

PHA Plans

Streamlined Annual

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

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

Version

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

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

Streamlined Annual PHA Plan for Fiscal Year: 2008

PHA Name:

**The Rockingham Housing Authority - Rockingham North Carolina
NC025-v04**

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: Rockingham Housing Authority **PHA Number:** NC025

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: 225 Number of S8 units: Number of public housing units:
 Number of S8 units: 55

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: Gracie Ingram Phone: 1-910-997-3316
 TDD: Email (if available): gingram@carolina.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 20
[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. **PHA does not plan to project base any tenant based Section 8 vouchers in the coming year**

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.

NO CHANGES THIS YEAR

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)

To Provide safe, sanitary and decent housing. To assist the PHA in providing economic opportunities to its residents and to work with other housing agencies to provide housing to prospective, eligible residents.

The 2008 Plan was sent for review to the Division of Community Assistance, Department of Commerce Raleigh, NC and received a completed “*Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan*”

**Copy of Executed Statement Attached at End
Copy of Certification of Compliance Attached At End**

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
√	<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
√	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
√	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
√	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
√	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
√	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
√	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
√	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 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 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 Ref: Chapter 11
√	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
√	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
√	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
√	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
√	Any policies governing any Section 8 special housing types <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance Ref Chapter 20
√	Public housing grievance procedures <input 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 Ref Chapter 19
√	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
√	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
√	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
√	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
√	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
	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
√	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
√	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	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
√	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
√	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) Violence Against Women	(specify as needed) Annual Plan
	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Management and Operations

Domestic Violence

Violence Against Women Act

The Rockingham Housing Authority in accordance with the Violence Against Women Act passed by Congress and signed by President Bush on January 5, 2006 has adopted the following policy:

1. The PHA will not deny admission to any applicant on the basis that the applicant is or has been a victim of domestic violence, dating violence or stalking if the applicant otherwise qualifies for assistance or admission.
2. The PHA will not terminate assistance to a participant because of an incident of actual or threatened domestic violence, dating violence, or stalking against such participant. Criminal activity directly relating to domestic violence, dating violence or stalking shall not be considered a serious or repeated lease violation justifying termination of assistance to the victim or threaten victim. Criminal activity, with exceptions, directly relating to domestic violence, dating violence or stalking shall not be considered cause for termination of assistance for any participant or immediate member of participant's family who is a victim of such domestic violence, dating violence or stalking.
3. A victim must provide certification as proof of domestic violence, stalking, dating violence to the PHA. Certification must be obtained from Law Enforcement, a domestic violence agency, lawyer, or social worker. All information is confidential.
4. All other covenant of the lease will apply.

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19PO2550108 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	30,000.00			
3	1408 Management Improvements	10,000.00			
4	1410 Administration	2,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	29,600.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	25,000.00			
10	1460 Dwelling Structures	240,736.00			
11	1465.1 Dwelling Equipment—Nonexpendable	10,000.00			
12	1470 Nondwelling Structures	1,000.00			
13	1475 Nondwelling Equipment	11,000.00			
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)	359,336.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19P02550108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA- Wide	Operations	1406		30,000.00				
	Subtotal			30,000.00				
PHA-Wide	Management Improve.	1408		10,000.00				
	Upgrade Computer Software							
	Subtotal			10,000.00				
PHA-Wide	Administration	1410		2,000.00				
	Subtotal			2,000.00				

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

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19P02550108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Fees & Costs:	1430.1		27,000.00				
	a. Architects fee to prepare bid and contract documents, drawings, specifications & Assist the PHA at bid openin							
	Awarding the contract & to Supervise the const.							
PHA Wide	b. Consultant Fees	1430.2		2,600.00				
	Hire Consultant to prepare Agency plan							
	Subtotal			29,600.00				
PHA Wide	Site Improvements:							
	Playground Equipment			25,000.00				
	Subtotal			25,000.00				

