

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

PHA Plans

Annual Plan for Fiscal Year 2008

North Charleston Housing Authority
George L. Saldaña, Executive Director

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: North Charleston Housing Authority

PHA Number: SC057

PHA Fiscal Year Beginning: (07/2008)

PHA Programs Administered:

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

Public Access to Information

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

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the 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)

Annual PHA Plan
PHA Fiscal Year 2008
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 ®]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

- a. Continue implementing the HOPE VI Revitalization Plan in accordance with the HOPE VI Grant Agreement funded in 2001 for the North Park Village Development and the revised Revitalization Plan.
- b. Continue to implement the 5(h) homeownership plan at the Three Oaks Development.
- c. Continue to implement a Section 8 Homeownership Plan to expand homeownership opportunities for all assisted families and to complement the HOPE VI Revitalization for the North Park Village.
- d. Develop additional affordable housing through the use of the tax credit program and other viable financing mechanisms to increase the supply of affordable housing in the City of North Charleston and diversify the NCHA Housing Portfolio.
- e. Redirect resources and build staff capacity to serve as private management agent for non-public housing portfolio.
- f. Alston Lake, a 72 unit tax credit housing development was opened in January 2007.
- g. Barony Place, a 252 unit tax credit housing development was opened in fall 2007.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 ®]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- Admissions Policy for Deconcentration - Attachment G
- FY 2008 Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report (sc057e05) - Attachment E
- FY 2008 Capital Fund Program Annual Statement/Performance and Evaluation Report (sc057f05) – Attachment L
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- List of Resident Advisory Board Members
- List of Resident Board Member
- Community Service Description of Implementation – Attachment I
- Information on Pet Policy – Attachment H
- Section 8 Homeownership Capacity Statement, if applicable
- Description of Homeownership Programs, if applicable

Optional Attachments:

- PHA Management Organizational Chart
- FY 2008 Capital Fund Program 5 Year Action Plan – Attachment F (sc057f05)
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Attachment A – Resident Comments on Agency Plan/Public Meeting

Attachment B – FY2004 Capital Fund Annual Statement/Performance & Evaluation Report (sc057b05)

Attachment C – FY2005 Capital Fund Annual Statement/Performance & Evaluation Report (sc057c05)

Attachment D – FY2006 Capital Fund Annual Statement/Performance & Evaluation Report (sc057d05)

Attachment J – FY2007 Capital Fund Annual Statement/Performance & Evaluation Report- RHF (sc057j05)

Attachment K – FY2007 Capital Fund Annual Statement/Performance & Evaluation Report (sc057k05)

Supporting Documents Available for Review

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	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the	Annual Plan: Rent

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
X	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	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	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other	Annual Plan: Community

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	resident services grant) grant program reports	Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	1040	5	5	5	3	3	5
Income >30% but <=50% of AMI	280	5	5	5	3	3	4
Income >50% but <80% of AMI	355	4	4	4	3	3	3
Elderly	60	4	4	4	3	3	3
Families with Disabilities	135	4	4	4	4	3	4
Race/Ethnicity (White)	3400	3	2	2	2	2	2
Race/Ethnicity (Black)	1250	5	5	5	4	4	4
Race/Ethnicity (Other)	80	5	4	5	4	4	4
Race/Ethnicity	NA						

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s
Indicate year: 2002 - 2007
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/sub jurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	2818		
Extremely low income <=30% AMI	Not Available		
Very low income (>30% but <=50% AMI)	Not Available		
Low income (>50% but <80% AMI)	Not Available		
Families with children	2055		
Elderly families	58		
Families with Disabilities	192		
Race/ethnicity - Black	2670		
Race/ethnicity - White	118		
Race/ethnicity – Am Indian/Hispanic	1		
Race/ethnicity – Asian/Hispanic	1		
Race/ethnicity – Asian	2		
Race/ethnicity – Hispanic	21		
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 2			
Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input checked="" type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/sub jurisdiction: Buskirk – Elderly (SC057001)			
	# of families	% of total families	Annual Turnover
Waiting list total	3		
Extremely low income <=30% AMI	Not available		
Very low income (>30% but <=50% AMI)	Not available		
Low income (>50% but <80% AMI)	Not available		
Families with children	0		
Elderly families	3	100%	
Families with Disabilities	Not available		
Race/ethnicity - Black	3	100%	
Race/ethnicity - White			
Race/ethnicity – Am Indian			
Race/ethnicity – Asian			
Race/ethnicity – Pacific			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	3		
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 16			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
<input type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input checked="" type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction: Liberty Hill (SC057002)			
	# of families	% of total families	Annual Turnover
Waiting list total	205		
Extremely low income	Not Available		

Housing Needs of Families on the PHA's Waiting Lists			
<=30% AMI			
Very low income (>30% but <=50% AMI)	Not Available		
Low income (>50% but <80% AMI)	Not Available		
Families with children	157	76.58%	
Elderly families	3	1.46%	
Families with Disabilities	8	3.90%	
Race/ethnicity - White	9	4.3%	
Race/ethnicity - Black	191	93.17%	
Race/ethnicity - Asian	1	.48%	
Race/ethnicity - White/Hispanic	1	.48%	
Race/ethnicity - Black/Hispanic	3	1.46%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	46		
2 BR	82		
3 BR	71		
4 BR	6		
5 BR	0		
5+ BR	0		
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 41			
Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input checked="" type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/sub jurisdiction: Phoenix/Birchwood (SC057005/SC057007)			
	# of families	% of total families	Annual Turnover
Waiting list total	652		
Extremely low income <=30% AMI	Not available		
Very low income (>30% but <=50% AMI)	Not available		
Low income (>50% but <80% AMI)	Not available		
Families with children	Not available		
Elderly families	0		
Families with Disabilities	Not available		

