

PHA Plans

Streamlined Annual Version

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

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

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

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

Streamlined Annual PHA Plan

for Fiscal Year: 2008

PHA Name:

Cozad 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: Cozad Housing Authority

PHA Number: NE083

PHA Fiscal Year Beginning: (mm/yyyy) 04/2008

PHA Programs Administered:

Public Housing and Section 8

Number of public housing units: 40
Number of S8 units: 47

Section 8 Only

Number of S8 units:

Public Housing Only

Number of public housing units:

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

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

PHA Plan Contact Information:

Name: Patricia L. Hosick
TDD: 308-784-3661, ext. 16

Phone: 308-784-3661
Email (if available): cozhous@cozadtel.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 2007
[24 CFR Part 903.12(c)]

Table of Contents
[24 CFR 903.7(r)]

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

A. PHA PLAN COMPONENTS

| | | |
|--------------------------|--|--|
| X | 1. Site-Based Waiting List Policies | Page 4 |
| | 903.7(b)(2) Policies on Eligibility, Selection, and Admissions | |
| X | 2. Capital Improvement Needs | Page 5 |
| | 903.7(g) Statement of Capital Improvements Needed | |
| <input type="checkbox"/> | 3. Section 8(y) Homeownership | Page 5 |
| | 903.7(k)(1)(i) Statement of Homeownership Programs | |
| <input type="checkbox"/> | 4. Project-Based Voucher Programs | |
| X | 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. | Page 7 |
| X | 6. Supporting Documents Available for Review | Attachment H Operating Budget Attachment I Statement on Replacement Reserve Attachment J Certification of Policies Attachment K Pet Rules Attachment L Organization Chart Attachment M VAWA Certification |
| X | 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report | Page 11 |
| X | 8. Capital Fund Program 5-Year Action Plan | Page 15 |
| | Capital Fund Program 2005 | Page 21 |
| | Capital Fund Program 2006 | Page 26 |
| | Capital Fund Program 2007 | Page 31 |

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

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

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

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

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

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

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

A. Site-Based Waiting Lists-Previous Year

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

| 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. **Not Applicable**

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)
State of Nebraska

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)

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 |
| XX | <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 |
| XX | <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 |
| XX | <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 |
| XX | 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 |
| XX | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources |
| XX | 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 |

| List of Supporting Documents Available for Review | | |
|--|---|--|
| Applicable & On Display | Supporting Document | Related Plan Component |
| | 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 |
| XX | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies |
| XX | Public housing rent determination policies, including the method for setting public housing flat rents. X Check here if included in the public housing A & O Policy. | Annual Plan: Rent Determination |
| XX | Schedule of flat rents offered at each public housing development. X Check here if included in the public housing A & O Policy. | Annual Plan: Rent Determination |
| XX | 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. X Check here if included in Section 8 Administrative Plan. | Annual Plan: Rent Determination |
| XX | 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 |
| XX | 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-Sufficiency |
| XX | Results of latest Section 8 Management Assessment System (SEMAP) | Annual Plan: Management and Operations |
| | 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 |
| XX | Public housing grievance procedures X Check here if included in the public housing A & O Policy | Annual Plan: Grievance Procedures |
| XX | Section 8 informal review and hearing procedures. X Check here if included in Section 8 Administrative Plan. | Annual Plan: Grievance Procedures |
| XX | 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 |

| List of Supporting Documents Available for Review | | |
|--|---|---|
| Applicable & On Display | Supporting Document | Related Plan Component |
| XX | Public Housing Community Service Policy/Programs X Check here if included in Public Housing A & O Policy | Annual Plan: Community Service & Self-Sufficiency |
| XX | 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 |
| XX | 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 |
| XX | 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 |
| XX | 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) |
| | 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: Cozad Housing Authority | | Grant Type and Number Capital Fund Program Grant No: NE26P98350108 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 checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <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 | 1,000 | | | |
| 3 | 1408 Management Improvements | 5,000 | | | |
| 4 | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 1,579 | | | |
| 10 | 1460 Dwelling Structures | 12,000 | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 14,000 | | | |
| 12 | 1470 Nondwelling Structures | 7,185 | | | |
| 13 | 1475 Nondwelling Equipment | 2,000 | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1499 Development Activities | | | | |
| 19 | 1501 Collateralization or Debt Service | | | | |
| 20 | 1502 Contingency | | | | |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 42,764 | | | |
| 22 | Amount of line 21 Related to LBP Activities | | | | |
| 23 | Amount of line 21 Related to Section 504 compliance | | | | |
| 24 | Amount of line 21 Related to Security – Soft Costs | | | | |
| 25 | Amount of Line 21 Related to Security – Hard Costs | | | | |
| 26 | Amount of line 21 Related to Energy Conservation | | | | |