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

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19P02550108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Dwelling Structures	1460						
PHA Wide	Roof Replacement/Sheathing		50 units	170,736.00				
	Misc. Repairs - HVAC			20,000.00				
	Misc.- Kitchen Countertops & doors			50,000.00				
	Entry/Screen Doors, Sec. Window							
	Screens, Bathroom Floor Tile							
	Subtotal			240,736.00				
	Dwelling Equipment	1465						
PHA-Wide	Ranges & Refrigerators			10,000.00				
	Water Heaters							
	Subtotal			10,000.00				
PHA-Wide	Non-Dwelling Structures	1470		1,000.00				
	Misc. Repairs							
	Subtotal			1,000.00				
PHA-Wide	Non-Dwelling Equip	1475						
	Misc Office/Maint. Equip			1,000.00				
	Upgrade Computer Equip			10,000.00				
	Subtotal			11,000.00				
	Grand Total			356,336.00				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Rockingham Housing Authority			Grant Type and Number Capital Fund Program No: NC19P02550108 Replacement Housing Factor No:				Federal FY of Grant: 2008
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA-Wide	09/12/10			09/12/12			

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:) #1 12/31/07 <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/07 <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	30,000.00	30,000.00	30,000.00	
3	1408 Management Improvements				
4	1410 Administration	2,000.00	2,000.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	27,000.00	37,600.00	25,000.00	200.00
8	1440 Site Acquisition				
9	1450 Site Improvement	100,000.00	25,000.00		
10	1460 Dwelling Structures	155,336.00	219,392.90	75,967.69	1,965.86
11	1465.1 Dwelling Equipment—Nonexpendable	20,000.00	20,000.00		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	25,000.00	25,343.10	25,343.10	25,343.10
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)	359,336.00	359,336.00	156,310.79	27,508.96
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550107 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	
PHA-Wide	Operations	1406		30,000.00	3,000.00	30,000.00		Obligated
PHA-Wide	Administration	1410		2,000.00	2,000.00			
	Fees & Costs							
PHA-Wide	a. Architects fee to	1430.1		25,000.00	25,000.00	25,000.00	200.00	Obligated
	Prepare bid and contract							
	Documents, drawings, specs &							
	assist the PHA at bid opening							
	Awarding the contract &							
	To supervise the const.							
	Work on a periodic basis							
	Fee to be negotiated							
PHA-Wide	b. Consultant Fees							
	Hire Consultant to prepare Plan	1430.2		2,000.00	2,600.00			
	Hire Consult – 504 Needs Assess				10,000.00			Moved from
	Subtotal			27,000.00	37,600.00		200.00	2005

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

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550107 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	
PHA-Wide	Site Improvements	1450						
	Sidewalks and Repair			100,000.00	0			
	Playground Equip				25,000.00			
	Subtotal			100,000.00	25,000.00			
PHA-Wide	Dwelling Structures	1460						
	HVAC Repair & Replacement			40,000.00	40,000.00			
	Furnace Replacement		21 units	67,465.00	78,425.21			
	Misc. Repairs – roofing –int/ext			47,871.00	100,967.69	75,967.69	1,965.86	Obligated
	Subtotal			155,336.00	219,392.90			Central
PHA-Wide	Dwelling Equipment	1465						
	Non Expendable							
PHA-Wide	Ranges & Refrigerators			10,000.00	10,000.00			
	Replace Water Heaters			10,000.00	10,000.00			
	Subtotal			20,000.00	20,000.00			
PHA-Wide	Non-Dwelling Equip	1475						
	Purchase Vehicle			25,000.00	25,343.10	25,343.10	25,343.10	Complete
	Subtotal			25,000.00	25,343.10	25,343.10	25,343.10	
	Grant Total			359,336.00				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) 12/31/07 <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/07 <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	39,054.00	39,054.00	39,054.00	39,054.00
3	1408 Management Improvements				
4	1410 Administration	2,000.00	0		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30,000.00	26,578.00	26,578.00	9,410.00
8	1440 Site Acquisition				
9	1450 Site Improvement	151,465.00	0		
10	1460 Dwelling Structures	83,000.00	249,887.00	249,887.00	220,206.70
11	1465.1 Dwelling Equipment—Nonexpendable	10,000.00	0		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	315,519.00	315,519.00	315,519.00	268,670.70
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19P02550106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations	1406		39,054.00	39,054.00	39,054.00	39,054.00	Complete
PHA-Wide	Administration	1410		2,000.00	0			
PHA-Wide	Fees & Costs							
	a. Architects fee to	1430.1		28,000.00	26,000.00	26,000.00	26,000.00	Complete
	Prepare bid and contract							
	Documents, drawings, specs & assist the PHA at bid opening							
	Awarding the contract & To supervise the const.							
	Work on a periodic basis							
	Fee to be negotiated							
	b. Consultant Fees							
	Hire Consultant to Agency Plan	1430.2		2,000.00	578.00	578.00	578.00	Complete
	Subtotal			30,000.00	26,578.00	26,578.00	26,578.00	

