

PHA Plans

Streamlined Annual Version

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

OMB No. 2577-0226
(exp. 05/31/2006)

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: Hannibal Housing Authority

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: Hannibal Housing Authority **PHA Number:** MO129

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

PHA Programs Administered:

Public Housing and Section 8 **Section 8 Only** **Public Housing Only**
Number of public housing units: 249 Number of S8 units: Number of public housing units:
Number of S8 units: 168

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: Jack L. McCord Executive Director Phone: 573-221-7575
TDD: Email (if available): hhajack@sbcglobal.net

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

If yes, select all that apply:

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

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

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

Streamlined Annual PHA Plan
Fiscal Year 2008
[24 CFR Part 903.12(c)]

Table of Contents
[24 CFR 903.7(r)]

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

A. PHA PLAN COMPONENTS

- 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-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. NO

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) NE-MO I 70 Corridor Northeast Region

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 Missouri's Plan has established the following housing priorities to address housing needs, which are also the priorities of the Hannibal Housing Authority:

1. Maintain the supply of decent, safe, and sanitary rental housing that's affordable for low, very low, and moderate income families.
2. The modernization of Hannibal Housing Authority housing for occupancy by low and very low income families.

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
YES	<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
YES	<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
YES	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
YES	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
YES	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
YES	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
YES	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
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	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
YES	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	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
YES	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
YES	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
YES	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
YES	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
YES	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
YES	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
YES	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
YES	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
YES	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
YES	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
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
YES	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
YES	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
YES	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
YES	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
YES	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
YES	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
YES	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
YES	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: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P12950106 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0			
2	1406 Operations	73,650	73,650	73,650	73,650
3	1408 Management Improvements	65,000	65,000	65,000	64,902.93
4	1410 Administration	35,635	35,635	35,635	35,635
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	40,000	7,922.80	7,922.80	7,922.80
8	1440 Site Acquisition	0			
9	1450 Site Improvement	28,755	37,696	37,696	37,696
10	1460 Dwelling Structures	0			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Nondwelling Structures	93,100	116,479	116,479	116,479
13	1475 Nondwelling Equipment	32,108	31,865.20	31,865.20	16,336.59
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	1501 Collateralization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	368,248	368,248	368,248	352,622.32
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 compliance	0			
24	Amount of line 21 Related to Security – Soft Costs	0			
25	Amount of Line 21 Related to Security – Hard Costs	27,000	26,855.28	26,855.28	26,758.21
26	Amount of line 21 Related to Energy Conservation Measures	0			

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P12950106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide OPS	Operations							
	A) Housing Operations	1406	LS	73,650		73,650	73,650	Complete
	Sub total			73,650		73,650	73,650	
HA Wide Mgmt Imp	Management Improvements							
	A) Administer Security Program	1408	100%	27,000	26,855.28	26,855.28	26,758.21	On Schedule
	B) Mgmt/Maint Training		LS	5,000	6,013.37	6,013.37	6,013.37	Complete
	C) Administer Resident Drug Prevention Programs		100%	33,000	32,131.35	32,131.35	32,131.35	Complete
	Sub total			65,000	65,000	65,000	64,902.93	

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: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P12950106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Admin	Administration							
	A) Partial ED Salary	1410	10%	6,214	3,492.96	3,492.96	3,492.96	Complete
	B) Grant Admin Salary		100%	29,421	32,142.04	32,142.04	32,142.04	Complete
	Sub Total			35,635	35,635	35,635	35,635	
HA Wide Fees & Costs	Fees & Costs							
	A) A&E Services	1430	100%	40,000	7,082.80	7,082.80	7,082.80	Complete
	B) Accounting Fees Capital Funds		LS	0	840.00	840.00	840.00	Complete
	Sub total			40,000	7,922.80	7,922.80	7,922.80	
HA Wide Site Improvement	Site Improvements							
MO129-1	A) Enlarge Parking Lot @ Community Bldg	1450	1900 sf	28,755	37,696	37,696	37,696	Complete
	Sub Total			28,755	37,696	37,696	37,696	