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

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
|--|--------------------------------|----------------------|---|-------------------|------------------------------|
| PHA Name: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: NE26P98350108 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 checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised | Obligated | Expended |
| | Measures | | | | |

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages | | | | | | | | |
|---|---|------------------|---|----------------------|---------|---------------------------|-------------------|-------------------|
| PHA Name: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: 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 |
| NE083 | | | | Original | Revised | Funds Obligated | Funds Expended | |
| HA WIDE | 1406 Operations: Assist with | | | | | | | |
| | Cost of property Insurance | | | 1,000 | | 1,000 | | |
| | | | | | | | | |
| | 1408 Management Improvements: Staff training, Needs Assessment | | | 5,000 | | 5,000 | | |

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

| Annual Statement/Performance and Evaluation Report | | | | | | | | |
|---|---|---------------|---|----------------------|---------|---------------------------|----------------|----------------|
| Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) | | | | | | | | |
| Part II: Supporting Pages | | | | | | | | |
| PHA Name: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: 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 | |
| NE083 | | | | | | | | |
| | 1450 Site Improvement: Security Lighting, Landscaping | | | 1,579 | | 1,579 | | |
| | 1460 Dwelling Structures: Add insulation, replace storm doors | | | 12,000 | | 12,000 | | |
| | 1465.1 Dwelling Structures: Replace Shower Liners, bathroom sinks, carpet and vinyl replacement | | | 14,000 | | 14,000 | | |
| | 1470 Non Dwelling Structures: Build new laundry facility/building | | | 7,185 | | 7,185 | | |

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: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: 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 | |
| NE083 | | | | Original | Revised | Funds Obligated | Funds Expended | |
| | 1475 Non Dwelling Equipment: Computer Upgrades, Small hand tool replacement, replace laundry equipment | | | 2,000 | | 2,000 | | |
| | | | | | | | | |
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| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule | | | | | |
|---|---|--|----------------------------------|---------------------------------|--|
| PHA Name: Cozad Housing Authority | | Grant Type and Number Capital Fund Program No: Replacement Housing Factor No: | | Federal FY of Grant: 2008-09 | |
| Development Number Name/HA-Wide Activities | All Fund Obligated (Quarter Ending Date) | All Funds Expended (Quarter Ending Date) | Reasons for Revised Target Dates | | |
| | | | | | |

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

| NE083 | Original | Revised | Actual | Original | Revised | Actual | |
|---|-----------|---------|--------|-----------|---------|--------|--|
| HA WIDE | | | | | | | |
| 1406: Operations | 9/30/2009 | | | 9/30/2009 | | | |
| 1408: Management Improvements | 9/30/2009 | | | 9/30/2009 | | | |
| 1450: Site Improvements | 9/30/2009 | | | 9/30/2009 | | | |
| 1460: Dwelling Structures | 9/30/2009 | | | 9/30/2009 | | | |
| 1465.1:Dwelling Equipment-NonExpendable | 9/30/2009 | | | 9/30/2009 | | | |
| 1470: Nondwelling Structures | 9/30/2009 | | | 9/30/2009 | | | |
| 1475: Nondwelling Equipment | 9/30/2009 | | | 9/30/2009 | | | |
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7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

| Capital Fund Program Five-Year Action Plan | | | | | |
|---|------------------|--|--|---|--|
| Part I: Summary | | | | | |
| PHA Name Cozad 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: 2009 PHA FY: 2010 | FFY Grant: 2010 PHA FY: 2011 | FFY Grant: 2011 PHA FY: | FFY Grant: 2012 PHA FY: |
| <i>NE083</i> | Annual Statement | 1406:Operations | 1406: Operations | 1406: Operations | 1406:Operations |
| Haymaker Haven | | 1408: Management Improvements | 1408: Management Improvements | 1408: Management Improvements | 1408: Management Improvements |
| | | 1460: Dwelling Structures | 1460: Dwelling Structures | 1460: Dwelling Structures | 1460: Dwelling Structures |
| HA Wide | | 1465.1: Dwelling Equipment-Nonexpendable | 1465.1: Dwelling Equipment-Nonexpendable | 1465.1: Dwelling Equipment-Nonexpendable | 1465.1 Dwelling Equipment-Nonexpndable |
| | | 1465.1: Dwelling Equipment-Nonexpendable | 1475: Nondwelling Equipment | 1470: Nondwelling Structures | 1470: Nondwelling Structures |
| | | | | 1475.1 Nondwelling Equipment | 1475.1 Nondwelling Equipment |
| | | | | | |
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| | | | | | |