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

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550106 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	
	Site Improvements	1450						Moved to
PHA-Wide	Repave 10 driveways			50,000.00	0			1460 Work
	Replace sewer lines at							Completed
	Hunters , Gore & Armstead			101,465.00	0			CFP 2005
	Subtotal			151,465.00				
PHA-Wide	Dwelling Structures	1460						
	Replace screen doors			3,000.00	0			
	Replace roofs at approx 10 units			30,000.00	218,120.03	218,120.03	188,439.73	Complete
	Replace A/C approx 10 units			30,000.00	3,665.94	3,665.94	3,665.94	
	Renovate 5 Bathrooms			20,000.00	26,982.00	26,982.00	26,982.00	Complete
	Replace Fire Extinguishers			0	1,119.03	1,119.03	1,119.03	Emergency
	Subtotal			83,000.00	249,887.00	249,887.00	220,206.70	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550106 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	
	Dwelling Equipment							
	Non-Expendable	1465						
PHA-Wide	Ranges & Refrigerators			5,000.00	0			
	Replace Water Heaters			5,000.00	0			
	Subtotal			10,000.00				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" 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	30,000.00	30,000.00	30,000.00	30,000.00
3	1408 Management Improvements				
4	1410 Administration	2,000.00	0		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	37,275.00	27,275.00	27,275.00	27,275.00
8	1440 Site Acquisition				
9	1450 Site Improvement	7,000.00	54,171.00	54,171.00	54,171.00
10	1460 Dwelling Structures	228,586.32	190,570.12	190,570.12	190,570.12
11	1465.1 Dwelling Equipment—Nonexpendable	10,132.71	12,734.52	12,734.52	12,734.52
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	17,792.97	18,036.36	18,036.36	18,036.36
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)	332,787.00	332,787.00	332,787.00	332,787.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550105 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations	1406		30,000.00	30,000.00	30,000.00	30,000.00	Complete
PHA-Wide	Administration	1410		2,000.00	0			
	Fees & Costs							
PHA-Wide	a. Architects fee to	1430.1		26,000.00	26,000.00	26,000.00	26,000.00	Complete
	Prepare bid and contract							
	Documents, drawings, specs &							
	assist the PHA at bid opening							
	Awarding the contract &							
	To supervise the const.							
	Work on a periodic basis							
	Fee to be negotiated							
PHA-Wide	b. Consultant Fees							
	Hire Consultant to Agency Plan	1430.2		1,275.00	1,275.00	1,275.00	1,275.00	Complete
	Hire Consultant for 504 Needs			10,000.00	0			
	Assessment							
	Subtotal			37,275.00	27,275.00	27,275.00	27,275.00	

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

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550105 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Site Improvements	1450						
	Provide Clothesline wiring			500.00	0			
	Provide new handrails at site steps			1,000.00	0			
	Sidewalk repair/replace			5,000.00	53,271.00	53,271.00	53,271.00	Complete
	Erosion Control/Landscaping/ Tree removal			500.00	900.00	900.00	900.00	Moved from 2006
	Subtotal			7,000.00	54,171.00	54,171.00	54,171.00	
PHA-Wide	Dwelling Structures	1460						
	Settlement Problems							
	NC 25-2 710,707,706, 319Hunter			40,000.00	0			
	NC 25-1 607, 609 Gore							
	Subtotal			40,000.00	0			