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: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P12950106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	HA Wide Non-Dwelling Struct							
MO129-1	A) New Community Bldg – Phase 1	1470	1 Bldg	93,100	116,479	116,479	116,479	Complete
	Sub Total			93,100	116,479	116,479	116,479	
	HA Wide Non-Dwelling Equip							
	A) Replace Maint vehicles	1475	1units	17,889	14,499	14,499	14,499	Complete
	B) Purchase Salt Spreader		1 unit	9,000	964.59	964.59	964.59	Complete
	C) Replace Riding Mower		1 unit	3,719	3,719	3,719	0	On schedule
	D) Purchase Forklift for Tractor		1 unit	1,500	873	873	873	Complete
	E) Upgrade Computer Sysem & Software		10 each	0	11,809.61	11,809.61	0	Fungility 2008
	Sub Total			32,108	31,865.20	31,865.20	16,336.59	
	Grand Total			368,248	368,248	368,248	352,622.32	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Hannibal Housing Authority			Grant Type and Number Capital Fund Program No: MO36P12950106 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	
HA Wide	9/5/08			09/5/09			
MO129-01	9/5/08			9/5/09			

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: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MO36P12950107		Federal FY of Grant: 2007
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations	75,190	75,190	75,190	75,190
3	1408 Management Improvements	75,190	75,190	26,527.32	26,018.92
4	1410 Administration	37,595	37,595	12,080.68	12,080.68
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	840	840	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	73,011	73,011	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	72,852	72,852	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	41,271	41,271	6,688.75	6,688.75
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	0	0	0	0
19	1501 Collateralization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	375,949	375,949	120,486.75	119,978.35
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	0	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	32,000	32,000	32,000	32,000
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	0

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Hannibal Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36P12950107 Replacement Housing Factor Grant No:				Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide OPS	Operations							
	A) Housing Operations	1406	LS	75,190	75,190	75,190	75,190	Complete
	Sub total			75,190	75,190	75,190	75,190	
HA Wide Mgmt Imp	Management Improvements							
	A) Fund Security Program	1408	100%	32,000	32,000	16,692.77	16,438.57	On Schedule
	B) Mgmt/Maint Training		LS	7,190	7,190	0	0	
	C) Administer Resident Drug Prevention Programs		100%	36,000	36,000	9,834.55	9,580.35	On Schedule
	Sub total			75,190	75,190	26,527.32	26,018.92	
HA Wide Admin	Administration							
	A) Partial ED Salary	1410	10%	3,672	3,672	0	0	
	B) Grant Admin Salary		100%	33,923	33,923	12,080.68	12,080.68	On Schedule
	Sub Total			37,595	37,595	12,080.68	12,080.68	

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: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P12950107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Fees & Costs	Fees & Costs							
	A) Accounting Fees CF	1430	LS	840	840	0	0	
	Sub total			840	840	0	0	
HA Dwelling Structures	Dwelling Structures							
MO129-4	A) Install Vinyl over facia & siding	1460	48 Units	48,952	48,952	0	0	
MO129-6	B) Install Vinyl over facia & siding		24 Units	24,059	24,059	0	0	
	Sub Total			73,011	73,011	0	0	
HA Dwelling Equipment	Dwelling Equipment							
MO129-2	A) Install power flush toilets	1465	67 each	44,734	44,734	0	0	
MO129-5	B) Install power flush toilets		42 each	28,118	28,118	0	0	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Hannibal Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36P12950107 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	
	Sub Total			72,852	72,852	0	0	
HA Wide Non-Dwelling Equip	Non-Dwelling Equipment							
	A) Replace Mower	1475	1units	5,920	5,920	0	0	
	B) Replace Maintenance Vehicle		1 unit	28,500	28,500	0	0	
	C) Replace Copier		1 unit	6,851	6,851	6,688.75	6,688.75	Complete
	Sub Total			41,271	41,271	6,688.75	6,688.75	
	Grand Total			375,949	375,949	120,486.75	119,978.35	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Hannibal Housing Authority			Grant Type and Number Capital Fund Program No: MO36P12950107 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	
HA Wide	9/5/09			9/5/10			
MO129-02	9/5/09			9/5/10			
MO129-04	9/5/09			9/5/10			
MO129-05	9/5/09			9/5/10			
MO129-06	9/5/09			9/5/10			