Housing Needs of Families on the PHA's Waiting Lists			
Race/ethnicity - Black	636	98%	
Race/ethnicity - White	16	2%	
Race/ethnicity – Am Indian	0	0	
Race/ethnicity – Asian	0	0	
Race/ethnicity – Pacific	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	49		
2 BR	400		
3 BR	195		
4 BR	8		
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 16			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input checked="" type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/sub jurisdiction: Alston Lake (SC057008)/Horizon Village (SC057009)			
	# of families	% of total families	Annual Turnover
Waiting list total	328		
Extremely low income <=30% AMI	Not available		
Very low income (>30% but <=50% AMI)	Not available		
Low income (>50% but <80% AMI)	Not available		
Families with children	189	57.62%	
Elderly families	1	.30%	
Families with Disabilities	Not available		
Race/ethnicity - White	19	.05%	
Race/ethnicity - Black	308	93.90%	
Race/ethnicity – Am Indian	1	.30%	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			

Housing Needs of Families on the PHA's Waiting Lists			
1BR	Not available		
2 BR	Not available		
3 BR	Not available		
4 BR	Not available		
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 18			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)
Seek purchase of existing apartment complexes and restrict the rent to low income families.

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

Development of Section 202 Housing in Partnership with Mercy Housing.

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing

- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2008 grants)		
a) Public Housing Operating Fund	395,385	
b) b) Public Housing Capital Fund	804,451	
c) HOPE VI Revitalization	11,931,370	
d) HOPE VI Demolition	0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	10,746,391	
f) Resident Opportunity and Self-Sufficiency Grants	212,974	
g) Community Development Block Grant		
h) HOME		
Other Federal Grants (list below)		
Youth Build	31,423	PHA Supportive Services
2. Prior Year Federal Grants (unobligated funds only) (list below)		
CFP2006 Formula Fund/Replacement Housing	827,605	PHA Capital Improvements/Operations
3. Public Housing Dwelling Rental Income	216,269	PHA Operations
4. Other income (list below)		
Investment Income	257,953	PHA Operations
Oakleaf Net Sale Proceeds	616,467	PHA Capital Improvements
PHA Maintenance Fee/Developer Fees	199,245	PHA Operations/Capital Impr

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
5. Non-federal sources (list below)		
City of North Charleston Grant	948,260	PHA Capital Improvement
State HOME Grant	21,000	PHA Operations
Total resources	27,208,793	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. PublicHousing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)

When family is selected from waiting list.

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)

c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

b. Where may interested persons apply for admission to public housing?

- PHA main administrative office
- PHA development site management office
- Other (list below)

c. 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 subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year? 6

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? 6

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)

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- One
- Two
- Three or More

b. Yes No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

a. Income targeting:

Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- Emergencies
- Overhoused
- Underhoused
- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)

c. Preferences

1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans’ families
- Residents who live and/or work in the jurisdiction

- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

X Date and Time

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- 2 Working families and those unable to work because of age or disability
- 5 Veterans and veterans’ families
- 3 Residents who live and/or work in the jurisdiction
- 4 Those enrolled currently in educational, training, or upward mobility programs
- 6 Households that contribute to meeting income goals (broad range of incomes)
- 6 Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- The PHA-resident lease
- The PHA's Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

(6) Deconcentration and Income Mixing

a. Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. Yes No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- Adoption of site based waiting lists
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- Other (list policies and developments targeted below)

d. Yes No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- Criminal or drug-related activity only to the extent required by law or regulation
- Criminal and drug-related activity, more extensively than required by law or regulation
- More general screening than criminal and drug-related activity (list factors below)
- Other (list below)

b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

- c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
- Other (describe below)

(2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)

- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- PHA main administrative office
- Other (list below)
- Sites within the jurisdiction of the North Charleston Housing Authority when the waiting list is opened.*

(3) Search Time

- a. Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

Extensions will be granted only if the family provides a written documented record to NCHA indicating property owners contacted, units visited and the reasons why these units were unacceptable.

NCHA will extend the voucher term because of reasonable accommodation to make the program accessible to and usable by a family member with a disability.

(4) Admissions Preferences

a. Income targeting

- Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
 Victims of domestic violence
 Substandard housing
 Homelessness
 High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
 Veterans and veterans' families
 Residents who live and/or work in your jurisdiction
 Those enrolled currently in educational, training, or upward mobility programs
 Households that contribute to meeting income goals (broad range of incomes)
 Households that contribute to meeting income requirements (targeting)
 Those previously enrolled in educational, training, or upward mobility programs
 Victims of reprisals or hate crimes
 Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

X Date and Time

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- 2 Working families and those unable to work because of age or disability
- 5 Veterans and veterans' families
- 3 Residents who live and/or work in your jurisdiction
- 4 Those enrolled currently in educational, training, or upward mobility programs
- 6 Households that contribute to meeting income goals (broad range of incomes)
- 6 Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- Date and time of application
- Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- This preference has previously been reviewed and approved by HUD
- The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

- a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- The Section 8 Administrative Plan
- Briefing sessions and written materials
- Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- Through published notices
- Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- \$0
- \$1-\$25
- \$26-\$50

2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

c. Rents set at less than 30% than adjusted income

1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent-setting policy)

If yes, state percentage/s and circumstances below:

For household heads

For other family members

For transportation expenses

For the non-reimbursed medical expenses of non-disabled or non-elderly families

Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

Yes for all developments

Yes but only for some developments

No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

For all developments

For all general occupancy developments (not elderly or disabled or elderly only)

For specified general occupancy developments

- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95th percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____
- Other (list below)

g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- At or above 90% but below 100% of FMR
- 100% of FMR
- Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below)
Budget constraints

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- Annually
- Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families
- Rent burdens of assisted families
- Other (list below)
Budget constraints/economics

(2) Minimum Rent

a. What amount best reflects the PHA’s minimum rent? (select one)

- \$0
- \$1-\$25
- \$26-\$50

b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA’s management structure and organization.