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

| | | | | | |
|--------------------------------------|--|--------|--------|--------|--------|
| CFP Funds Listed for 5-year planning | | 42,764 | 42,764 | 42,764 | 42,764 |
| Replacement Housing Factor Funds | | | | | |

| Capital Fund Program Five-Year Action Plan | | | | | | |
|---|---|---|-----------------------|---|---|-----------------------|
| Part II: Supporting Pages—Work Activities | | | | | | |
| Activities for Year 1 | Activities for Year :__2009 FFY Grant: 2009 PHA FY: | | | Activities for Year: 2010 FFY Grant: 2010 PHA FY: | | |
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost |
| See | <i>Haymaker Haven</i> | <i>1406: Operations</i> | 1500 | <i>Haymaker Haven</i> | <i>1406: Operations</i> | 1500 |
| Annual | NE083 | <i>1408: Management Improvements (Staff Training, etc.)</i> | 2500 | | <i>1408: Management Improvements (Staff Training)</i> | 2500 |
| Statement | | 1460: Dwelling Structures (Replace Storm Doors) | 7,000 | | <i>1460: Dwelling Structures (Replace EntryDoors)</i> | 18,000 |
| | | | | | | |

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

| Activities for Year 2011 FFY Grant: PHA FY: | | | Activities for Year: 2012 FFY Grant: PHA FY: | | |
|---|--|-----------------------|--|--|-----------------------|
| Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost |
| <i>Haymaker Haven</i> | <i>1406: Operations (Help with cost of Property Insurance)</i> | 1,000 | <i>Haymaker Haven</i> | <i>1406: Operations (Help with cost of Property Insurance)</i> | 1,500 |
| NE083 | <i>1408: Management Improvement (Staff Training)</i> | 2,000 | NE083 | <i>1408: Management Improvement (Staff Training)</i> | 2,250 |

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

| | | | | | |
|--|---|--------|--|---|--------|
| | 1460: Dwelling Structures (Replacement of Entry Doors) | 7,014 | | 1465.1 Dwelling Equipment Nonexpendable (Carpet/Vinyl Replacement, Kitchen GFI Replacement, Stove/Refrigerator Replacemnt_ | 32,014 |
| | 1465.1 Dwelling Equipment-Nonexpendable (Carpet/vinyl replacement, bathroom sink replacement, Replace Bathroom GFI) | 10,750 | | 1475.1 Nondwelling Equipment: Computer upgrades | 7,000 |
| | 1470: Nondwelling Structure(Build new Laundry Building) | 17,000 | | | |
| | 1475.1 Non Dwelling Equipment (Computer Upgrades) | 5,000 | | | |
| | | | | | |
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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
ATTACHMENT E**

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
|--|---|----------------------|--|-------------------|--------------------------------------|
| PHA Name: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: NE26P0835015 Replacement Housing Factor Grant No: | | Federal FY of Grant: 2005-2006 |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 1000 | | 1827 | 1827 |
| 3 | 1408 Management Improvements | 2500 | | 2500 | 2500 |
| 4 | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 2589 | | 0 | 0 |
| 10 | 1460 Dwelling Structures | | | | |
| 11 | 1465.1 Dwelling Equipment— Nonexpendable | 4,000 | | 3109.39 | 2258.52 |
| 12 | 1470 Nondwelling Structures | 2400 | | 2637.57 | 2637.57 |
| 13 | 1475 Nondwelling Equipment | 20,788 | | 19,961 | 17,523.85 |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | 10,000 | | 10,000.00 | 10,000 |