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

PHA Name: Hannibal Housing Authority	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MO36P1295010Z6	Federal FY of Grant: 2006
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 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	0	0	0
2	1406 Operations	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	25,156	25,156	0	0
10	1460 Dwelling Structures	6,000	6,000	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	
12	1470 Nondwelling Structures	0	0	0	
13	1475 Nondwelling Equipment	0	0	0	
14	1485 Demolition	0	0	0	
15	1490 Replacement Reserve	0	0	0	
16	1492 Moving to Work Demonstration	0	0	0	
17	1495.1 Relocation Costs	0	0	0	
18	1499 Development Activities	0	0	0	
19	1501 Collateralization or Debt Service	0	0	0	
20	1502 Contingency	0	0	0	
21	Amount of Annual Grant: (sum of lines 2 – 20)	31,156	31,156	0	0
22	Amount of line 21 Related to LBP Activities	0	0	0	
23	Amount of line 21 Related to Section 504 compliance	0	0	0	
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	

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

PHA Name: Hannibal Housing Authority		Grant Type and Number Capital Fund Program Grant No Replacement Housing Factor Grant No: MO36P1295010Z6			Federal FY of Grant: 2006			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Site Improvement	Site Improvements							
MO129-1	A) Landscaping New Community Building	1450	1 BLDG	25,156	25,156	0	0	
	Sub Total			25,156	25,156	0	0	
HA Wide Dwelling Struct	Dwelling Structures							
MO129-02	A) Install Crickets around Drains & Repair Roof	1460	1 Bldg	6,000	6,000	0	0	
	Sub Total			6,000	6,000	0	0	

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

PHA Name: Hannibal Housing Authority		Grant Type and Number Capital Fund Program No: MO36P1295010Z6 Replacement Housing Factor No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			Reasons for Revised Target Dates			Reasons for Revised Target Dates
	Original			Original	Revised	Actual	
HA Wide	5/3/09			5/3/10			
MO129-01	5/3/09			5/3/10			
MO129-02	5/3/09			5/3/10			

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MO36P12950108		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	0	0	0
2	1406 Operations	75,190			
3	1408 Management Improvements	75,190			
4	1410 Administration	37,595			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	840			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	6,500			
10	1460 Dwelling Structures	176,439			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	4,195			
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	1501 Collateralization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	375,949			
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 compliance	0			
24	Amount of line 21 Related to Security – Soft Costs	32,000			
25	Amount of Line 21 Related to Security – Hard Costs	0			
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: M036P12950108			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	
HA Wide OPS	Operations							
	A) Housing Operations	1406	LS	75,190				
	Sub total			75,190				
HA Wide Mgmt Imp	Management Improvements							
	A) Fund Security Program	1408	100%	32,000				
	B) Mgmt/Maint Training		LS	7,190				
	C) Administer Resident Drug Prevention Programs		100%	36,000				
	Sub total			75,190				
HA Wide Admin	Administration							
	A) Partial ED Salary	1410	10%	3,672				
	B) Grant Admin Salary		100%	33,923				
	Sub Total			37,595				

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: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: M036P12950108			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	
HA Wide Fees & Costs	Fees & Costs							
	A) Accounting Fees CF	1430	LS	840				
	Sub total			840				
HA Site Improvements	Site Improvements							
MO129-1	A) Install Fencing	1450	200LF	6,500				
	Sub Total			6,500				
HA Dwelling Structures	Dwelling Structures							
MO129-5	A) Replace Windows in units & Common Areas	1460	105	82,439				
MO129-5	B) Replace Kitchen Cabinets & Counter Tops		42	94,000				
	Sub Total			176,439				