(select one)

- An organization chart showing the PHA’s management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:

Top Level : Board of Commissioners

Next Level: Executive Director

Directly Under the Executive Director are the following departments:

Special Programs:

- Hope VI – Hope VI Coordinator (1) - Administrative Specialist (1)
 CSSP Supervisor (1)
 Case Management Success Coach (1)

Homeownership – Homeownership Specialist (1)

Family Self Sufficiency – Family Self Sufficiency Coordinator (1)

Facilities Management:

- Contracts/Construction Manager (1) - Public Housing Maintenance (3)
 Work Order Clerk (1)

Director of Assisted Housing/PH (1):

Public Housing – Housing Manager (1)

- (1) Public Housing Maintenance and Management: (list below)

Public Housing Maintenance Plan
Public Housing Admissions and Continued Occupancy Policy

- (2) Section 8 Management: (list below)

Section 8 Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- PHA main administrative office
 PHA development management offices
 Other (list below)

B. Section 8 Tenant-Based Assistance

1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- PHA main administrative office
 Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment E (sc057e04)

-or-

The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as Attachment F- (sc057f04)

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

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

Applicability of sub-component 7B: 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.

- Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name: Horizon Village
2. Development (project) number: SC057009
3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
 Revitalization Plan submitted, pending approval
 Revitalization Plan approved
 Activities pursuant to an approved Revitalization Plan underway

- Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:

- Yes No: d) 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:
Plan to apply for a Tax Credit development using RHF.

- Yes No: e) 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:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of

1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

Yes No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

Demolition/Disposition Activity Description
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming

fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

Designation of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected: 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. Yes No: Have any of the PHA’s developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If “No”, skip to component 11; if “yes”, complete one

activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 11. If “No”, complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)	
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	
<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway	
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	
<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)	

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: Oakleaf Estates
1b. Development (project) number: SC057001
2. Federal Program authority: <input type="checkbox"/> HOPE I <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)

<input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY) 31/05/2002
5. Number of units affected: 68 6. Coverage of action: (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

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 component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

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, which statement best describes the number of participants? (select one)

- 25 or fewer participants
 26 - 50 participants
 51 to 100 participants
 more than 100 participants

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 below:

12. PHA Community Service and Self-sufficiency Programs

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- Yes No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)
- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
- Joint administration of other demonstration program
- Other (describe)

Welfare Agency and the NCHA work together even though we do not have a "Memorandum of Understanding".

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing homeownership option participation

- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

- Yes No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Family Self Sufficiency	31 slots	Upon Interest	PHA Main Office	Section 8
Ross Neighborhood Network	106	Upon Interest	Hope VI office	PH
Homeownership	35	Waiting List	PHA Main Office	PH and S8

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2008 Estimate)	Actual Number of Participants (As of: 11/01/07)
Public Housing	0	3
Section 8	31	39

- b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address

the steps the PHA plans to take to achieve at least the minimum program size?

If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937
--

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

3. Which developments are most affected? (list below)

Lower-level crime is minimal and observed at all of our communities.

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime and/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

Co-operation with the North Charleston Police Department

2. Which developments are most affected? (list below)

All of our communities.

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- Police provide crime data to housing authority staff for analysis and action

- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

Onsite Prevention programs through partnership with Charleston County.

2. Which developments are most affected? (list below)

All of our communities follow the above.

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2005 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2005 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

- 1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
- 2. Yes No: Was the most recent fiscal audit submitted to HUD?
- 3. Yes No: Were there any findings as the result of that audit?
- 4. Yes No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? _____

5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
- Not applicable
 - Private management
 - Development-based accounting
 - Comprehensive stock assessment
 - Other: (list below)
3. Yes No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- Attachment A – Resident Comments on Agency Plan/Public Meeting
 - Provided below:
3. In what manner did the PHA address those comments? (select all that apply)
- Considered comments, but determined that no changes to the PHA Plan were necessary.

The PHA changed portions of the PHA Plan in response to comments
List changes below:

Other: (list below)

B. Description of Election process for Residents on the PHA Board

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

- Candidates were nominated by resident and assisted family organizations
- Candidates could be nominated by any adult recipient of PHA assistance
- Self-nomination: Candidates registered with the PHA and requested a place on ballot
- Other: (describe)

b. Eligible candidates: (select one)

- Any recipient of PHA assistance
- Any head of household receiving PHA assistance
- Any adult recipient of PHA assistance
- Any adult member of a resident or assisted family organization
- Other (list)

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: Charleston County

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 in the jurisdiction 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)

None Noted

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Attachment A

Residents Comments on Agency Plan/Public Meeting

Resident Meetings where held for all complexes on the following dates:

Monday, March 24, 2008 at 6:00pm at the North Charleston Housing Authority Main Office.

Tuesday, March 25, 2008 at 2:00pm at the Community Center in Buskirk.

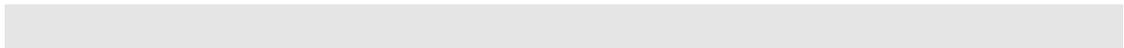
Tuesday, March 25, 2008 at 6:00pm at the Horizon Hall Community Room at Horizon Village.

Buskirk is the only PH Community that we received suggestions from regarding our Capital funds.

The residents suggested the following:

- 1) Doorbells - Fix the doorbells so they work. People knock on the door and the handicap resident said he finally gets to the door and no one is there because the knock was on his neighbor's door.
- 2) Holly Bushes - Take down Holly Bushes near the front bench. When you sit on the bench the bushes have grown up into it and they stick you. You can't sit on the bench because of it. When they dry they also stick into your feet.
- 3) Landscaping - If we purchase .99 flowers and give them to the residents they will plant them and care for them in a flowerbed.
- 4) Termites - Do something about the Termites. They swarm the apartments ever year.

On April 7, 2008 a public meeting was held to discuss the PHA's Annual Plan, there was no public input.



Attachment G

Admissions Policy for Deconcentration

From Section 1 of the NCHA Public Housing Admissions and Continued Occupancy 2007

Deconcentration of Poverty

It is the policy of the North Charleston Housing Authority to provide for deconcentration of poverty and income mixing by bringing higher income tenants into lower income developments and lower income tenants into higher income developments.

Established Income Range

NCHA shall conduct an annual analysis of the incomes of the families residing in “covered developments,” as defined below, to determine the established income range (EIR). The EIR will determine which developments require income mixing for the twelve-month period following the analysis. The income analysis shall be conducted as follows:

Step 1 - NCHA shall determine the average household income for all covered developments by taking the aggregate total of all household income and dividing by the total occupied households.