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

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P02550105 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Dwelling Structures	1460						
	Miscellaneous Repairs to Units							
NC 25-1	Replace ceramic Tile Base			10,000.00	0			
	Repairs to Exterior Doors			524.00	524.00	524.00	524.00	Complete
NC 25-2	Replace Ceramic Tile Base			12,000.00	0			
	Repairs to Exterior Doors			12,000.00	0			
NC 25-4	Rework two baths completely			6,600.00	973.62	973.62	973.62	Complete
	Rockingham Rd & Armstead St							
PHA-Wide	Replace Floor Tile –		15 apts	12,000.00	331.70	331.70	331.70	Complete
	Replace or repair sinks		20 apts	6,000.00	0			
	Replace interior doors		70 apts	10,000.00	0			
	Provide pantry closets		8 apts	8,000.00	0			
	Misc. ext. paint, screen doors, Columns, rails			28,316.59	9,845.85	9,845.85	9,845.85	Complete
	Replace 10 roofs, update some Plumbing pipes			13,050.00	13,050.00	13,050.00	13,050.00	Complete
	Emergency roofing of units			0	106,444.58	106,444.58	106,444.58	Started
	Subtotal			129,966.59	131,169.75	131,169.75	131,169.75	Complete 06 And 07

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

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Rockingham Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19P02550105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Dwelling Structures	1460						
	Emergency HVAC			50,000.00	50,780.64	50,780.64	50,780.64	Complete
	Smoke Detectors/fire exting.			6,324.60	6,324.60	6,324.60	6,324.60	Complete
	Emergency Energy Audit Updates			2,295.13	2,295.13	2,295.13	2,295.13	Complete
	Subtotal			58,619.73	59,400.37	59,400.37	59,400.37	
	Total 1460			228,586.32	190,570.12	190,570.12	190,570.12	
PHA-Wide	Dwelling Equipment	1465						
	Replace Stoves & Refrigerators			10,132.71	12,734.52	12,734.52	12,734.52	Complete
	Replace Water Heaters			0				
	Subtotal			10,132.71	12,734.52	12,734.52	12,734.52	
PHA-Wide	Non-Dwelling Equipment	1475						
	Upgrade Computer Equip			5,551.96	5,551.96	5,551.96	5,551.96	Complete
	Purchase new office equip. & Camera surveillance System			12,241.01	12,241.01	12,241.01	12,241.01	Complete
	Maintenance Equipment				243.39	243.39	243.39	Complete
	Subtotal			17,792.97	18,036.36	18,036.36	18,036.36	
	Grant Total			332,787.00				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Rockingham Housing Authority			Grant Type and Number Capital Fund Program No: NC19P02550105 Replacement Housing Factor No:				Federal FY of Grant: 2005
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA-Wide	08/18/07		08/15/07	08/18/09		12/17/07	
NC 25-1	08/18/07		08/15/07	08/18/09		12/17/07	
NC 25-2	08/18/07		08/15/07	08/18/09		12/17/07	
NC 25-4	08/18/07		08/15/07	08/18/09		12/17/07	

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

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name: Rockingham 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 FFY Grant: 2009 PHA FY: 2009	Work Statement for Year 3 FFY Grant: 2010 PHA FY: 2010	Work Statement for Year 4 FFY Grant: 2011 PHA FY: 2011	Work Statement for Year 5 FFY Grant: 2012 PHA FY: 2012
NC 25-1 NC 25-2 NC 25-3 NC 25-4 PHA-Wide <i>Total</i>	Annual Statement	359,336.00 359,336.00	359,336.00 359,336.00	359,336.00 359,336.00	359,336.00 359,336.00
Physical Improv		254,633.00	274,336.00	272,336.00	294,336.00
HA Wide Non-Dwelling Structures & Equipment		42,703.00	13,000.00	25,000.00	3,000.00
Administration		2,000.00	2,000.00	2,000.00	2,000.00
Other		30,000.00	30,000.00	30,000.00	30,000.00
Operations		30,000.00	30,000.00	30,000.00	30,000.00
Management Improvements		0	10,000.00	0	0
CFP Funds Listed for 5-year planning		359,336.00	359,336.00	359,336.00	359,336.00
Replacement Housing Factor Funds					

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

OMB Guidance No. 2577-0167 (Rev. 06/09/18)

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing and Urban Development
200 Constitution Avenue, N.W., Washington, D.C. 20548

Section 101

Account Name: [Redacted] Date: 8/2/23

Program: [Redacted] Section: [Redacted]

This is to certify that I am, to the best of my knowledge and belief, that:

(1) The federal employee or federal contractor, or the person or persons acting on behalf of the contractor, is not a member, officer, or employee of an agency, a Member of Congress, an officer or employee of the Executive branch of the Federal Government, or a member or employee of the Federal Reserve System, or a member or employee of the Federal Reserve Bank, or a member or employee of the Federal Reserve Bank of Atlanta, or a member or employee of the Federal Reserve Bank of Boston, or a member or employee of the Federal Reserve Bank of Chicago, or a member or employee of the Federal Reserve Bank of Cleveland, or a member or employee of the Federal Reserve Bank of Dallas, or a member or employee of the Federal Reserve Bank of Denver, or a member or employee of the Federal Reserve Bank of Kansas City, or a member or employee of the Federal Reserve Bank of Minneapolis, or a member or employee of the Federal Reserve Bank of New York, or a member or employee of the Federal Reserve Bank of Philadelphia, or a member or employee of the Federal Reserve Bank of Richmond, or a member or employee of the Federal Reserve Bank of San Francisco, or a member or employee of the Federal Reserve Bank of St. Louis, or a member or employee of the Federal Reserve Bank of San Antonio, or a member or employee of the Federal Reserve Bank of St. Paul, or a member or employee of the Federal Reserve Bank of San Diego, or a member or employee of the Federal Reserve Bank of Seattle, or a member or employee of the Federal Reserve Bank of St. Petersburg, or a member or employee of the Federal Reserve Bank of Tampa, or a member or employee of the Federal Reserve Bank of Washington, D.C., or a member or employee of the Federal Reserve Bank of Atlanta, or a member or employee of the Federal Reserve Bank of Boston, or a member or employee of the Federal Reserve Bank of Chicago, or a member or employee of the Federal Reserve Bank of Cleveland, or a member or employee of the Federal Reserve Bank of Dallas, or a member or employee of the Federal Reserve Bank of Denver, or a member or employee of the Federal Reserve Bank of Kansas City, or a member or employee of the Federal Reserve Bank of Minneapolis, or a member or employee of the Federal Reserve Bank of New York, or a member or employee of the Federal Reserve Bank of Philadelphia, or a member or employee of the Federal Reserve Bank of Richmond, or a member or employee of the Federal Reserve Bank of San Francisco, or a member or employee of the Federal Reserve Bank of St. Louis, or a member or employee of the Federal Reserve Bank of San Antonio, or a member or employee of the Federal Reserve Bank of St. Paul, or a member or employee of the Federal Reserve Bank of San Diego, or a member or employee of the Federal Reserve Bank of Seattle, or a member or employee of the Federal Reserve Bank of St. Petersburg, or a member or employee of the Federal Reserve Bank of Tampa, or a member or employee of the Federal Reserve Bank of Washington, D.C.

(2) The federal employee or federal contractor, or the person or persons acting on behalf of the contractor, is not a member, officer, or employee of an agency, a Member of Congress, an officer or employee of the Executive branch of the Federal Government, or a member or employee of the Federal Reserve System, or a member or employee of the Federal Reserve Bank, or a member or employee of the Federal Reserve Bank of Atlanta, or a member or employee of the Federal Reserve Bank of Boston, or a member or employee of the Federal Reserve Bank of Chicago, or a member or employee of the Federal Reserve Bank of Cleveland, or a member or employee of the Federal Reserve Bank of Dallas, or a member or employee of the Federal Reserve Bank of Denver, or a member or employee of the Federal Reserve Bank of Kansas City, or a member or employee of the Federal Reserve Bank of Minneapolis, or a member or employee of the Federal Reserve Bank of New York, or a member or employee of the Federal Reserve Bank of Philadelphia, or a member or employee of the Federal Reserve Bank of Richmond, or a member or employee of the Federal Reserve Bank of San Francisco, or a member or employee of the Federal Reserve Bank of St. Louis, or a member or employee of the Federal Reserve Bank of San Antonio, or a member or employee of the Federal Reserve Bank of St. Paul, or a member or employee of the Federal Reserve Bank of San Diego, or a member or employee of the Federal Reserve Bank of Seattle, or a member or employee of the Federal Reserve Bank of St. Petersburg, or a member or employee of the Federal Reserve Bank of Tampa, or a member or employee of the Federal Reserve Bank of Washington, D.C.

