances, incl. canopies, flooring, and walkways	70,000
	Replace parking lot street lights	20,000		Replace tub surrounds with cut-outs	30,000
	Building envelope upgrades	15,000			
	Continue refrigerator repl.	42,000			

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

HA Name: EASTPOINTE HOUSING COMMISSION	Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 07 Replacement Housing Factor Grant No.:	Federal FY of Grant 2007
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement/Revision Number ONE
 Final Performance and Evaluation Report
 Performance & Evaluation Report for Program Year Ending 12/31/07

Line #	Summary by Development Accounts	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Cost	\$11,000	\$11,000	\$1,000	\$1,000
8	1440 Site Acquisition				
9	1450 Site Improvement	\$20,000	\$82,299	\$13,475	\$13,475
10	1460 Dwelling Structure	\$138,799	\$69,000	\$13,570	\$0
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$2,500	\$10,000	\$0	\$0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod used for Development				
19	1502 Contingency				
20	Amount of Annual Grant (Sum of lines 2-19)	\$172,299	\$172,299	\$28,045	\$14,475
21	Amount of Line 20 related to LBP Activities				
22	Amount of Line 20 related to Section 504 Compliance				
23	Amount of Line 20 related to Security - Soft Costs				
	Amount of Line 20 related to Security - Hard Costs				
24	Amount of Line 20 Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Signature of Executive Director and Date X Jody L. Wenz, Executive Director	Signature of Public Housing director/Office of Native American Programs Administrator and Date X
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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: EASTPOINTE HOUSING COMMISSION		Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 07 Replacement Housing Factor Grant No.:						Federal FY of Grant: 2007 Rev. #1; as of 12/31/07	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
PHA WIDE	FEES & COSTS								
	A. A&E fees and related costs			10,000	10,000	0	0		
	B. Grant preparation			<u>1,000</u>	<u>1,000</u>	<u>1,000</u>	<u>1,000</u>		
	SUB TOTAL	1430		11,000	11,000	1,000	1,000		
	SITE IMPROVEMENTS								
PHA WIDE	A. Landscaping upgrades, including gazebo			20,000	13,475	13,475	13,475	total cost est.: \$100,000; balance from 2008 CFP	
MI 44-1	B. Resurface/base parking lot			<u>0</u>	<u>68,824</u>	<u>0</u>	<u>0</u>		
	SUB TOTAL	1450		20,000	82,299	13,475	13,475		
	DWELLING STRUCTURES								
MI 44-2	A. Complete kitchen & bath modernization project including countertops and flooring		40 units	14,000	14,000	13,570	0		
MI 44-2	B. Remove & replace ceiling tiles and grids in all common hallways			15,000	0	0	0	moved to 2008 CFP	
MI 44-2	C. 6 new stairwell fire doors			6,000	0	0	0	moved to Oper. costs	
MI 44-2	D. New unit entry doors			2,000	0	0	0	moved to Oper. costs	
MI 44-1	A. Remove & replace rubber membrane roof			<u>101,799</u>	<u>55,000</u>	<u>0</u>	<u>0</u>		
	SUB TOTAL	1460		138,799	69,000	13,570	0		
	NON-DWELLING EQUIPMENT								
PHA WIDE	A. Carpet cleaning machine			2,500	0	0	0		
	B. Computer upgrades			<u>0</u>	<u>10,000</u>	<u>0</u>	<u>0</u>		
	SUB TOTAL	1475		2,500	10,000	0	0		
	GRAND TOTAL			172,299	172,299	28,045	14,475		

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

PHA Name: EASTPOINTE HOUSING COMMISSION		Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 07 Replacement Housing Factor Grant No.:					Federal FY of Grant: 2007 Rev. #1; as of 12/31/07	
Development Number/Name HA - Wide Activities	All Funds Obligated (QE Date)			All Funds Expended (QE Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
	9/12/09			9/12/11				

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

HA Name: EASTPOINTE HOUSING COMMISSION	Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 06 Replacement Housing Factor Grant No.:	Federal FY of Grant 2006
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement/Revision Number _____
 Final Performance and Evaluation Report
 Performance & Evaluation Report for Program Year Ending 12/31/07