Step 2 - NCHA shall then determine the average income of each covered development by taking the total of all household income in that development and dividing by the total occupied units in that development.

Step 3 – The established income range (EIR) shall be calculated as 85% to 115% of the aggregate average household income for all covered developments.

Step 4 – The average household income for each covered development shall then be compared to the EIR to determine if the development is low income or high income.

A low-income development shall be defined as those developments whose average household income is below the lowest point of the EIR (85%). A high-income development shall be defined as those developments whose average household income is above the highest point of the EIR (115%).

The income profile of each development outside the EIR range shall be explained and justified in NCHA’s Annual Agency Plan. Those developments where the

income profile cannot be justified shall be targeted for deconcentration and income mixing using the following strategies:

1. Revitalization Strategies - Certain public housing developments will be redeveloped as “mixed income” properties as defined further under Section 5, C (4) (d). These new “mixed income” properties will utilize a “floating unit” concept that will designate income eligible households based on an approved unit mix. Under this new approach, a maximum number of households at varying income levels are designated for the development. However, specific units are not identified by housing type or income level. A detailed mixed-finance proposal will be developed for each applicable NCHA property. Upon approval by the Department of Housing and Urban Development of each mixed-finance proposal, the corresponding unit types and household income mix will be identified and incorporated under this Deconcentration Policy.
2. Improvement Strategies – Additional investment and improvements will be targeted to those developments with average income below the established income range.
3. Tier II Preferences – To further deconcentration efforts, Tier II preferences as described under Section 4(B) have been implemented. The intent of the Tier II preferences is to attract higher income households to the developments, thus reducing the level of concentration of very low-income households.

Exempt and Covered Developments

Public Housing developments shall be exempt from the deconcentration and income-mixing provisions outlined above based on the following:

- The development has fewer than 100 public housing units.
- The development has been designated and approved by HUD as a development that houses only elderly persons, or persons with disabilities, or both.
- All units in the development have been approved for demolition or conversion to tenant-based assistance.
- The development includes public housing units operated in accordance with a HUD approved mixed-finance plan using HOPE VI or public housing funds awarded before January 22, 2001.

“Covered Developments” are all developments that do not meet any of the deconcentration exemption criteria, as provided by HUD, and as listed above.

Attachment H Pet Policy

From Section 14 of the NCHA Public Housing Admissions and Continued Occupancy 2007

SECTION 14

PET POLICY

General

In accordance with the Code of Federal Regulation (24 CFR 960.701), the North Charleston Housing Authority will allow pet ownership in Public Housing.

Introduction

The purpose of this policy is to permit residents within the NCHA to own pets, subject to reasonable requirements. This Policy implements pet ownership policies and general requirements for residents of NCHA. This Policy does not apply to elderly or persons with disabilities. Section 227 of the Housing and Urban-Rural Recovery Act of 1983 (12 U.S.C. 1701r-1) (the 1983 Act) covers pet ownership requirements for this type of housing.

Definitions

1. Common household pet means a smaller domesticated animal, such as a dog, cat, bird, fish or turtle that is traditionally kept in the home for pleasure rather than for commercial purposes.
2. Reptiles (except turtles) are not common household pets.
3. A common household pet will, for purpose of these rules, be referred to as a “pet”.
4. “Elderly or Handicapped Family” means an elderly or handicapped person or family for purposes of the program under which a project for the elderly or handicapped is assisted or has its mortgage insured by the Department of Housing and Urban Development (A Project for the “Elderly or the Handicapped” is more specifically defined in 24 CFR Parts 243 and 942).
5. When used in these rules, the terms “Owner” and “Head of Household” shall refer to the appropriate person within an elderly or handicapped family in such a dwelling unit managed or administered by the North Charleston Housing Authority.

General Leases

Tenants of projects for the elderly or handicapped are permitted to keep common household pets in their dwelling units, subject to these rules and the Federal Regulations referred to above. These rules are incorporated by reference into the leases for all such tenants. All such tenants agree to comply with these rules, and violation of these rules may be grounds for removal of the pet or termination of the pet owner's tenancy (or both) in accordance with the provisions of the Federal Regulations and state or local law.

Registration

All pets shall be registered with the Authority before being brought to reside on the project premises and the registration must be updated at least annually. The registration must include:

1. A certificate signed by a licensed Veterinarian or a state or local authority empowered to inoculate animals (or the designated agent of such authority), stating that the pet has received all inoculations required by applicable state and local law.
2. Information sufficient to identify and to demonstrate that it is a common household pet.
3. Verification that the pet has been spayed or neutered if applicable.
4. Written proof of a satisfactory annual medical check-up by a licensed Veterinarian, which shall include verification that the pet is free from flea infestation.
5. The name, address, and telephone number of a responsible party who will remove or care for the pet if the pet owner dies, is incapacitated or is otherwise unable to care for the pet. The third party must sign in advance a document (supplied by the Authority) assuming responsibility for the animal in such circumstance.
6. Presentation of the pet at the registration interview for viewing and inspecting by Authority personnel. At this time a photo of the pet will be taken for identification purposes.
7. Notification must be given to management whenever a pet dies or is removed from the household.

Owner Statement

The pet owner will, at the first registration of the pet and at least annually thereafter, sign a statement indicating that the owner has read the pet rules and agrees to comply with them.

Liability Insurance

The tenant shall acquire and keep in effect during the ownership of a cat or dog a liability policy in the amount of not less than \$10,000.00 for the protection of the North Charleston Housing Authority for costs associated with the presence of the pet in the rental housing project.

Pet Security Deposit

Pet owners will pay a pet security deposit in the amount of \$100 to compensate the Authority for costs associated with the presence of the pet in the rental housing project.

Fees and Deposits not Rent

Fees and Deposits provided for in these rules are not a part of the rent payable to the Authority.