(3) The federal employee or federal contractor, or the person or persons acting on behalf of the contractor, is not a member, officer, or employee of an agency, a Member of Congress, an officer or employee of the Executive branch of the Federal Government, or a member or employee of the Federal Reserve System, or a member or employee of the Federal Reserve Bank, or a member or employee of the Federal Reserve Bank of Atlanta, or a member or employee of the Federal Reserve Bank of Boston, or a member or employee of the Federal Reserve Bank of Chicago, or a member or employee of the Federal Reserve Bank of Cleveland, or a member or employee of the Federal Reserve Bank of Dallas, or a member or employee of the Federal Reserve Bank of Denver, or a member or employee of the Federal Reserve Bank of Kansas City, or a member or employee of the Federal Reserve Bank of Minneapolis, or a member or employee of the Federal Reserve Bank of New York, or a member or employee of the Federal Reserve Bank of Philadelphia, or a member or employee of the Federal Reserve Bank of Richmond, or a member or employee of the Federal Reserve Bank of San Francisco, or a member or employee of the Federal Reserve Bank of St. Louis, or a member or employee of the Federal Reserve Bank of San Antonio, or a member or employee of the Federal Reserve Bank of St. Paul, or a member or employee of the Federal Reserve Bank of San Diego, or a member or employee of the Federal Reserve Bank of Seattle, or a member or employee of the Federal Reserve Bank of St. Petersburg, or a member or employee of the Federal Reserve Bank of Tampa, or a member or employee of the Federal Reserve Bank of Washington, D.C.

This report is to be submitted to the U.S. Department of Housing and Urban Development, Office of Inspector General, 400 ...

Signature: [Redacted] Date: 8/2/23
 Signature: [Redacted] Date: 8/2/23

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

DISCLOSURE OF LOBBYING ACTIVITIES
Complete this form to disclose lobbying activities covered by 41 U.S.C. 10127 (State reasons for public financing criteria)

Effective 11/1/2004
 HUD-50075

<p>1. Type of Federal Action:</p> <p><input checked="" type="checkbox"/> a. COM (C) <u>Contract</u> <input type="checkbox"/> b. grant <input type="checkbox"/> c. contract or agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance</p>	<p>2. Status of Federal Action:</p> <p><input checked="" type="checkbox"/> a. solicitation issued <input type="checkbox"/> b. bid received <input type="checkbox"/> c. proposal</p>	<p>3. Receipt Type:</p> <p><input type="checkbox"/> a. initial <input type="checkbox"/> b. renewal/extension <input type="checkbox"/> c. modification <input type="checkbox"/> d. other</p> <p>For Material Change Only: Date: _____ Cause: _____</p>
<p>4. Name and Address of Reporting Entity:</p> <p>1415 W.</p> <p>Congressional District: <u>...</u></p>	<p>5. Reporting Entity In. No. and a 30 Digit Unique Entity Name and Address of Prime:</p> <p>...</p> <p>Congressional District: <u>...</u></p>	
<p>6. Federal Department/Agency:</p> <p>...</p>	<p>7. Federal Program Name/Block Grant:</p> <p>...</p> <p>CFDA Number, if applicable: _____</p>	
<p>8. Federal Action Number, if known:</p> <p>...</p>	<p>9. Award Amount, if known:</p> <p>...</p>	
<p>10. a. Name and Address of Lobbying Participant: <small>(If known at the time of award, list)</small></p> <p>...</p>	<p>b. Individuals Performing Services (including address of individual from 10/1/03): <small>(List names and phone #s)</small></p> <p>...</p>	
<p>11. Signature of Reporting Entity:</p> <p>Signature: _____ Title: _____ Date: _____</p>	<p>Signature: _____ Title: _____ Date: _____</p>	

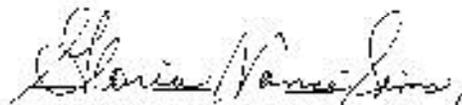
Federal Use Only: _____

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

Use Form HUD-50075-1A for the Consolidated Plan
Attachment 1: Annual Report

**Certification by State or Local Official of PHA Plans Consistency with
the Consolidated Plan**

I, Shirley H. Smith, Secretary, City of Chicago, hereby certify
that the Plan and Annual PHA Plan of the City of Chicago are
consistent with the Consolidated Plan of Public Housing and
pertaining to the PHA.


Signed / Filed by Applicable State or Local Official 02/07/08

HUD-50075-1A is a form of the Department of Housing and Urban Development, HUD-50075-1A
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