Line #	Summary by Development Accounts	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Cost	\$7,000		\$7,000	\$2,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structure	\$170,329		\$170,329	\$159,925
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod used for Development				
19	1502 Contingency				
20	Amount of Annual Grant (Sum of lines 2-19)	\$177,329		\$177,329	\$161,925
21	Amount of Line 20 related to LBP Activities				
22	Amount of Line 20 related to Section 504 Compliance				
23	Amount of Line 20 related to Security - Soft Costs				
	Amount of Line 20 related to Security - Hard Costs				
24	Amount of Line 20 Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Signature of Executive Director and Date X Jody L. Wenz, Executive Director	Signature of Public Housing director/Office of Native American Programs Administrator and Date X
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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: EASTPOINTE HOUSING COMMISSION		Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 06 Replacement Housing Factor Grant No.:					Federal FY of Grant: 2006 as of 12/31/07	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	<u>FEES & COSTS</u> A. A&E fees and related costs B. Grant preparation SUB TOTAL	1430		6,000 <u>1,000</u> 7,000		6,000 <u>1,000</u> 7,000	1,000 <u>1,000</u> 2,000	
MI 44-2	<u>DWELLING STRUCTURES</u> A. Continue kitchen & bath modernization project including countertops and flooring SUB TOTAL	1460	40 units	<u>170,329</u> 170,329		<u>170,329</u> 170,329	<u>159,925</u> 159,925	
	GRAND TOTAL			177,329		177,329	161,925	

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

PHA Name: EASTPOINTE HOUSING COMMISSION		Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 06 Replacement Housing Factor Grant No.:					Federal FY of Grant: 2006 as of 12/31/07	
Development Number/Name HA - Wide Activities	All Funds Obligated (QE Date)			All Funds Expended (QE Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
	7/18/08			7/18/10				

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

HA Name: EASTPOINTE HOUSING COMMISSION	Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 07 Replacement Housing Factor Grant No.:	Federal FY of Grant 2007
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement/Revision Number ONE
 Final Performance and Evaluation Report
 Performance & Evaluation Report for Program Year Ending 12/31/07

Line #	Summary by Development Accounts	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Cost	\$11,000	\$11,000	\$1,000	\$1,000
8	1440 Site Acquisition				
9	1450 Site Improvement	\$20,000	\$82,299	\$13,475	\$13,475
10	1460 Dwelling Structure	\$138,799	\$69,000	\$13,570	\$0
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$2,500	\$10,000	\$0	\$0
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	Amount of Line 20 related to Security - Hard Costs				
24	Amount of Line 20 Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Signature of Executive Director and Date X Jody L. Wenz, Executive Director	Signature of Public Housing director/Office of Native American Programs Administrator and Date X
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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: EASTPOINTE HOUSING COMMISSION		Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 07 Replacement Housing Factor Grant No.:						Federal FY of Grant: 2007 Rev. #1; as of 12/31/07	
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				Original	Revised	Funds Obligated	Funds Expended		
PHA WIDE	FEES & COSTS								
	A. A&E fees and related costs			10,000	10,000	0	0		
	B. Grant preparation			<u>1,000</u>	<u>1,000</u>	<u>1,000</u>	<u>1,000</u>		
	SUB TOTAL	1430		11,000	11,000	1,000	1,000		
	SITE IMPROVEMENTS								
PHA WIDE	A. Landscaping upgrades, including gazebo			20,000	13,475	13,475	13,475	total cost est.: \$100,000; balance from 2008 CFP	
MI 44-1	B. Resurface/base parking lot			<u>0</u>	<u>68,824</u>	<u>0</u>	<u>0</u>		
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	DWELLING STRUCTURES								
MI 44-2	A. Complete kitchen & bath modernization project including countertops and flooring		40 units	14,000	14,000	13,570	0		
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	SUB TOTAL	1460		138,799	69,000	13,570	0		
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	B. Computer upgrades			<u>0</u>	<u>10,000</u>	<u>0</u>	<u>0</u>		
	SUB TOTAL	1475		2,500	10,000	0	0		
	GRAND TOTAL			172,299	172,299	28,045	14,475		

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

PHA Name: EASTPOINTE HOUSING COMMISSION		Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 07 Replacement Housing Factor Grant No.:					Federal FY of Grant: 2007 Rev. #1; as of 12/31/07	
Development Number/Name HA - Wide Activities	All Funds Obligated (QE Date)			All Funds Expended (QE Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
	9/12/09			9/12/11				

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

HA Name: EASTPOINTE HOUSING COMMISSION	Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 06 Replacement Housing Factor Grant No.:	Federal FY of Grant 2006
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	Collateralization Expenses or Debt Service				

Signature of Executive Director and Date X Jody L. Wenz, Executive Director	Signature of Public Housing director/Office of Native American Programs Administrator and Date X
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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: EASTPOINTE HOUSING COMMISSION		Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 06 Replacement Housing Factor Grant No.:					Federal FY of Grant: 2006 as of 12/31/07	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: EASTPOINTE HOUSING COMMISSION			Grant Type and Number Capital Fund Program Grant No.: MI28 P044 501 06 Replacement Housing Factor Grant No.:				Federal FY of Grant: 2006 as of 12/31/07	
Development Number/Name HA - Wide Activities	All Funds Obligated (QE Date)			All Funds Expended (QE Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
	7/18/08			7/18/10				