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: Hannibal Housing Authority			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: M036P12950108			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	
HA Wide Non-Dwelling Equip	Non-Dwelling Equipment							
	A) Replace Mower	1475		4,195				
	Sub Total			4,195				
	Grand Total			375,949				

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

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

PHA Name: Hannibal Housing Authority		Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:					Federal FY of Grant:
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA WIDE	9/5/10			9/5/11			
MO129-1	9/5/10			9/5/11			
MO129-5	9/5/10			9/5/11			

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Hannibal Housing Authority				<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant MO36P12950109 PHA FY: 2009	FFY Grant MO36P12950110 PHA FY: 2010	FFY Grant: MO36P12950111 PHA FY: 2011	FFY Grant: MO36P12950112 PHA FY: 2012
	Annual Statement				
1406 HA Wide Operations		75,190	75,190	75,190	75,190
1408 HA Wide Management. Improvements		75,190	75,190	75,190	75,190
1410 HA Wide Administration		37,595	37,595	37,595	37,595
1430 HA Wide Fees & Costs		840	840	840	840
1450 Site Improvements		60,660	19,500	40,984	6,000
1460 Dwelling Structures		93,883	0	138,150	114,134
1465 Dwelling Equipment		0	26,634	0	0
1470 Non Dwelling Structures		0	132,000	4,000	0
1475 Non Dwelling Equipment		32,591	9,000	4,000	67,000
CFP Funds Listed for 5-year planning		375,949	375,949	375,949	375,949
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year :2 FFY Grant: MO36P12950109 PHA FY: 2009			Activities for Year: 3 FFY Grant: MO36P12950110 PHA FY: 2010		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>1406 HA Wide Operations</i>	<i>A) Housing Operations</i>	75,190	<i>1406 HA Wide Operations</i>	<i>A) Housing Operations</i>	75,190
Annual Statement		<i>Sub Total</i>	75,190		<i>Sub Total</i>	75,190
	1408 HA Wide Management Improvements	A) Fund Security Program	32,000	1408 HA Wide Management Improvements	A) Fund Security Program	32,000
		B) Mgmt/Maint Training	7,190		B) Mgmt/Maint Training	7,190
		C) Fund Resident & Drug Prevention Program	36,000		C) Fund Resident & Drug Prevention Program	36,000
		Sub Total	75,190		Sub Total	75,190
	1410 HA Wide Administration	A) Partial ED's Salary	3,672	1410 HA Wide Administration	A) Partial ED's Salary	3,672
		B) Grant Admin Salary	33,923		B) Grant Admin Salary	33,923
		Sub total	37,595		Sub total	37,595
Total CFP Estimated Cost			\$			\$

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

Activities for Year : <u> 2 </u> FFY Grant: MO36P12950109 PHA FY: 2009			Activities for Year: <u> 3 </u> FFY Grant: MO36P12950110 PHA FY: 2010		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
1430 HA Wide Fees & Costs	A) Accounting Fees Capital Funds	840	1430 HA Wide Fees & Costs	A) Accounting Fees Capital Funds	840
	Sub total	840		Sub Total	840
1450 Site Improvements			1450 Site Improvements		
MO129-1	A) Build Picnic shelter, tables, grills	14,580	MO129-1	A) Replace sidewalk	10,500
MO129-4	B) Build Picnic shelter, tables, grills	14,580	MO129-4	B) Replace Sidewalk	6,000
MO129-6	C) Build Picnic shelter, tables, grills	9,500	MO129-6	C) Replace Sidewalk	3,000
MO129-2	D) Screen enclose existing patio	7,500		Sub Total	19,500
MO129-2	E) Purchase Gazebo front entrance	7,000			
MO129-5	F) Screen enclose existing patio	7,500			
	Sub Total	60,660			
1460 Dwelling Structures			1465 Dwelling Equipment		