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

| Annual Statement/Performance and Evaluation Report | | | | | |
|---|---|----------------------|--|-------------------|-----------------------------------|
| Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
| PHA Name: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: NE26P0835015 Replacement Housing Factor Grant No: | | Federal FY of Grant: 2005-2006 |
| <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 |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1499 Development Activities | | | | |
| 19 | 1501 Collaterization or Debt Service | | | | |
| 20 | 1502 Contingency | | | | |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 43,277 | | 40,034.54 | 36,746.94 |
| 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 | | | | |

| | | |
|--|--|-----------------------------------|
| Annual Statement/Performance and Evaluation Report | | |
| Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) | | |
| Part II: Supporting Pages | | |
| PHA Name: Cozad Housing Authority | Grant Type and Number Capital Fund Program Grant No: NE26P0835015 Replacement Housing Factor Grant No: | Federal FY of Grant: 2005-2006 |

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

| 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 | |
| NE083 | Operations | 1406 | | 1,000 | | 1827 | 1827 | Complete |
| HA WIDE | Management Improvements: Computer and Software Upgrades, Training | 1408 | | 2,500 | | 2500 | 2500 | Complete |
| | Site Improvement: Sidewalk Repair, Tree Removal/Replacement/Landscape, Gazebo | 1450 | | 2,589 | | | | In Progress |
| | Dwelling Equipment: Replace carpet/vinyl, e-bolt lock system | 1465.1 | | 4,000 | | 3109.39 | 2258.52 | In Progress |
| | NonDwelling Structures: Replacement of Carpet; Decorate for Public Appeal | 1470 | | 2,400 | | 2637.15 | 2637.15 | Complete |
| | NonDwelling Equipment: Replace/Trade in Pickup; Replace small snow blower; purchase blade | 1475 | | 20,788 | | 19,961 | 17523.85 | In Progress |

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: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: NE26P0835015 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2005-2006 | | |
| 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 | |
| | Replacement Reserve: Roof Replacement Reserve | 1490 | | 10,000 | | 10,000 | 10,000 | Complete |
| | | | | | | | | |
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| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule | | | | | |
|---|--|--|--|--|--|
| PHA Name: Cozad Housing Authority | | Grant Type and Number Capital Fund Program No: NE26P08350105 Replacement Housing Factor No: | | Federal FY of Grant: 2005-2006 | |

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

| 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 | |
| NE083001 | | | | | | | |
| Operations | 9/30/2006 | | | 9/30/2007 | | 03/2006 | |
| Management Improvements | 9/30/2006 | | | 9/30/2007 | | 03/2007 | |
| Site Improvements | 9/30/2006 | | | 9/30/2007 | | | |
| Dwelling Equipment | 9/30/2006 | | | 9/30/2007 | | | |
| NonDwelling Structures | 9/30/2006 | | | 9/30/2007 | | 3/2007 | |
| NonDwelling Equipment | 9/30/2006 | | | 9/30/2007 | | | |
| Replacement Reserve | 09/30/2006 | | | 9/30/2007 | | 01/2006 | |

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: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: NE26P0835016 Replacement Housing Factor Grant No: | | Federal FY of Grant: 2006-2007 |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <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 | 1000 | 1000 | 1000 | 1000 |
| 3 | 1408 Management Improvements | 2000 | 2000 | 1952.95 | 1952.95 |
| 4 | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 1000 | 1000 | 0 | 0 |
| 10 | 1460 Dwelling Structures | 4000 | 4000 | | |
| 11 | 1465.1 Dwelling Equipment— Nonexpendable | 19,000 | 20,199 | 0 | 0 |
| 12 | 1470 Nondwelling Structures | | | | |
| 13 | 1475 Nondwelling Equipment | 4579 | 4579 | 4516.49 | 4516.49 |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | 9,000 | 9000 | 9000 | 9000 |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1499 Development Activities | | | | |
| 19 | 1501 Collaterization or Debt Service | | | | |
| 20 | 1502 Contingency | | | | |
| 21 | Amount of Annual Grant: (sum of lines 2 | 40,579 | 41,778 | 16,469.44 | 16,469.44 |

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: Cozad Housing Authority | | Grant Type and Number Capital Fund Program Grant No: NE26P0835016 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2006-2007 |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <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 |
| | - 20) | | | | |
| 22 | Amount of line 21 Related to LBP Activities | | | | |
| 23 | Amount of line 21 Related to Section 504 compliance | | | | |
| 24 | Amount of line 21 Related to Security – Soft Costs | | | | |
| 25 | Amount of Line 21 Related to Security – Hard Costs | | | | |
| 26 | Amount of line 21 Related to Energy Conservation Measures | | | | |