Refusal by Authority

The authority is authorized to refuse to register a pet if the pet is not a common household pet; if keeping the pet will violate any applicable house pet rules; if the presence of the pet will constitute a serious threat to the health of another resident of the project (as defined in Section 243.26 © of the Federal Regulations); or if the pet owner fails to provide complete pet registration information or fails to annually up-date the pet registration.

Notice of Refusal

The authority will notify the pet owner if the Authority refuses to register the pet. The notice will state the basis of the refusal and will be served by mail and by delivery in accordance with the requirements of Section 243.22 (f) of the Federal Regulations.

Licensing

Pet owners will license their pets in accordance with state and local laws.

Inoculations

Pet owners shall have their pets inoculated in accordance with state and local laws.

Spaying/Neutering

Female dogs or cats over six months of age must be spayed and male dogs or cats eight months of age shall be neutered.

Number

No more than one four-legged warm-blooded pet will be allowed in each dwelling unit.

Size

Dogs weighing more than 20 pounds shall not be permitted. The tenant however, may make application to the Executive Director for an exception to this rule if the tenant resides in a single family, detached dwelling. In that event, the Executive Director shall make a reasonable determination on the size limit in accordance with the specific animal concerned and the nature of the dwelling unit.

Leash

When not in the dwelling unit, a dog or cat shall be on a leash measuring not more than four (4) feet, and shall be handled by a responsible person who is able to control it.

Litter

The tenant owning a cat shall provide a litter tray for the animal's use in the dwelling unit. Litter must be wrapped in a securely tied plastic bag and disposed of at least twice each week using established procedures. Disposal of litter with a regular garbage or trash disposal will not be permitted.

Waste

Dogs and cats shall not be exercised or be permitted to deposit waste anywhere in the dwelling unit or on the grounds of the project, except in an area specifically designated on the grounds for use by dogs. Tenants shall be responsible for immediately removing dog waste dropped anywhere, including the designated area, placing the same in a plastic bag or other suitable container and placing that in a designated receptacle.

Waste Removal Charge

The tenant will be responsible for a waste removal charge of \$10.00 per incident if the NCHA is required to dispose of waste from the tenant's pet.

Noise and Odor

No unreasonable noise or odor will be allowed in the project or dwelling unit by reason of the presence of a pet. It is the sole obligation of the tenant-owner to control both noise and odor from his pet to avoid nuisance to other tenants or damage to property.

Nuisance or Threat to Health or Safety

Nothing in these rules prohibits the Authority or an appropriate community authority from requesting the removal of any pet from a project, if the pet's conduct or condition is duly determined to constitute, under the provisions of state or local law, a nuisance or threat to the health or safety of the occupants of the project or of other persons in the community where the project is located.

Unattended Pets

No pet shall be left unattended in a dwelling unit for more than 24 hours, and any cat or dog for more than 18 hours. If the tenant is unable to personally attend his pet, the designated person listed on the registration shall do so. This will help assure adequate food, exercise, waste release and general care for the pet, which also protects other tenants and project property.

Violations

If the Authority determines on the basis of objective fact, supported by written statement, that a pet owner has violated a rule governing the keeping of pets, it will serve a notice of pet rule violation to the owner in accordance with Section 243.22 (f) of the Federal Regulations. The notice will contain the facts and statements required by the pet owner. A notice of pet removal may be served thereafter, followed by commencement of proceedings to remove a pet or terminate a pet owner's tenancy, all as prescribed by and set forth in Section 243.22.

Health Threat

1. The Authority will not permit the presence of a common household pet to constitute a serious threat to the health of a tenant or prospective tenant, or any member of his or her family. For the purpose of these rules, a pet will constitute a serious threat to the health of an individual only if the individual (or his or her parent or guardian) has filed with the Authority a certificate signed by a licensed physician indicating that exposure to the pet will cause an allergic reaction that will constitute such a threat to the individual. The certificate must describe the type of exposure (such as direct contact or

presence in the same room, elevator, or common area), duration of exposure, the types or groups of animals (such as long hair, fur-bearing animals), and any other information relevant to ascertaining the nature and extent of the circumstances that will cause such a reaction.

2. The Authority will therefore refuse to admit an applicant for tenancy if the applicant will own or keep a pet in the dwelling unit, and the presence of the pet will cause serious threat to the health of a tenant or a resident member of the tenant's family. The Authority will not refuse to admit the applicant if the applicant agrees not to keep the pet in the unit.

3. The Authority will also deny the application by an existing tenant for approval of a prospective pet, if the pet will constitute a serious health threat as described above.

4. The Authority will comply with the provisions of 24 CFR 243.26 ("Special rules for health threats and tenant moves") when a pet or a proposed pet will constitute a serious health threat. That section, as from time to time amended, is incorporated into these rules by reference and will control Authority decisions, tenant moves and other matters, including "pet" and "no pet" waiting lists.

Emergencies

1. If a pet becomes vicious, displays symptoms of severe illness or demonstrates other behavior that constitutes an immediate threat to the health or safety of the project tenants, the Authority may request the pet owner immediately to remove the pet from the rental housing project. If the Authority is unable to contact the pet owner, the Authority may contact the appropriate state or local authority (or designated agent of such authority) to have the pet immediately removed from the project premises.

2. If the health or safe of a pet is threatened by the death or incapacity of the pet owner, or by factors that render the pet owner unable to care for the pet, the Authority may contact the responsible party. If the party is either unwilling or unable to care for the pet, the Authority may contact the appropriate state or local authority (or designated agent of such an authority) and request the removal of the pet. If there is no state or local authority (or designated agent of such an authority) authorized to remove a pet and the Authority as placed a provision in the lease agreement as described in Section 243.30 (b), the Authority may enter the pet owner's unit, remove the pet and place the pet in a facility that will provide care and shelter for no less than thirty days. The cost of the animal care facility will be paid from the security deposit imposed under these rules. If there is not security deposit, the cost of the animal care facility shall be paid from the project expense.