MO129-1	A) Replace gutter & downspouts	46,280.50	MO129-1	A) Install Energy Star Shower Heads	2,000
MO129-4	B) Replace gutters & downspouts	31,735.20	MO129-2	B) Install Energy Star Shower Heads	2,000
MO129-6	C) Replace gutters & downspouts	15,867.30	MO129-4	C) Install Energy Star Shower Heads	1,334
	Sub Total	98,883	MO129-5	D) Install Energy Star Shower Heads	1,130
			MO129-6	E) Install Energy Star Shower Heads	720
1475 HA Wide Non Dwelling Equipment			MO129-2	F) Install entry knob & deadbolts	11,950
	A) Replace Mower	5,000	MO129-5	G) Install entry knob & deadbolts	7,500
	B) Purchase new tools & maint equipment	2,591		Sub Total	26,634
	C) Replace Maint Vehicle	25,000	1470 Non-Dwelling Structure		
	Sub Total	32,591	MO129-1	A) Replace interior doors & hardware	125,000
				B) Replace bathroom vents	7,000
				Sub total	132,000
			1475 Non Dwelling Equipment	A) Replace Mower	4,000
				B) Upgrade computer system	5,000
				Sub Total	9,000
	Grand Total	375,949		Grand Total	375,949
Total CFP Estimated Cost		375,949			375,949

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

Activities for Year 1	Activities for Year :4 FFY Grant: MO36P12950111 PHA FY: 2011			Activities for Year: 5 FFY Grant: MO36P12950112 PHA FY: 2012		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	<i>1406 HA Wide Operations</i>	<i>A) Housing Operations</i>	75,190	<i>1406 HA Wide Operations</i>	<i>A) Housing Operations</i>	75,190
Annual Statement		<i>Sub Total</i>	75,190		<i>Sub Total</i>	75,190
	1408 HA Wide Management Improvements	A) Fund Security Program	32,000	1408 HA Wide Management Improvements	A) Fund Security Program	32,000
		B) Mgmt/Maint Training	7,190		B) Mgmt/Maint Training	7,190
		C) Fund Resident & Drug Prevention Program	36,000		C) Fund Resident & Drug Prevention Program	36,000
		Sub Total	75,190		Sub Total	75,190
	1410 HA Wide Administration	A) Partial ED's Salary	3,672	1410 HA Wide Administration	A) Partial ED's Salary	3,672
		B) Grant Admin Salary	33,923		B) Grant Admin Salary	33,923
		Sub total	37,595		Sub total	37,595
Total CFP Estimated Cost			\$			\$

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

Activities for Year :_4___ FFY Grant: MO36P12950111 PHA FY: 2011			Activities for Year: 5 FFY Grant: MO36P12950112 PHA FY: 2012		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
1430 HA Wide Fees & Costs	A) Accounting Fees Capital Funds	840	1430 HA Wide Fees & Costs	A) Accounting Fees Capital Funds	840
	Sub total	840		Sub Total	840
1450 Site Improvements			1450 Site Improvements		
MO129-2	A) Repair & pave asphalt parking lot	17,500	MO129-2	A) Handrails Exterior	3,000
MO129-5	B) Repair & pave asphalt parking lot	10,800	MO129-5	B) Handrails Exterior	3,000
MO129-1	C) Repair & seal parking lots	6,000		Sub total	6,000
MO129-4	D) Repair & seal parking lots	4,000			
MO129-6	E)Repair & seal parking lots	2,684			
	Sub total	40,984			
1460 Dwelling Structures			1460 Dwelling Structures		
MO129-2	A) Replace mailboxes	1,200	MO129-2	A) Paint lobby, halls, stairway, bathrooms, & closets	13,500