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages | | | | | | |
|---|--|--|----------|----------------------|-----------------------------------|----------------|
| PHA Name: Cozad Housing Authority | | Grant Type and Number Capital Fund Program Grant No: NE26P0835016 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2006-2007 | |
| 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 |
| | | | | | | |

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

| | | | | Original | Revised | Funds Obligated | Funds Expended | |
|---------|---|------|--|----------|---------|-----------------|----------------|-------------|
| NE083 | Operations | 1406 | | 1,000 | | | | Complete |
| HA WIDE | Management Improvements: Computer and Software Upgrades, Training | 1408 | | 2000 | | | | In Progress |
| | Site Improvement: Sidewalk Repair, Tree Removal/Replacement/ Landscape, Gazebo | 1450 | | 1000 | | | | In Progress |
| | | | | | | | | |
| | Dwelling Equipment: Attic fans for cooling efficiency, additional security lighting, | 1460 | | 4,000 | | | | In Progress |
| | | | | | | | | |
| | NonDwelling Structures: Replacement of Carpet; Decorate for Public Appeal;new shower liners | 1465 | | 20,199 | | 0 | 0 | In Progress |
| | | | | | | | | |
| | NonDwelling Equipment: Computer server, small maintenance tools | 1475 | | 4579 | | 4516.49 | 4516.49 | Completed |
| | | | | | | | | |
| | Replacement Reserve: Roof Replacement Reserve | 1490 | | 9,000 | | 9000 | 9000 | Completed |
| | | | | | | | | |
| | | | | | | | | |

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: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: NE26P0835016 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2006-2007 | | |
| 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 | | |
| | | | | | | | | | |
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| Annual Statement/Performance and Evaluation Report | | | | | | | | |
|--|---|---|--------|---|---------|-----------------------------------|----------------------------------|--|
| Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) | | | | | | | | |
| Part III: Implementation Schedule | | | | | | | | |
| PHA Name: Cozad Housing Authority | | Grant Type and Number Capital Fund Program No: NE26P08350106 Replacement Housing Factor No: | | | | Federal FY of Grant: 2006-2007 | | |
| 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 | | |
| NE083001 | | | | | | | | |
| Operations | 9/30/2006 | | | 9/30/2007 | | 12/2006 | | |

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: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program No: NE26P08350106 Replacement Housing Factor No: | | | Federal FY of Grant: 2006-2007 | |
| 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 | |
| Management Improvements | 9/30/2006 | | | 9/30/2007 | | | |
| Site Improvements | 9/30/2006 | | | 9/30/2007 | | | |
| Dwelling Equipment | 9/30/2006 | | | 9/30/2007 | | | |
| NonDwelling Structures | 9/30/2006 | | | 9/30/2007 | | | |
| NonDwelling Equipment | 9/30/2006 | | | 9/30/2007 | | 9/2006 | |
| Replacement Reserve | 09/30/2006 | | | 9/30/2007 | | 01/2007 | |

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: Cozad Housing Authority | | Grant Type and Number Capital Fund Program Grant No: NE26P98350107 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2007 |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <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 | 1,000 | | 0 | 0 |
| 3 | 1408 Management Improvements | 3,079 | | 0 | 0 |
| 4 | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 2,000 | | 0 | 0 |
| 10 | 1460 Dwelling Structures | 7,685 | | 0 | 0 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 23,000 | | 0 | 0 |
| 12 | 1470 Nondwelling Structures | 3,500 | | 0 | 0 |
| 13 | 1475 Nondwelling Equipment | 2,500 | | 0 | 0 |
| 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) | 42,764 | | 0 | 0 |
| 22 | Amount of line 21 Related to LBP Activities | | | | |
| 23 | Amount of line 21 Related to Section 504 compliance | | | | |
| 24 | Amount of line 21 Related to Security – Soft Costs | | | | |
| 25 | Amount of Line 21 Related to Security – Hard Costs | | | | |
| 26 | Amount of line 21 Related to Energy Conservation | | | | |

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

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
|--|--------------------------------|----------------------|---|-------------------|------------------------------|
| PHA Name: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: NE26P98350107 Replacement Housing Factor Grant No: | | Federal FY of Grant: 2007 |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised | Obligated | Expended |
| | Measures | | | | |