Exclusion

These rules do not apply to animals that are used to assist the handicapped. This exclusion applies to animals that reside in projects for the elderly or handicapped, as well as to animals that visit these projects. Resident animals must qualify for this exclusion, which must be granted if the tenant or the prospective tenant certifies in writing that:

1. The tenant or a member of his or her family is handicapped.
2. The animal has been trained to assist persons with that specific handicap;
and
3. The animal actually assists the handicapped individual.

No-Pet Areas

Schedule "A" attached to and made a part of these rules shows the buildings, floors of buildings or sections of buildings designated by the Authority as areas for occupancy by tenants for whom the presence of a pet will constitute a serious health threat. These will be determined as defined in the House rules for each site.

Attachment I

Community Service Requirements

Objective: All Public Housing Residents, except exempt persons, are required to contribute 8 hours per month of community service or participate in an economic self-sufficiency program for eight (8) hours per month; or a combination thereof.

Notification to Public Housing Residents of Community Service Requirement - Public Housing Residents are notified of the Community Service Requirement:

- prior and at the time of their move-in
- at the time of their Lease Renewal or Interim rent change (if applicable)
- in the Community's Monthly Newsletter
- at the time of Community Resident Meetings

A Public Housing Resident may complete their required hours by participating in:

- NCHA Family Self-Sufficiency Program; or
- any other self-sufficiency program that is administered by the city, county or state. A private agency is also acceptable as long as the agency's resources are the same or similar to the resources of the city, county or state, and the program's primary goal is to provide the necessary tools for a family to be self-sufficient.

Notification to Residents of North Charleston Housing Authority Family Self-Sufficiency Program (FSS)– On a periodic basis, depending on move-ins of new residents, the FSS Coordinator will hold FSS meetings at all of the NCHA's Public Housing Communities to promote residents' participation in the FSS Program.

Documentation by Resident -Residents are to document their completed Community Service Hours by:

- submitting to the community's office a completed Record of Community Service and Volunteer Activities form

Verification of Hours - Public Housing Managers are to verify their completed Community Service Hours by

- completing a Monthly Log for each Household and their applicable family members
- quarterly review of residents' Record of Community Service and Volunteer Activities form

Residents who do not Comply during Lease Term - Residents who are not complying with the Community Service Hours Requirement during the term of their lease will be:

- sent a quarterly letter of non-compliance to the family member(s)

Residents who fail to Comply – Residents who failed to comply with the requirement of Community Service Hours:

- will be sent a letter sixty to ninety days *prior* to their Lease Renewal advising them that they must complete the necessary hours in order for their lease to be renewed.
- Residents who do not comply will not have their lease renewed.

Attachment B

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: North Charleston Housing Authority		Grant Type and Number Capital Fund Program No: SC16P05750104 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004
Original Annual Statement		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2007		<input type="checkbox"/>		<input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$246,466.00	\$289,297.00	\$289,297.00	\$289,297.00
3	1408 Management Improvement Soft Costs	\$20,000.00	\$20,000.00	\$20,000.00	\$20,351.00
	Management Improvement Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$153,000.00	\$110,169.00	\$110,169.00	\$110,169.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$350,000.00	\$350,000.00	\$350,000.00	\$6,199.00
9	1450 Site Improvement	\$100,000.00	\$100,000.00	\$100,000.00	\$94,830.00
10	1460 Dwelling Structures	\$232,222.00	\$232,222.00	\$232,222.00	\$232,237.00
11	1465.1 Dwelling Equipment-Non-expendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	Contingency	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Annual Grant: (sum of lines...)	\$1,101,688.00	\$1,101,688.00	\$1,101,688.00	\$753,083.00
	Amount of Line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
	Collateralization Expenses or Debt Services	\$0.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director and Date		Signature of Public Director or Office of Native American Program Administrator & Date:			
George L. Saldana 01/30/2008					

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P05750104 Replacement Housing Factor Grant No:	Federal FY of Grant: 2004
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Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status
				Original	Revised	Obligated	Expended	
HA-Wide Operations	Operations	1406		246,466.00	289,297.00	289,297.00	289,297.00	Completed
	Total 1406			246,466.00	289,297.00	289,297.00	289,297.00	
HA-Wide Mngt Impr.	Sundry Costs	1408		20,000.00	20,000.00	20,000.00	20,351.00	Completed
	Total 1408			20,000.00	20,000.00	20,000.00	20,351.00	
HA-Wide Administration	Salary Modernization Coordinator	1410		50,000.00	25,972.00	25,972.00	25,972.00	Completed
	Salary Executive Director	1410		23,000.00	23,905.00	23,905.00	23,905.00	Completed
	Salary Cood Admin Sercs	1410		10,000.00	10,752.00	10,752.00	10,752.00	Completed
	Salary Director of Finance	1410		16,000.00	16,766.00	16,766.00	16,766.00	Completed
	Salary Accountant	1410		11,000.00	11,543.00	11,543.00	11,543.00	Completed
	Salary Director of Public Hsg. Mngt	1410		10,000.00	0.00	0.00	0.00	Completed
	Fringe Benefits	1410		18,000.00	19,744.00	19,744.00	19,744.00	Completed
	Office Supplies	1410		15,000.00	1,487.00	1,487.00	1,487.00	Completed
	Total 1410			153,000.00	110,169.00	110,169.00	110,169.00	
HA-Wide Site Acquisition	Site Acquisition	1440		350,000.00	350,000.00	350,000.00	6,199.00	In Progress
	Total 1440			350,000.00	350,000.00	350,000.00	6,199.00	
PHA-Wide	Site Improvement	1450		100,000.00	100,000.00	100,000.00	94,830.00	In Progress
	Total 1450			100,000.00	100,000.00	100,000.00	94,830.00	
Dwelling-Str	Dwelling Structures - Liberty Hill	1460		232,222.00	132,222.00	132,222.00	208,061.00	Completed
	Dwelling Structures - PHA Wide	1460		0.00	100,000.00	100,000.00	24,176.00	Completed
	Total 1460			232,222.00	232,222.00	232,222.00	232,237.00	
GRAND TOTAL				1,101,688.00	1,101,688.00	1,101,688.00	753,083.00	