MO129-5	B) Replace mailboxes	1,950	MO129-5	A) Paint lobby, halls, stairway, bathrooms, & closets	6,500
MO129-4	C) Replace Kitchen cabinet, sinks & faucets	135,000	MO129-2	C) Install energy star fluorescent sconces	6,400
	Sub total	138,150	MO129-5	D)Install energy star fluorescent scones	2,734
			MO129-6	E) Remove & replace roof shingles	85,000
				Sub total	114,134
1470 Non Dwelling Structure			1475 Non Dwelling Equipment		
MO129-1 Admin office	A) Repaint office	4,000		A) Replace maint mower	5,000
	Sub total	4,000		B) upgrade computer system & software	17,000
				C) Replace Maint vehicle	28,000
1475 Non Dwelling Equipment				D) Maint equipment & tools	3,000
	A) Replace Maint Mower	4,000	MO129-2	E) Lobby furniture	9,500
	Sub total	4,000	MO129-5	F) Lobby furniture	5,000
				Sub Total	67,000
	Grand Total	375,949		Grand Total	375,949
Total CFP Estimated Cost		375,949			375,949

VIOLENCE AGAINST WOMEN ACT (VAWA) PROVISIONS RE: DENIAL OR TERMINATION OF ASSISTANCE

If an applicant or participant is or has been a victim of domestic violence, dating violence, or stalking, as defined below, is not an appropriate basis for denial or termination of program assistance, if the victim of such violence otherwise qualifies for assistance or admission.

“Domestic Violence” has the same meaning given the term in section 40002 of the Violence Against Women Act of 1994.

“Dating Violence” has the same meaning given the term in section 40002 of the Violence Against Women Act of 1994.

“Stalking” means: to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or place under surveillance with the intent to kill, injure, harass, or intimidate another person; and, in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to” that person or a member of the immediate family of that person; or the spouse or intimate partner of that person.

“Immediate Family Member” means, with respect to a person a spouse, parent, brother or sister, or child of that person, or an individual to whom that person stands in loco parentis” or any other person living in the household of that person and related to that person by blood and marriage. Nothing in this section shall be construed to supersede any provision of any Federal, State, or local law that provides greater protection than this section for victims of domestic violence, dating violence, or stalking.

All information provided to an owner, manager or HHA pursuant to this section including the fact that an individual is a victim of domestic violence, dating violence, or stalking: shall be retained in the confidence by the landlord or HHA; and shall neither be” entered into any shared database; nor provided to any related entity; except to the extent that disclosure is” requested or consented to by the individual in writing; required for use in an eviction proceeding as set forth in this section or otherwise required by applicable law.

HHA will provide notice to tenants assisted under Section 8 of the United States Housing Act of 1937 of their rights under this Section including their right to confidentiality and the limits thereof, and to landlords of their rights and obligations under this section.

INCIDENTS OF DOMESTIC VIOLENCE, DATING VIOLENCE OR STALKING

In responding to an incident or incidents of actual or threatened domestic violence, dating violence, or stalking, a landlord of HHA may request that an individual certify via a HUD approved certification from that: the individual is a victim of domestic violence, dating violence, or stalking; and that the incident or incidents in question are: bona fide incidents of such actual or threatened abuse; and meet the requirements of this policy.

Such certification shall provide such certification within 14 business days of the date that the participant receives the written request for certification from the owner, manager or PHA.

If the individual does not provide the certification within the 14 day period set forth above, nothing in this may be construed to limit the authority of a land lord to evict, or HHA to terminate the program assistance for, any tenant or lawful occupant that commits violations of a lease.

The landlord or the HHA may extend the 14-day deadline at its discretion.

An individual may satisfy the certification requirement of the information above by:

Providing the requesting land lord or HHA with documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of the abuse, in which the professional's belief that the incident or incidents in question are:

Bona fide incidents of abuse; and the victim of domestic violence, dating violence , or stalking has signed or attested to the documentation; or producing a Federal, State, tribal, territorial, or local police or court record.

Nothing in this subsection shall be construed to require a landlord of HHA to demand that an individual produce official documentation or physical proof of the individual's status as a victim of domestic violence, dating violence, sexual assault or stalking in order to receive any of the benefits provided in this policy.

At its discretion, a landlord or HHA may provide benefits to an individual based solely on the individual's statement or other corroborating evidence.

Compliance with this statute by a landlord or HHA based on the certification specified in this policy above shall not alone be sufficient to constitute evidence of an unreasonable act or omission by a landlord or HHA, or employee thereof.