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages | | | | | | | | |
|---|---|------------------|---|----------------------|---------|---------------------------|-------------------|-------------------|
| PHA Name: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: 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 |
| NE083 | | | | Original | Revised | Funds Obligated | Funds Expended | |
| HA WIDE | 1406 Operations: Assist with | | | | | | | |
| | Cost of property Insurance | | | 1,000 | | 1,000 | 0 | |
| | | | | | | | | |
| | 1408 Management Improvements: Staff training, Needs Assessment | | | 3,079 | | 3,079 | 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: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: 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 | |
| NE083 | | | | | | | | |
| | 1450 Site Improvement: Security Lighting, Landscaping | | | 2,000 | | 2,000 | 0 | |
| | 1460 Dwelling Structures: Attic Fans, Add insulation, replace storm doors | | | 7,685 | | 7,685 | 0 | |
| | 1465.1 Dwelling Structures: Replace Shower Liners, bathroom sinks, carpet and vinyl replacement | | | 23,000 | | 23,000 | 0 | |
| | 1470 Non Dwelling Structures: Replace Exterior Doors | | | 3,500 | | 3,500 | 0 | |

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

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages | | | | | | | | |
|---|---|---------------|--|----------------------|---------|---------------------------|----------------|----------------|
| PHA Name: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: 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 | |
| NE083 | | | | Original | Revised | Funds Obligated | Funds Expended | |
| | 1475 Non Dwelling Equipment: Computer Upgrades, Small hand tool replacement | | | 2,500 | | 2,500 | 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: Cozad Housing Authority | | Grant Type and Number Capital Fund Program No: Replacement Housing Factor No: | | | | Federal FY of Grant: 2007-08 | |
| 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 | |
| NE083 | | | | | | | |
| HA WIDE | | | | | | | |

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: Cozad Housing Authority | | | Grant Type and Number Capital Fund Program No: Replacement Housing Factor No: | | | Federal FY of Grant: 2007-08 | |
| 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 | |
| NE083 | | | | | | | |
| 1406: Operations | 9/30/2008 | | | 9/30/2009 | | | |
| 1408: Management Improvements | 9/30/2008 | | | 9/30/2009 | | | |
| 1450: Site Improvements | 9/30/2008 | | | 9/30/2009 | | | |
| 1460: Dwelling Structures | 9/30/2008 | | | 9/30/2009 | | | |
| 1465.1:Dwelling Equipment-NonExpendable | 9/30/2008 | | | 9/30/2009 | | | |
| 1470: Nondwelling Structures | 9/30/2008 | | | 9/30/2008 | | | |
| 1475: Nondwelling Equipment | 9/30/2008 | | | 9/30/2008 | | | |
| | | | | | | | |
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7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

ATTACHMENT H

OPERATING BUDGET

(HARD COPY MAILED TO FIELD OFFICE)

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

ATTACHMENT I

ANNUAL STATEMENT/PERFORMANCE and EVALUATION REPORT on REPLACEMENT RESERVE

Part 1: Summary

HA NAME: Cozad Housing Authority

[X] Performance and Evaluation for Program Year Ending 2008

Section 1: Replacement Reserve Status Must be Completed each Year there is a balance in Replacement Reserve.

| | <u>Estimated</u> | <u>Actual</u> |
|---|------------------|---------------|
| <u>1. Replacement Reserve Interest Earned</u> (account 6200/1420.7: equals line 17 of section 2 below) | 750 | 2,321.37 |
| <u>2. Replace Reserve Withdrawal (equals line 16 of section 2 below)</u> | 0 | 0 |
| <u>3. Net impact on Replacement Reserve (line 1 minus line 2; equals line 18 of section 2 below)</u> | 750 | 2,321.37 |
| <u>4. Current FFY Funding for Replacement Reserve (line 15 of form HUD 52837)</u> | 10,000.00 | 9,000.00 |
| <u>5. Replacement Reserve Balance at End of Previous Program Year (account 2830)</u> | 65,489.65 | 65,489.65 |
| <u>6. Replacement Reserve Balance at End of Current Program Year (line 4 + line 5 + [or -] Line 3 (account 2830))</u> | 76,239.65 | 76,811.02 |

Section 2: Replacement Reserve Withdrawal Report (Complete this section if there is withdrawal/expenditure activity.