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P05750104 Replacement Housing Factor Grant No:	Federal FY of Grant: 2004
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Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	9/13/2006	9/13/2006		9/13/2008	9/13/2008		

Attachment C

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: North Charleston Housing Authority		Grant Type and Number Capital Fund Program No: SC16P05750105 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:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2007		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$400,000.00	\$482,280.00	\$482,280.00	\$482,280.00
3	1408 Management Improvement Soft Costs	\$30,000.00	\$30,000.00	\$30,000.00	\$30,000.00
	Management Improvement Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$200,000.00	\$117,720.00	\$117,720.00	\$90,531.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$30,000.00	\$150,000.00	\$150,000.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$200,000.00	\$5,000.00	\$5,000.00	\$0.00
10	1460 Dwelling Structures	\$267,198.00	\$267,198.00	\$267,198.00	\$116,507.00
11	1465.1 Dwelling Equipment-Non-expendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$75,000.00	\$75,000.00	\$0.00
13	1475 Non-dwelling Equipment	\$50,000.00	\$50,000.00	\$50,000.00	\$52,682.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	Contingency	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Annual Grant: (sum of lines...)	\$1,177,198.00	\$1,177,198.00	\$1,177,198.00	\$772,000.00
	Amount of Line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
	Collateralization Expenses or Debt Services	\$0.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director and Date		Signature of Public Director or Office of Native American Program Administrator & Date:			
George L. Saldana 01/30/2008					

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P05750105 Replacement Housing Factor Grant No:	Federal FY of Grant: 2005
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Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status
				Original	Revised	Obligated	Expended	
HA-Wide Operations	Operations	1406		400,000.00	482,280.00	482,280.00	482,280.00	Completed
	Total 1406			400,000.00	482,280.00	482,280.00	482,280.00	
HA-Wide Mngt Impr.	Sundry Costs	1408		30,000.00	30,000.00	30,000.00	30,000.00	Completed
	Total 1408			30,000.00	30,000.00	30,000.00	30,000.00	
HA-Wide Administration	Salary Modernization Coordinator	1410		55,875.00	38,385.00	38,385.00	24,837.00	In Progress
	Salary Executive Director	1410		28,875.00	19,465.00	19,465.00	16,791.00	In Progress
	Salary Cood Admin Sercs	1410		15,875.00	7,938.00	7,938.00	6,717.00	In Progress
	Salary Director of Finance	1410		21,875.00	12,287.00	12,287.00	10,396.00	In Progress
	Salary Accountant	1410		16,875.00	8,437.00	8,437.00	7,139.00	In Progress
	Salary Director of Public Hsg. Mngt	1410		15,875.00	7,204.00	7,204.00	5,983.00	In Progress
	Fringe Benefits	1410		23,875.00	17,691.00	17,691.00	12,355.00	In Progress
	Office Supplies	1410		20,875.00	6,313.00	6,313.00	6,313.00	Completed
	Total 1410			200,000.00	117,720.00	117,720.00	90,531.00	
HA-Wide Fees Costs	Architect & Engineering	1430		30,000.00	150,000.00	150,000.00	0.00	In Progress
	Total 1430			30,000.00	150,000.00	150,000.00	0.00	
PHA-Wide	Site Improvement	1450		200,000.00	5,000.00	5,000.00	0.00	In Progress
	Total 1450			200,000.00	5,000.00	5,000.00	0.00	

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P05750105 Replacement Housing Factor Grant No:	Federal FY of Grant: 2005
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Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status
				Original	Revised	Obligated	Expended	
Dwell- Str SC057-002	Dwelling Structures- Liberty Hill	1460		267,198.00	267,198.00	267,198.00	116,507.00	In Progress
	Total 1460			267,198.00	267,198.00	267,198.00	116,507.00	
PHA-Wide N-Dwell Structures	Renovation PHA Maintenance Office/ Community Building	1470		0.00	75,000.00	75,000.00	0.00	In Progress
HA-Wide Non Dwell Equipt	Purchase Vehicle	1475		50,000.00	50,000.00	50,000.00	52,682.00	Completed
	Total 1502			50,000.00	50,000.00	50,000.00	52,682.00	
	Grand Total			1,177,198.00	1,177,198.00	1,177,198.00	772,000.00	

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: SC16P05750105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005	
Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide Operations	6/30/2007	8/17/2007		6/30/2009	8/17/2009		
HA-Wide Mngt. Improvements	6/30/2007	8/17/2007		6/30/2009	8/17/2009		
HA-Wide Administration	6/30/2007	8/17/2007		6/30/2009	8/17/2009		
HA-Wide Site Acquisition	6/30/2007	8/17/2007		6/30/2009	8/17/2009		
PHA-Wide Site Improvements	6/30/2007	8/17/2007		6/30/2009	8/17/2009		
Dwelling Structures SC057-002	6/30/2007	8/17/2007		6/30/2009	8/17/2009		

Attachment D

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: North Charleston Housing Authority		Grant Type and Number Capital Fund Program No: SC16P05750106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>12/31/2007</u>				<input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$238,323.00	\$238,323.00	\$238,323.00	\$1,476.00
3	1408 Management Improvement Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Management Improvement Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Non-expendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	Contingency	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Annual Grant: (sum of lines...)	\$238,323.00	\$238,323.00	\$238,323.00	\$1,476.00
	Amount of Line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
	Collateralization Expenses or Debt Services	\$0.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director and Date George L. Saldana 12/31/2007		Signature of Public Director or Office of Native American Program Administrator & Date:			

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P05750106 Replacement Housing Factor Grant No:	Federal FY of Grant: 2006
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Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide Operations	6/30/2008	7/17/2008		6/30/2010	7/17/2010		

Attachment E

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: North Charleston Housing Authority		Grant Type and Number Capital Fund Program No: Replacement Housing Factor Grant No: SC16R05750108			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: 1)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____		<input type="checkbox"/> _____		<input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvement Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Management Improvement Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Non-expendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$572,372.00	\$0.00	\$0.00	\$0.00
19	Contingency	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Annual Grant: (sum of lines...)	\$572,372.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
	Collateralization Expenses or Debt Services	\$0.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director and Date		Signature of Public Director or Office of Native American Program Administrator & Date:			