There is/was no activity to Report for this Section – Therefore Information is not included in this Agency Plan

| | |
|---------------------------------|------------------------|
| Patricia L. Hosick, SPHM | Date: 12/3/2007 |
| Executive Director | |

8. Capital Fund Program Five-Year Action Plan

ATTACHMENT J

The Cozad Housing Authority certifies that amendments have been made and approved by the
Board of Commissioners to both the
ACOP (Admissions and Continued Occupancy Policy for Public Housing and
The Section 8 Administrative Policy regarding the UIV (Upfront Income
Verification Process)

Patricia L. Hosick, Executive Director

12-3-2007

8. Capital Fund Program Five-Year Action Plan

ATTACHMENT K

HOUSING AUTHORITY OF THE CITY OF COZAD RULES FOR PETS

The following rules are established to govern the keeping of pets in and on properties owned and operated by the Housing Authority of the City of Cozad.

All pets must be registered with the Housing Authority. Tenants must receive a written permit to keep any animal on or about the premises. This privilege may be revoked at any time subject to the Housing Authority grievance procedure if the animal becomes destructive, a nuisance or safety hazard to other tenants, or if the tenant/owner fails to comply with the following:

1. A maximum number of two pets are allowed. Only one may be a dog, a cat, bird, or a fish aquarium. Dog and cat weight must be less than 35-45 pounds (adult size). *Exception can be made at the discretion of the Executive Director.
 - a. One bird cage allowed per unit, and/or
 - b. One fish aquarium (limited to a 10 gallon aquarium)
Per unit.
2. Permitted pets are domesticated dogs and cats, birds, and fish aquariums.
3. Dogs and cats must be licensed each year with the City of Cozad (City Clerk Office). Tenants must also show proof of distemper and rabies booster shots each year and a copy or license brought to Housing Authority office. Cats must be vaccinated yearly for distemper.
4. All cats and dogs must be spayed or neutered. If such animals are not spayed and have offspring, tenant is in violation of this rule, and is subject to removal of the pet.
5. No pet may be kept in violation of state humane or health laws, or local city ordinance.
6. Dogs and cats shall remain inside a tenants unit unless they are on a leash and directly controlled by an adult. Birds must be confined to a cage at all times.

8. Capital Fund Program Five-Year Action Plan

7. Residents are to provide litter boxes for cat waste which are to be kept in the unit. Tenant is not allowed to let waste accumulate. Residents are responsible for properly disposing of the cat waste.
8. Tenants are responsible for promptly cleaning up pet droppings, if any, outside of the unit on Housing Authority property, and properly disposing of said droppings.
9. Residents should use the walking area provided which is North of the Cozad Grand Generation Center on the empty lot for their pets. Any repair to Housing Authority lawns/grass due to failure to comply, may be at the residents expense. After documented non-compliance, tenants will be billed for costs of replacement or repair.
10. Tenant shall take adequate precautions to eliminate any pet odors in or around unit and maintain unit in a sanitary condition at all times.
11. Tenant shall not permit any disturbance by their pet which would interfere with the peaceful enjoyment of other tenants; whether by loud barking, howling, biting, scratching, chirping, or other such activities. No vicious or intimidating dogs will be allowed.
12. If pets are left unattended for twenty-four (24) hours or more, the Housing Authority may enter the unit, remove the pet and transfer pet to the proper authorities, subject to local city ordinances. The Housing Authority accepts NO RESPONSIBILITY for the pet under such circumstances.
13. Tenants shall not alter their unit, patio or unit area to create an enclosure for an animal.
14. Tenant is responsible for all damages including cost of fumigation caused by their pets.
15. Tenants are required to pay Damage Deposit for Pets in the amount of \$200.00 for a dog or cat; for fish or bird - no deposit required. This deposit is refundable if no damage is done, as verified by the Housing Authority, after tenant moves out of the apartment.
 - A. Damage Deposit not required for tenant assist or Service Animals.
16. Tenants who violate these rules are subject to:
 - A. being required to remove the pet within 14 days of notice by the Housing Authority, and/or,

8. Capital Fund Program Five-Year Action Plan

B. eviction.

17. Tenants must identify alternate custodian for pet in the event of tenant illness or other absence from unit.

Non-Household Animals or Community Pets:

The regular distribution of bread crumbs, corn or other food, etc. to otherwise non-household animals or pets (Pets not registered with the Management Office) or any wild or stray animal such as squirrels, rabbits, stray cats or dogs, etc. is **Prohibited**.