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R05750108	Federal FY of Grant: 2008
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Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Development Activities	6/30/2010			6/30/2012			

Attachment F

Capital Fund Program Five-Year Action Plan Part I: Summary					
PHA Name NORTH CHARLESTON 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 <u>2</u> FFY Grant: <u>2009</u> PHA FY: <u>2009</u>	Work Statement for Year <u>3</u> FFY Grant: <u>2010</u> PHA FY: <u>2010</u>	Work Statement for Year <u>4</u> FFY Grant: <u>2011</u> PHA FY: <u>2011</u>	Work Statement for Year <u>5</u> FFY Grant: <u>2012</u> PHA FY: <u>2012</u>
	Annual Statement				
HA-Wide (1406)		Operations	Operations	Operations	Operations
HA-Wide (1408)		Management Improvements Soft Costs	Management Improvements Soft Costs	Management Improvements Soft Costs	Management Improvements Soft Costs
HA-Wide (1410)		Administration	Administration	Administration	Administration
HA-Wide (1411)		Audit	Audit	Audit	Audit
HA-Wide 1475)		Non-Dwelling Equipment	Non-Dwelling Equipment	Non-Dwelling Equipment	Non-Dwelling Equipment
CFP Funds Listed for 5-year planning		\$278,128.00	\$278,128.00	\$278,128.00	\$278,128.00
Replacement Housing Factor Funds		\$839,733.00	\$839,733.00	\$839,733.00	\$839,733.00

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: <u>2009</u> PHA FY: <u>2009</u>			Activities for Year: <u>3</u> FFY Grant: <u>2010</u> PHA FY: <u>2010</u>		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual Statement	HA-Wide	Operations	\$55,625.00	HA-Wide	Operations	\$55,625.00
	HA-Wide	Management Improvements Soft Costs	\$55,625.00	HA-Wide	Management Improvements Soft Costs	\$55,625.00
	HA-Wide	Administration	\$27,813.00	HA-Wide	Administration	\$27,813.00
	HA-Wide	Audit	\$10,000.00	HA-Wide	Audit	\$10,000.00
	HA-Wide	Non-Dwelling Equipment	\$129,065.00	HA-Wide	Non-Dwelling Equipment	\$129,065.00
	Total CFP Estimated Cost		\$278,128.00			\$278,128.00

Attachment J

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: North Charleston Housing Authority		Grant Type and Number Capital Fund Program No: Replacement Housing Factor Grant No: SC16R05750107			Federal FY of Grant: 2007
X Original Annual Statement Performance and Evaluation Report for Period Ending:		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: 1) Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvement Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Management Improvement Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Non-expendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$574,671.00	\$0.00	\$0.00	\$0.00
19	Contingency	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Annual Grant: (sum of lines...)	\$574,671.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
	Collateralization Expenses or Debt Services	\$0.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director and Date George L. Saladana, Executive Director 09/06/2007		Signature of Public Director or Office of Native American Program Administrator & Date:			

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R05750107	Federal FY of Grant: 2007
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Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Development Activities	9/12/2009			9/12/2011			

Attachment K

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: North Charleston Housing Authority		Grant Type and Number Capital Fund Program No: SC16P05750107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007
X Original Annual Statement Performance and Evaluation Report for Period Ending:		___ Reserve for Disasters/Emergencies		___ Revised Annual Statement (revision no:) Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$274,058.00	\$0.00	\$274,058.00	\$0.00
3	1408 Management Improvement Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Management Improvement Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Non-expendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	Contingency	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Annual Grant: (sum of lines...)	\$274,058.00	\$0.00	\$274,058.00	\$0.00
	Amount of Line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
	Collateralization Expenses or Debt Services	\$0.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director and Date George L. Saldana, Executive Director		Signature of Public Director or Office of Native American Program Administrator & Date:			

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P05750107 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007
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Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide Operations	9/12/2009			9/12/2011			

Attachment L

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: North Charleston Housing Authority		Grant Type and Number Capital Fund Program No: SC16P05750108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008
X Original Annual Statement Performance and Evaluation Report for Period Ending:		___ Reserve for Disasters/Emergencies		___ Revised Annual Statement (revision no:) Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$55,625.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvement Soft Costs	\$55,625.00	\$0.00	\$0.00	\$0.00
	Management Improvement Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$27,813.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$10,000.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Non-expendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$129,065.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	Contingency	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Annual Grant: (sum of lines...)	\$278,128.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Security-Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
	Collateralization Expenses or Debt Services	\$0.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director and Date George L. Saldana, Executive Director 06/06/2008		Signature of Public Director or Office of Native American Program Administrator & Date:			

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P05750108 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status
				Original	Revised	Obligated	Expended	
HA-Wide Operations	Operations	1406		55,625.00	0.00	0.00	0.00	
	Total 1406			55,625.00	0.00	0.00	0.00	
Mngt Impr PHA-Wide	Sundry Expense	1408		55,625.00	0.00	0.00	0.00	
	Total 1408			55,625.00	0.00	0.00	0.00	
Admin PHA-Wide	Admin Salaries & Benefits	1410		27,813.00	0.00	0.00	0.00	
	Total 1410			27,813.00	0.00	0.00	0.00	
Audit PHA Wide	Auditing Fee	1411		10,000.00	0.00	0.00	0.00	
	Total 1411			10,000.00	0.00	0.00	0.00	
N-Dwell Eq PHA-Wide	Computer Software/Hardware	1475		129,065.00	0.00	0.00	0.00	
	Total 1475			129,065.00	0.00	0.00	0.00	
	GRAND TOTAL			278,128.00	0.00	0.00	0.00	

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

PHA Name: NORTH CHARLESTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P05750108 Replacement Housing Factor Grant No:
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Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)		
	Original	Revised	Actual	Original	Revised	Actual
HA-Wide Operations	6/12/2010			6/12/2012		

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Federal FY of Grant: 2008

Reason for Revised Target Dates

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