Residents who violate this practice will be given two verbal (or written) warnings/reminders, which will also be documented in their individual tenant files by Management.

The **Third and any future** Warning/Reminder/Reprimand will be in writing with a Notice of Lease Violation and Fine of **\$10.00 each** to be paid at the next month's rent cycle at the Management Office.

Amended
10/2003

8. Capital Fund Program Five-Year Action Plan

PET OWNERSHIP

Tenant Certification

NO_____ I do not have a pet, but have read and understand the above pet policy, in the event that I do obtain a pet.

YES_____ I do have a pet, and have read and understand the above regulations regarding pets and agree to conform to them.

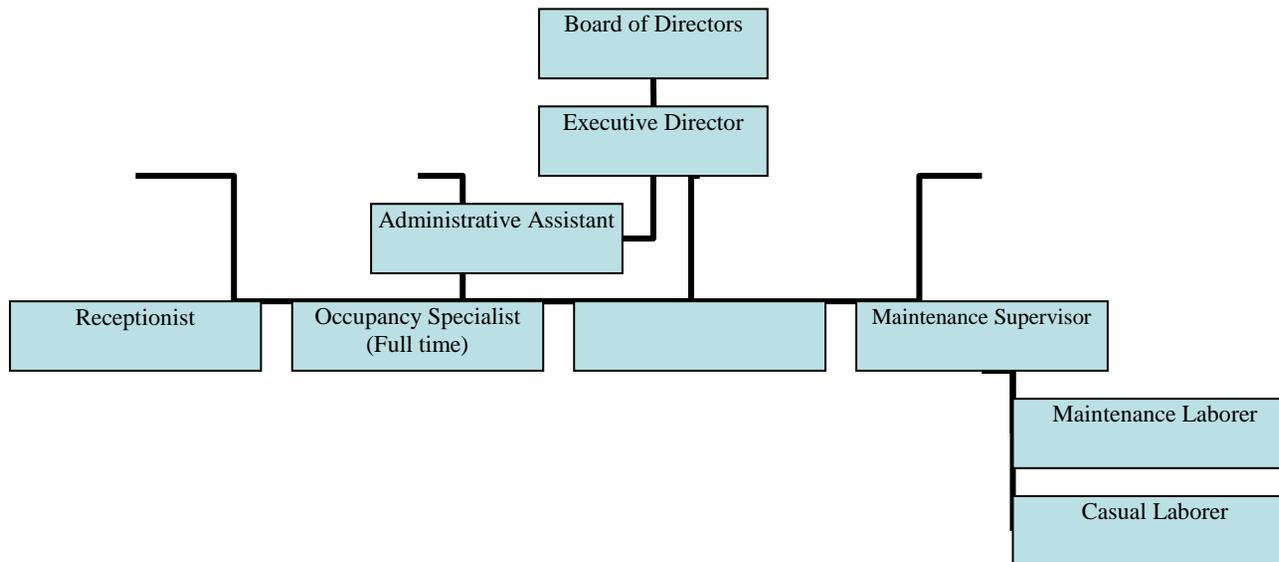
Tenant Signature_____ Date_____

Project_____ Apartment Number_____

Executive Director_____ Date_____

8. Capital Fund Program Five-Year Action Plan

ATTACHMENT L ORGANIZATION CHART



8. Capital Fund Program Five-Year Action Plan

ATTACHMENT M

VAWA – Violence Against Women Act Certification

A goal of the Cozad Housing Authority is to comply with the Violence Against Women Act (VAWA). It is our objective to work with others to prevent offenses covered under the VAWA in as much as may be possible.

Because the Cozad Housing Authority is a very small agency with limited staff and limited staff time, our agency will offer the following activities, services or programs in partnership with the Department of Health and Human Resources, local and county law enforcement, adult and child advocacy groups and any other agency providing services or specializing in assistance of these persons by making referral, providing telephone assistance and travel arrangements, if needed.

The Cozad Housing Authority as much as may be possible provides the following activities or services to child and adult victims of domestic violence by issuing a housing voucher or offering another type of subsidized housing for the appropriate family size and in accordance with other program guidelines

The Cozad Housing Authority has initiated providing the HUD form 50066 at initial lease up and a certification form maintained in the individual tenant file to assure applicants and residents are aware of their rights under the Violence Against Women Act.

Patricia L. Hosick, Executive Director

12-04-2007